

EIGHT (8) FAIR & AFFORDABLE TOWNHOMES w/ACCESSORY APARTMENT

TOWNHOMES AT HIDDEN MEADOW

38-45 Muscoot River Road, Town of Somers, Westchester County, New York 10598

Submission Deadline: January 27, 2025 | Lottery: February 6, 2025

Lottery sets order in which Applications are reviewed

Apply On-Line at housingactioncouncil.org or
Mail or Hand Deliver This Completed Application to:

Housing Action Council at: 55 South Broadway, 1st Floor, Tarrytown, NY 10591

Maximum Income Limits as of April, 2024

(Income limits are subject to change)

3 Person	4 Persons	5 Persons	6 Persons
\$112,500	\$124,950	\$134,950	\$144,950

Minimum Occupancy Requirements - Must have at least 3 persons in household to be eligible.

ESTIMATED AFFORDABLE SALE PRICE - THREE BEDROOMS - \$275,000

1. APPLICANT INFORMATION:

Name: _____

Address: _____ Apt#: _____

City: _____ State: _____ Zip: _____

Main Phone: _____ Secondary Phone: _____

SSN/ITIN (last 4 digits): _____ DOB: _____ Gross Income: _____

Email: _____ Do you use your email regularly? _____

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



2. CO-APPLICANT INFORMATION:

Name: _____

Address: _____ Apt#: _____

City: _____ State: _____ Zip: _____

Main Phone: _____ Secondary Phone: _____

SSN/ITIN (last 4 digits): _____ DOB: _____ Gross Income: _____

Email: _____ Do you use your email regularly? _____

3. HOUSEHOLD COMPOSITION:

Number of Household Members _____ Total Household Income _____

	NAME	RELATIONSHIP TO HEAD OF HOUSEHOLD	DATE OF BIRTH	SS# (Last 4 Digits)	OCCUPATION	STUDENT Y/N
Applicant						
Co-App						

Have there been any changes in household composition in the last twelve months? Yes No

If yes, explain:

Do you anticipate any changes in household composition in the next twelve months? Yes No

If yes, explain:

Is there someone not listed above who would normally be living in the household? Yes No

If yes, explain:

Are you living with anyone now who will not be moving into this apartment with you? Yes No

If yes, explain:

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
 Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



4. STATISTICAL INFORMATION (Optional)

a. The following information is requested for statistical purposes so that Westchester County and the New York State Housing Trust Fund Corporation may determine the degree to which its programs are utilized by people of different racial & ethnic backgrounds.

RACIAL GROUP IDENTIFICATION: Used for statistical purposes only. (Please check only one from this group for the head of household only).

Single Race

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Other Pacific Islander

Multi-Race

- American Indian or Alaska Native & White
- Asian & White
- Black or African American & White
- American Indian or Alaska Native & Black or African American
- Other Multi Racial

b. **ETHNICITY:** (check **only one** from this group) Hispanic Non-Hispanic

c. Prefer not to answer

5. CURRENT RESIDENCE:

What is your Current Monthly Rent or Mortgage Payment \$ _____

How long have you lived at your current residence? _____

Is any portion of your rent subsidized? Yes No Agency Name: _____

Check Utilities paid monthly by you now:

- \$ _____ Heat \$ _____ Electricity \$ _____ Gas \$ _____ Water \$ _____ Other

6. EMPLOYMENT:

HOUSEHOLD MEMBER NAME:	
EMPLOYER:	
POSITION HELD:	
HOW LONG EMPLOYED:	MONTHLY GROSS INCOME:

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



EMPLOYMENT (cont'd):

HOUSEHOLD MEMBER NAME:	
EMPLOYER:	
POSITION HELD:	
HOW LONG EMPLOYED:	MONTHLY GROSS INCOME:

PREVIOUS EMPLOYMENT (within last 60 days)

HOUSEHOLD MEMBER NAME:	
EMPLOYER:	
POSITION HELD:	
HOW LONG EMPLOYED:	MONTHLY GROSS INCOME:

7. OTHER SOURCES OF INCOME:

List ALL sources of income as requested below. If a section doesn't apply, write "NA" for not applicable.

Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	\$
	Social Security	\$
	SSI Benefits	\$
	SSI Benefits	\$
	Pension (list source)	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Unemployment Compensation	\$
	Child Support Payments	\$
	Public Assistance (Title IV/TANF etc.)	\$
	Contributions to the Household (monetary or not)	\$

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
 Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



	Other Financial Aid (excluding loans)	\$
	Regular payouts from Annuities (list sources)	\$
	Long Term Medical Care Insurance Payments in excess of \$180/day	\$
	Scheduled Payments from Investments (e.g. 403(b) & 401(k), interest dividends (specify source)	\$

Are you legally entitled to receive alimony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list the amount the amount you are entitled to receive:	
Do you receive alimony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list the amount you receive	

ADDITIONAL INCOME: (If Any)
(Baby-sitting, care-giving, income from rental property)

Source:		Monthly Amount:	\$
Source:		Monthly Amount:	\$

8. ASSETS

If a section doesn't apply, cross out or write NA.			
Checking Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Savings Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Direct Deposit Cards for SS, SSI, SSP, TANF, Child Support and Work	#	Bank	Balance \$
	#	Bank	Balance \$

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



ASSETS (cont'd)			
Certificates of Deposit	#	Bank	Balance \$
	#	Bank	Balance \$
Money Market Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Trust Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Savings Bond	#	Maturity Date	Value \$
	#	Maturity Date	Value \$
Life Insurance Policy	#		Cash Value \$
	#		Cash Value \$
Mutual Funds/ Name	# of Shares	Interest or Dividend \$	Value \$
Stocks/ Bonds	# of Shares	Interest or Dividend \$	Value \$

9. REAL ESTATE PROPERTY AND OTHER ASSETS

Do you own any property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Type of property	
Address of property	
Estimated Market Value	\$
Mortgage or outstanding loan balance	\$
Amount of annual insurance premium	\$

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
 Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



Amount of Real estate taxes	\$
Is the property subject to foreclosure, bankruptcy or eviction?	
If yes, describe	

Does any member of the household have an asset(s) owned jointly with a person who is NOT a member of your household?
 Yes No

If yes, describe:

Do they have access to the asset(s)? Yes No

Have you sold/ disposed of any property in the last 2 years? Yes No

If yes, type of property:

Market Value when sold/disposed	\$
---------------------------------	----

Amount sold/ disposed for	\$
---------------------------	----

Date of transaction	
---------------------	--

Have you disposed of any other assets in the last 2 years? Yes No
 (Example: Given away money to relatives, set up Irrevocable Trust Accounts)

If yes, describe the asset:

Date of disposition	
---------------------	--

Amount of disposition	\$
-----------------------	----

Do you have any other assets not listed above (excluding personal property)? Yes No

If yes, please list:

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
 Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505



CERTIFICATION

If qualified and selected, I/We certify that this will be my/our permanent residence. I/We understand that my/our eligibility for housing will be based on applicable income limits and by underwriting criteria. I/We certify that all information in this Application is true to the best of my/our knowledge and I/We understand that false statements or information are punishable by law and will lead to cancellation of this Application.

I/We agree to authorize Housing Action Council Inc. or their agents to use this copy of my/our signature(s) as approval to verify my/our, employment, any other source of income, and assets in connection with my/our Application. All verifications will be sent directly back to those authorized and will be used only for purposes connected with this Application.

ALL MEMBERS OF HOUSEHOLD 18 AND OVER MUST SIGN THIS APPLICATION

SIGNATURE (S):

Applicant _____ Date: _____

Co-Applicant _____ Date: _____

**APPLICANTS ARE ENCOURAGED TO SUBMIT MORTGAGE LOAN
PRE-APPROVALS WITH THIS APPLICATION**

**THE FOLLOWING DOCUMENTATION WILL BE REQUESTED AFTER THE LOTTERY
PRIOR TO QUALIFICATION**

- \$50 Fee for Credit Report
- 2023 + 2022 **W2's or 1099's** and **Federal Tax Returns** with all Schedules
- **If self-employed**, 2023 + 2022 Federal Tax Returns **AND** Profit & Loss Statement (1/1/24 - 9/30/24)
- 6 Most Recent Pay Stubs & recent documentation on any other source of income, e.g. social security, pension, disability, annuity payments
- 6 Most Recent Bank, Credit Union, and Investment Statements (**all pages**)
- Most Recent Retirement Fund Account Statements (e.g. 403b, 401k)
- Valid Government issued Photo ID (e.g. Driver's License or Passport)

For Information & Application - Contact: Housing Action Council
(914) 332-4144 | hac@affordablehomes.org | www.housingactioncouncil.org

Complete offering terms are in a Homeowners Association Offering Plan available from the Sponsor: Plan ID: H200003
Sponsor: Hidden Meadow at Somers LLC, 57 Route 6, Suite 207, Baldwin Place, NY 10505

