



CHT COOPERATIVE HOUSING

Most of us understand renting or owning; cooperative housing is a third option. A housing cooperative is a member-owned business that manages the housing, and co-op members are both residents of the co-op and shareholders (owners) in the business. While co-ops aren't for everyone, they're ideal for people who want to be involved with their neighbors in creating a community.

Financially, joining a co-op is like renting: members do not buy any real estate. However, unlike regular rental properties, co-op members share the responsibilities that a homeowner or landlord typically handles – they manage their budget, set policies, oversee repairs and solve problems. Depending on the roles they take on, members typically spend 4 to 10 hours a month on co-op duties. This level of security, control, and responsibility amounts to an ownership mindset without the financial investment of buying a home.

We have six co-ops in the Burlington area with a total of 121 apartments. The co-ops range in size: the smallest, House of Hildegard, has just three apartments, while the Bright Street co-op has forty – each with its own character. We see an average of six to eight vacancies a year among all of our co-ops, and since openings are hard to predict, people who need housing within a few months should also look for rentals. To find out more about our co-ops, please go to www.getahome.org/coops.

STEPS TO CO-OP HOUSING MEMBERSHIP

1. **Submit a Rental Application and Co-op Addendum.**

This allows us to add you to the waitlists of the co-ops that interest you. We do not process the application until there is a vacancy you might qualify for. At that time, we ask if you are still interested and allow you to update any information on your application.

2. **CHT processes your application & schedules a co-op orientation.** Our office checks your:

- A. Credit History
- B. Housing References
- C. Income
- D. Criminal Background
- E. Character References

During this time, we will contact you to schedule a co-op orientation. We forward the relevant results to the co-op's interview team. (We do not send financial specifics or SSNs.) The team then decides if they want to invite the applicant in for an interview.

3. Interview with the co-op. If your application meets the basic membership criteria (see page 2), someone from the Member Selection committee will contact you to set up an interview with all the adults in your household.

4. Recommendation & Board Decision. After interviews, the committee recommends approval or denial to the co-op's Board of Directors. The Board makes the final decision to approve or deny an application.

The unit is filled based on the initial application date of all approved applicants. Approved applicants who do not get the unit are kept on the waiting list until another unit opens up. Applicants will not need to go through the interview and orientation process again.

** Denied applicants receive a letter stating the reasons for denial. You can appeal if you feel the decision was unfair or incorrect.*

5. **Signing Papers & Share Purchase**

If you are offered the unit and accept membership in that co-op, the property manager from Champlain Housing Trust will schedule your move-in and set a time for you to purchase your share and sign all relevant documents.

6. **Move in. Yeah!**

7. Join a committee and start your intentional-community living experience!



CO-OP MEMBER SELECTION CRITERIA

- **Low/Moderate Income:** Applicants must have a combined gross income at or below the income limit for the unit that's coming vacant.
 - **Stability of Income:** A stable source of income. Stability can be shown in various ways.
 - **Household Size:** The household size must match the capacity of the available unit, based on HUD guidelines. Co-ops can set minimum household sizes for bigger units.
- No applicant will be given a unit that would result in overcrowding without Board approval. Each co-op decides whether to set minimum household sizes.
- **Affordability:** Enough income for the available unit to be affordable to the household.
- The definition of "affordable" is that the household's shelter costs don't exceed 50% of its gross income. If they can show a long-term history of paying a higher percent of income for their shelter costs, the co-ops may consider that evidence.
- **Credit History:** Applicants should show financial responsibility, including paying installment debts (e.g. credit cards) timely. If an applicant had past trouble meeting its obligations, they should show a history of meeting reasonable repayment terms.
 - **Rent Payment History:** A history of paying rent or mortgage in full and on time.
 - **Share Cost:** Enough money to pay for the share at move-in.
 - **Property Damage and Disturbances:** No history of disturbing the neighbors, destruction of property, or living or housekeeping habits that might adversely affect the safety, health, or welfare of residents, or result in unusual maintenance services.
 - **Criminal History:** Applicants must describe any convictions. A history of one or more for activities against people (violence, etc.) or property (theft, destruction, fraud), or for any drug-related activity may be taken as evidence of the applicant's inability to participate successfully in a community setting, depending on time of conviction and how they have lived since then. Failure to report convictions of any member of the household will be grounds for rejection of the application.
 - **Ability to Comply with Terms of Lease:** Applicants must be able to fully comply with all terms of the Proprietary Lease and participate in the life of the co-op, either independently or with assistance.
 - **Cooperative Spirit:** Applicants must show a reasonable ability and willingness to cooperatively work with other residents and participate in group decision-making.
 - **Understanding of the Cooperative Model:** Applicants must make a reasonable effort to understand the unique characteristics of cooperative housing.
 - **Participation in Management:** Applicants must show a willingness to spend a limited amount of time every month to participate in the co-op's operations, management, maintenance and/or governance.
 - **Non-discrimination:** Applicants must agree that they and their households will not discriminate against other residents or applicants on the basis of any protected category, including race, sex, age, marital status, religious or political affiliation, color, national origin, sexual orientation, gender, veteran status, presence of physical or mental impairment, having minor children, or receiving public assistance.
 - **Bright Street** does not allow households where all adults are full-time students.

**CHAMPLAIN
HOUSING TRUST**



WWW.GETAHOME.ORG

ROSE STREET ARTISTS' CO-OP

**ADDITIONAL MEMBER SELECTION CRITERION:
COMMITMENT TO THE ARTS**

Any applicant household must have at least one adult who is actively pursuing a career in the arts or arts support. A broad range of categories such as film, video, theatre, dance, performance art, writing, graphic arts, music, architecture, etc. are acceptable. Work itself is not judged; this criterion pertains to the person's commitment to their artistic career.

Applicants must provide career documentation (a current resume, slides, etc.) and a current portfolio.

"ARTIST" MEANS ANY PERSON:

- practicing art, and who offers their professional services for compensation as a creator, interpreter, or performer in artistic endeavors;
- such a person employed or engaged by a producer pursuant to a contract for services or a contract of service; and
- applicants who meet the requirements listed below

The co-op requires at least four of the following criteria, one of which must be (d), (e), or (g), for an applicant to be defined as an artist.

- a) has presented work to the public;
- b) is represented by a dealer, publisher, agent and/or similar representative;

- c) devotes a reasonable proportion of professional time to promoting/marketing their art work;
- d) receives/has received compensation from the art;
- e) has a record of income or loss relevant to the practice of their work;
- f) has received professional training, either in an educational institution, or from a practitioner or teacher recognized within their artistic profession;
- g) has received public or peer recognition in the form of honors, awards, professional recognition;
- h) has membership in a professional association appropriate to their artistic profession; and/or devotes a reasonable proportion of their professional time as an artist in developing their work.

KEEP FOR YOUR RECORDS

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CO-OP CHARGES AND THE INCOME MINIMUMS AND LIMITS, 2023

If your annual household income exceeds the Income Limits in the charts below, you only qualify for Market Rate Apartments.

Some co-ops have a few apartments that have stricter income limits that are not provided in the charts below.

BRIGHT STREET CO-OP (heat included)			Share Purchase: \$50
Apartment Size	Charge per Month*	Minimum Yearly Household Income	TAX CREDIT INCOME LIMITS (Maximum yearly gross household income)
1-bedroom	\$754 - \$1,168	\$19,623	1 Person: \$47,760
2-bedroom	\$937 - \$1,304	\$24,672	2 People: \$54,540
3-bedroom	\$1,299 - \$1,632	\$33,912	3 People: \$61,380
4-bedroom	\$1,958	\$50,352	4 People: \$68,160
			5 People: \$73,620

FLYNN AVENUE CO-OP			Share Purchase: \$500
Apartment Size	Charge per Month*	Minimum Yearly Household Income	INCOME LIMITS (Maximum yearly gross household income)
1-bedroom	\$830 - \$1,134	\$23,928	1 Person: \$65,280
2-bedroom	\$1,019 - \$1,471	\$29,520	2 People: \$74,560
3-bedroom	\$1,386 - \$1,712	\$39,288	3 People: \$83,920
			4 People: \$93,200
			5 People: \$100,720

HOUSE OF HILDEGARD CO-OP			Share Purchase: \$12,000**
Apartment Size	Charge per Month*	Minimum Yearly Household Income	INCOME LIMITS (Maximum yearly gross household income)
2-bedroom	\$1,000	\$29,064	1 Person: \$65,280
			2 People: \$74,560
			3 People: \$83,920
			4 People: \$93,200
			5 People: \$100,720

* In the co-ops where carrying charges fall within a range, the monthly charge for a certain available apartment is dependent upon the tax credit designation of said apartment. When a prospective member household is contacted by the property manager, they will be apprised of the carrying charges for the vacancy they may possibly occupy.

** \$12,000 or more, depending on the amortization of the share which the previous tenant paid upon move-in.



KEEP FOR YOUR RECORDS

CHAMPLAIN HOUSING TRUST



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CO-OP CHARGES AND THE INCOME MINIMUMS AND LIMITS, 2023

If your annual income exceeds the Tax Credit Income Limits in the charts below, you only qualify for Market Rate Apartments.

Some co-ops have a few apartments that have stricter income limits that are not provided in the charts below.

QUEENSBURY CO-OP			Share Purchase: \$50
Apartment Size	Charge per Month*	Minimum Yearly Household Income	TAX CREDIT INCOME LIMITS (Maximum yearly gross household income)
2-bedroom	\$788 - \$1,035	\$23,976	1 Person: \$48,960
3-bedroom	\$918 - \$1,549	\$28,056	2 People: \$55,920
			3 People: \$62,940
			4 People: \$69,900
			5 People: \$75,540

ROSE STREET ARTISTS' CO-OP (heat included)			Share Purchase: \$50
Apartment Size	Charge per Month*	Minimum Yearly Household Income	TAX CREDIT INCOME LIMITS (Maximum yearly gross household income)
Studio	\$757	\$19,464	1 Person: \$48,960
1-bedroom	\$787	\$21,072	2 People: \$55,920
2-bedroom	\$955	\$25,656	3 People: \$62,940
3-bedroom	\$1,087	\$28,824	4 People: \$69,900
			5 People: \$75,540

THELMA MAPLE CO-OP			Share Purchase: \$50
Apartment Size	Charge per Month*	Minimum Yearly Household Income	TAX CREDIT INCOME LIMITS (Maximum yearly gross household income)
1-bedroom	\$614	\$18,744	1 Person: \$48,960
2-bedroom	\$750	\$23,064	2 People: \$55,920
3-bedroom	\$810	\$25,464	3 People: \$62,940
			4 People: \$69,900
			5 People: \$75,540

* In the co-ops where carrying charges fall within a range, the monthly charge for a certain available apartment is dependent upon the tax credit designation of said apartment. When a prospective member household is contacted by the property manager, they will be apprised of the carrying charges for the vacancy they may possibly occupy.





For Office Use Only
Date/time received

ADDENDUM FOR COOPERATIVE HOUSING

Please check the properties, and bedroom numbers you are interested in. *Individual co-ops may set minimum household sizes for number of bedrooms.* For information, visit www.getahome.org/coops.

<input type="checkbox"/>	Bright Street Co-op (1, 2, 3 & 4-bedrooms) Old North End, Burlington
<input type="checkbox"/>	Flynn Avenue Co-op (1, 2 & 3-bedrooms) South End, Burlington
<input type="checkbox"/>	Rose Street Artist's Co-op (studio, 1, 2 & 3-bedrooms) Old North End, Burlington
<input type="checkbox"/>	Thelma Maple Housing Co-op (1, 2 & 3-bedrooms) Old North End, Burlington
<input type="checkbox"/>	House of Hildegard Co-op (2-bedrooms) Old North End, Burlington
<input type="checkbox"/>	Queensbury Co-op (2 & 3-bedrooms), South Burlington

Studio *Rose St Only*
 1 BDRM
 2 BDRM
 3 BDRM
 4 BDRM *Bright St Only*

INSTRUCTIONS: This addendum must be accompanied by a Champlain Housing Trust rental housing application. Please answer all questions carefully and completely since this information will be used to determine your eligibility.

Have you a completed a Champlain Housing Trust Rental Application? If Yes, please continue.	<input type="radio"/> Yes <input type="radio"/> No
In addition to your coop selection do you want to be considered for tax credit and market rate apartments?	<input type="radio"/> Yes <input type="radio"/> No

HOUSEHOLD COMPOSITION: Complete the following information for each person who will live in your apartment.

#1 First	Last	Relationship
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Social Security Number	Birth Date (mm/dd/yyyy)	Sex
<input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/>	<input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/>	<input type="radio"/> M <input type="radio"/> F <input type="radio"/> NB
#2 First	Last	Relationship
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Social Security Number	Birth Date (mm/dd/yyyy)	Sex
<input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/>	<input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/>	<input type="radio"/> M <input type="radio"/> F <input type="radio"/> NB
#3 First	Last	Relationship
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Social Security Number	Birth Date (mm/dd/yyyy)	Sex
<input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/>	<input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/>	<input type="radio"/> M <input type="radio"/> F <input type="radio"/> NB
#4 First	Last	Relationship
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Social Security Number	Birth Date (mm/dd/yyyy)	Sex
<input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/>	<input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/>	<input type="radio"/> M <input type="radio"/> F <input type="radio"/> NB
#5 First	Last	Relationship
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Social Security Number	Birth Date (mm/dd/yyyy)	Sex
<input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/> - <input style="width: 30%;" type="text"/>	<input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> - <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/> / <input style="width: 10%;" type="text"/>	<input type="radio"/> M <input type="radio"/> F <input type="radio"/> NB

GENERAL INFORMATION

How much do you pay for housing now? \$

What are your reasons for moving?

SHARE PURCHASE

The share is \$50 for Bright Street, Queensbury, Rose Street and Thelma Maple, \$500 for Flynn Avenue, and for House of Hildegard, \$12,000 or more, depending on the amortization of the share which the previous tenant paid upon move-in.

If accepted for membership, will you be able to buy the co-op share in full? Yes No

CO-OP MEMBERSHIP INFORMATION

How did you first learn about cooperative housing?

Why do you want to join a housing cooperative; what do you know about them?

List skills and experience, including working in groups and volunteering, that could be useful in running a housing co-op:

(Rose St. Artists' Co-op only) Summarize your artistic activities. (Also attach a resume of your art career):

Co-ops rely on member participation to run the co-op and build community. Are you prepared to regularly give time and energy to take on tasks and attend meetings? Yes No

If "No," please explain:

Co-ops are committed to providing housing to people regardless of their political or religious affiliation, race, color, national origin, age, sex, sexual orientation, gender, marital status, veteran status, physical or mental impairment, intent to occupy the dwelling with one or more children, or receipt of public assistance. Yes No

Do you agree with this commitment?

If "No," please explain:

CHARACTER REFERENCES: List at least three references for each adult in your household who can speak to your teamwork and problem-solving skills, such as neighbors, coworkers, fellow volunteers, teachers, etc. **Do not list friends or family members.**

#1 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#1 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#1 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#2 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#2 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#2 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#3 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#3 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

#3 Household Member <input type="text"/>	Reference Name <input type="text"/>	Years Known <input type="text"/>
Relationship to Applicant <input type="text"/>	Phone Number (with area code) <input type="text"/> - <input type="text"/> - <input type="text"/>	Email <input type="text"/>

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY
BEFORE SIGNING THIS APPLICATION:**

Certification

I hereby certify that I do/will not maintain a separate subsidized rental unit in another location. I further certify that this will be my/our permanent residence. I understand I must pay a security deposit for this apartment. I understand that my eligibility for housing will be based on the cooperatives' selection criteria. I certify that all information in this application is true to the best of my knowledge and I understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy.

Authorization

I understand that the information contained in this application will be used to determine my eligibility for housing. I grant consent for the management to make any and all inquiries to verify the information, with rental, criminal and credit screening services, and to contact previous and current landlords or other sources for credit, and verification of other information which may be released to appropriate Federal, State or Local agencies.

I authorize management to obtain one or more "credit and consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S.C. Section 1681a(d), seeking information on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

In the event my application is approved, I also give my consent for Champlain Housing Trust and/or its assigned credit bureau to obtain additional credit reports and other information after approval of my credit, both in connection with the same Transaction or an extension of credit; to obtain credit reports, criminal background checks and other information for account review purposes and other legitimate purposes associated with the account.

Furthermore, I understand that providing any false or misleading information will make me ineligible for rental assistance and may result in prosecution by the United States Government. Therefore, I certify that all of the above information is true and complete to the best of my knowledge and belief.

ALL MEMBERS OF THE HOUSEHOLD (18 YEARS AND OLDER) MUST SIGN THIS APPLICATION.

Signature – Head of Household		Print Name	Date
<input type="text"/>		<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Head of Household Phone Number		Head of Household Email Address	
<input type="text"/> - <input type="text"/>		<input type="text"/>	
Signature – Other Adult Household Member		Print Name	Date
<input type="text"/>		<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member		Print Name	Date
<input type="text"/>		<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member		Print Name	Date
<input type="text"/>		<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Submit Your Completed and Signed Application:

IN PERSON: Drop off your completed application at 88 King Street, Burlington

BY MAIL: 88 King Street, Burlington, VT 05401

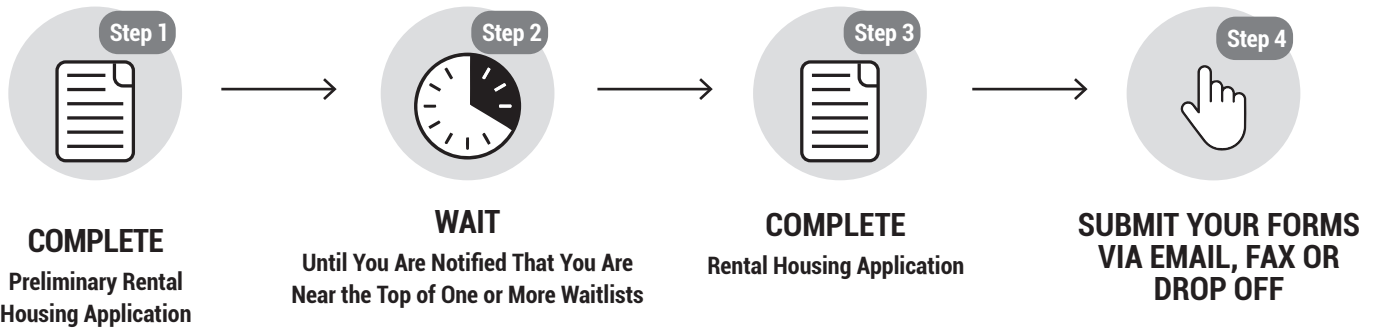
EMAIL: email the application to applications@champlainhousingtrust.org

FAX: 802-862-5054

Champlain Housing Trust does not discriminate on the basis of any protected status, including disability, in the admission of or access to, or treatment or employment in its programs and activities. Champlain Housing Trust provides persons with disabilities the opportunity to request a Reasonable Accommodation in order to apply to and participate in such programs and activities. Champlain Housing Trust also provides people whose primary language isn't English and as a result have limited English proficiency the opportunity to request free language assistance in order to apply to or participate in its programs and activities. Josie Curtin coordinates Champlain Housing Trust compliance with all nondiscrimination requirements, including Section 504. Contact her with any questions or concerns relating to Champlain Housing Trust compliance with nondiscrimination requirements: Telephone (802) 862-6244 or Champlain Housing Trust, 88 King Street, Burlington, VT 05401

APPLYING FOR RENTAL HOUSING

We do not offer emergency housing. If you need emergency housing, please call 211 to be connected with Vermont Economic Services.



EMAIL: applications@getahome.org **FAX:** (802-862-5054) OR **MAIL/DROP OFF:** 88 King Street, Burlington, VT 05401 or 13 Lake St, St. Albans, VT 05478
 For information on how your application is reviewed, see our Tenant Selection Policy in our APPLY TO RENT section under RENTING at www.getahome.org

> How Long Will I Have to Wait to Get Offered an Apartment?

Applicants may wait over **15 months** after submitting a Preliminary Application before moving onto the next step. **We cannot guarantee when** you will be offered an apartment once you become an approved applicant. **If you need housing sooner** than that or need to know exactly when you will be moving, **you will want to explore other options.**

> What Do I Qualify For? (see chart at right).

(Voucher holders qualify for both tax-credit and market-rate apartments, regardless of income.)

# of People in Household	Annual Minimum Income	Market Rate Income
1	\$22,800	\$47,760
2	\$22,800	\$54,540
3	\$27,600	\$61,380
4	\$27,600	\$68,160
5	\$31,800	\$73,620
6	\$31,800	\$79,080
7	\$36,000	\$84,540
8	\$36,000	\$90,000

If your household income is below the Annual Minimum income, you may be added to Waitlists as a Preliminary Applicant but cannot move forward unless your income has reached the Annual Minimum.

• TAX-CREDIT APARTMENT

For applicants whose income is between the **Annual Minimum Income** and **Market Rate Income**.

• MARKET-RATE APARTMENT

For applicants whose income is the same or higher than the **Market Rate Income**.

• SUBSIDIZED APARTMENT

You may apply to our **SUBSIDIZED PROPERTY WAITLISTS** (households pay 30% of their income toward rent) by visiting the following link: www.getahome.org/subsidized-apartment/ (please note, you will have to apply to each subsidized property separately).

> If I Qualify for Tax-Credit, How is My Rent Determined?

It is important to understand that your rent is NOT based on a percentage of your income. A tax-credit apartment has a fixed rent that is **cheaper than what most apartments of that size are currently renting for in the area** (market rate).

> What Will My Rent Be If I Move to a CHT Apartment? (Effective January 1, 2024. Prices are subject to change.)

CHITTENDEN COUNTY Apartment Rent		
Bedroom Size	Tax Credit	Market Rate
Studio	\$1,050	\$1,341
1	\$1,150	\$1,441
2	\$1,375	\$1,887
3	\$1,650	\$2,390
4	\$1,850	\$2,764

FRANKLIN & GRAND ISLE COUNTY Apartment Rent		
Bedroom Size	Tax Credit	Market Rate
Studio	\$950	\$1,341
1	\$1,050	\$1,441
2	\$1,275	\$1,887
3	\$1,550	\$2,390
4	\$1,750	\$2,764

If you do not speak or read English, we will provide interpretation services at no cost to you. Tell the person who is helping you that you need an interpreter or for more information call 802-862-6244.

Ako ne govorite ili čitate engleski, besplatno ćemo vam pružiti usluge prevođenja. Recite osobi koja vam pomaže da vam je potreban prevodilac ili pozovite 802-862-6244 da dobijete više informacija.

إذا كنت لا تتحدث الإنجليزية أو تقرأها، فسنقدم لك خدمات الترجمة الفورية مجاناً. أخبر الشخص الذي يساعدك بأنك بحاجة إلى مترجم فوري أو للحصول على مزيد من المعلومات، يرجى الاتصال بـ 802-862-6244.

Si no habla ni lee en inglés, prestaremos servicios de interpretación sin costo para usted. Avísele a la persona que lo esté ayudando que usted necesita un intérprete o, para obtener más información, llame al 802-862-6244.

Si vous ne parlez pas ou ne lisez pas l'anglais, nous vous fournirons des services d'interprétation gratuits. Indiquez à votre interlocuteur que vous avez besoin d'un(e) interprète ou pour plus d'informations, appelez le 802-862-6244.

तपाईं अङ्ग्रेजी बोल्नुहुन्न वा पढ्नुहुन्न भने, हामी तपाईंलाई निःशुल्क रूपमा दोभाषे सेवाहरू उपलब्ध गराउने छौं। तपाईंलाई दोभाषेको आवश्यकता भएको बेला मद्दत गरिरहेका व्यक्तिलाई बताउनुहोस् वा थप जानकारीका लागि 802-862-6244 मा फोन गर्नुहोस्।

Soki yo okoki te koloba to kotanga Anglais, tokosunga yo na bolimboli ekozala ya ofele. Yebisa moto oyo azali kosunga yo ete yo esengeli ozala na moto ya bolimboli nto mpona koyeba makambo misusu benga 802-862-6244.

Nếu quý vị không nói hoặc không đọc được tiếng Anh, chúng tôi sẽ cung cấp dịch vụ thông dịch miễn phí cho quý vị. Hãy nói với người đang giúp quý vị rằng quý vị cần thông dịch viên hoặc để biết thêm thông tin, hãy gọi số 802-862-6244.

如果您不会讲英语或读英语，我们将免费为您提供口译服务。告诉您的协助人员您需要口译员，或致电 802-862-6244 了解更多信息。

Haddii athy engky hathylaany amy eng akhriye korny Af-Ingiriis, wayba ky siyye doongny etheeg turjumaang oo bilaash eh. Eng sheeg langky ky kaalmeeyow in athy eng baahangty turjumaang amy walaaghy warbihing siyaathy eh weer 802-862-6244.

Ikiwa huna uwezo wa kuzungumza au kusoma Kiingereza, tutatoa huduma za ukalimani bila malipo. Mwambie mtu anayekusaidia kuwa unahitaji mkalimani au piga simu kwa 802-862-6244 ili upate maelezo zaidi.

หากคุณไม่สามารถพูดหรืออ่านภาษาอังกฤษได้ เราจะให้บริการล่ามโดยไม่มีค่าใช้จ่าย โดยให้แจ้งบุคคลที่ช่วยเหลือคุณว่าคุณต้องการล่ามหรือข้อมูลเพิ่มเติม โดยโทร 802-862-6244

Haddii aadan ku hadlin ama akhriin karin af Ingiriiska, waxaan kuu samayn doonaa adeegyada turjumaanka oo bilaash ah. U sheeg qofka ku caawinaaya inaad u baahan tahay turjumaan ama xog dheeraad ah wac 802-862-6244.



RENTAL HOUSING APPLICATION

For Office Use Only	<input type="checkbox"/> BHA MOU	Date/time received
	<input type="checkbox"/> PB Waitlist	
	<input type="checkbox"/> Resident Services	

HEAD OF HOUSEHOLD and CONTACT INFORMATION

#1 First	Middle	Last	Relationship Head of Household
Social Security Number			Full Time Student
<input type="checkbox"/> Yes <input type="checkbox"/> No			Birth Date (mm/dd/yyyy)
<input type="checkbox"/> M <input type="checkbox"/> F			Sex

Home Phone Number	Cell Phone Number
Email Address	Preferred Communications:
	<input type="checkbox"/> Email <input type="checkbox"/> Mail

Current Address	Mailing Address (if different than current)
Address line 2	Address line 2
City	City
State	State
ZIP	ZIP

Do you currently: <input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Other (Please Explain below)	When did you move to your current address?
	(mm/yy) <input type="text"/> / <input type="text"/>

Current Landlord (if applicable)	Landlord Address
Landlord Phone Number	Address line 2
Landlord Email	City
	State
	ZIP

Are you currently homeless?	<input type="radio"/> Yes <input type="radio"/> No
Are you applying to live with a current Champlain Housing Trust resident?	<input type="radio"/> Yes <input type="radio"/> No
If yes, which resident and what address?	<input type="text"/>
Have you, or any member of your household ever lived in Champlain Housing Trust housing?	<input type="radio"/> Yes <input type="radio"/> No
If yes, when and what address?	<input type="text"/>
Do you require an interpreter?	<input type="radio"/> Yes <input type="radio"/> No
If Yes, what is your primary language?	<input type="text"/>

Additional Household Members Complete the following information for each person who will live in your apartment.

Minors can only be listed if you have 50% or more custody.

#2 First <input type="text"/>	Middle <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Full Time Student <input type="radio"/> Yes <input type="radio"/> No	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

#3 First <input type="text"/>	Middle <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Full Time Student <input type="radio"/> Yes <input type="radio"/> No	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

#4 First <input type="text"/>	Middle <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Full Time Student <input type="radio"/> Yes <input type="radio"/> No	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

#5 First <input type="text"/>	Middle <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Full Time Student <input type="radio"/> Yes <input type="radio"/> No	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

#6 First <input type="text"/>	Middle <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Full Time Student <input type="radio"/> Yes <input type="radio"/> No	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

Will anyone else live with you in the next 12 months who is not listed on this application? Yes No

If Yes, please explain.

WAITLIST SECTION

Please check the waitlists you are interested in. For more information, see our website or review pages 9-13 of this application packet.

<input type="checkbox"/> Avenue Apartments Housing Burlington	<input type="checkbox"/> South Meadow Apt. Burlington	<input type="checkbox"/> Falls Housing Enosburg Falls	<input type="checkbox"/> Anderson Parkway South Burlington	<input type="checkbox"/> Congress Street St. Albans
<input type="checkbox"/> King Street Housing Burlington	<input type="checkbox"/> Waterside Housing Burlington	<input type="checkbox"/> Cedar's Edge Housing Essex Junction	<input type="checkbox"/> Dorset Commons South Burlington	<input type="checkbox"/> Blake Commons Swanton
<input type="checkbox"/> Laurentide Burlington	<input type="checkbox"/> Brookside Village Housing, Colchester	<input type="checkbox"/> Grand Isle Housing Grand Isle	<input type="checkbox"/> Garden Street South Burlington	<input type="checkbox"/> Maple Tree Place Williston
<input type="checkbox"/> Old North End Properties Burlington	<input type="checkbox"/> Fort Apartments Colchester	<input type="checkbox"/> Green Street Housing Hinesburg	<input type="checkbox"/> Lime Kiln Housing South Burlington	<input type="checkbox"/> Pinecrest Williston
<input type="checkbox"/> Park Place Burlington	<input type="checkbox"/> Stuart Avenue Colchester	<input type="checkbox"/> Richmond Village Housing, Richmond	<input type="checkbox"/> O'Dell Housing South Burlington	<input type="checkbox"/> Zephyr Place Williston
<input type="checkbox"/> Salmon Run Burlington	<input type="checkbox"/> Winchester Place Colchester	<input type="checkbox"/> Shelburne Properties Shelburne	<input type="checkbox"/> St. Albans Properties St. Albans	<input type="checkbox"/> Winooski Properties Winooski

Please check the apartment sizes you are interested in:

Studio 1 Bedroom 2 Bedroom 3 Bedroom 4 Bedroom

Previous Housing List all places that you have lived in the past five (5) years **for every adult in the household**, not including your present housing. If you lived in a family member's or friend's home, indicate by checking "other". **Make Copies of this page as needed.**

Applicant Name			Dates You Lived There (mm/yy)		
<input type="text"/>			□□ / □□ TO □□ / □□		
Previous Address			Landlord Name		
<input type="text"/>			<input type="text"/>		
Previous Address line 2			Landlord Phone Number		
<input type="text"/>			□□□ - □□□□ - □□□□□□		
City	State	ZIP	Landlord Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Other (Please Explain) <input type="text"/>					

Applicant Name			Dates You Lived There (mm/yy)		
<input type="text"/>			□□ / □□ TO □□ / □□		
Previous Address			Landlord Name		
<input type="text"/>			<input type="text"/>		
Previous Address line 2			Landlord Phone Number		
<input type="text"/>			□□□ - □□□□ - □□□□□□		
City	State	ZIP	Landlord Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Other (Please Explain) <input type="text"/>					

Applicant Name			Dates You Lived There (mm/yy)		
<input type="text"/>			□□ / □□ TO □□ / □□		
Previous Address			Landlord Name		
<input type="text"/>			<input type="text"/>		
Previous Address line 2			Landlord Phone Number		
<input type="text"/>			□□□ - □□□□ - □□□□□□		
City	State	ZIP	Landlord Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Other (Please Explain) <input type="text"/>					

Applicant Name			Dates You Lived There (mm/yy)		
<input type="text"/>			□□ / □□ TO □□ / □□		
Previous Address			Landlord Name		
<input type="text"/>			<input type="text"/>		
Previous Address line 2			Landlord Phone Number		
<input type="text"/>			□□□ - □□□□ - □□□□□□		
City	State	ZIP	Landlord Email		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Other (Please Explain) <input type="text"/>					

Income Please list **all sources of income** for each person who will live in the apartment.

Employment Income Be sure to list gross (before taxes) dollar amounts and where the income comes from.

Household Member Name <input type="text"/>	Employer <input type="text"/>	Gross Weekly Salary \$ <input type="text"/>
Household Member Name <input type="text"/>	Employer <input type="text"/>	Gross Weekly Salary \$ <input type="text"/>
Household Member Name <input type="text"/>	Employer <input type="text"/>	Gross Weekly Salary \$ <input type="text"/>

Other Income Enter all other sources of income including child support, pension/annuity, Social Security (SSI, SSDI), Reach-up, unemployment, and other periodic payments, etc. Note: food stamps and fuel assistance are not included as "other income".

Household Member Name <input type="text"/>	Income Source <input type="text"/>	Gross Monthly Amount \$ <input type="text"/>
Household Member Name <input type="text"/>	Income Source <input type="text"/>	Gross Monthly Amount \$ <input type="text"/>
Household Member Name <input type="text"/>	Income Source <input type="text"/>	Gross Monthly Amount \$ <input type="text"/>

Do you currently have a Section 8 Housing Choice Voucher? Yes No

If "Yes," which public housing authority?

Assets / Bank & investment accounts Please list all accounts such as checking, savings, retirement accounts, stocks, 401K's etc. held by each person who will live in your apartment. Attach a separate sheet of paper, if needed

Household Member Name / Account Holder <input type="text"/>	Bank/Institution <input type="text"/>	Type of Account <input type="text"/>	Current Balance \$ <input type="text"/>
Household Member Name / Account Holder <input type="text"/>	Bank/Institution <input type="text"/>	Type of Account <input type="text"/>	Current Balance \$ <input type="text"/>
Household Member Name / Account Holder <input type="text"/>	Bank/Institution <input type="text"/>	Type of Account <input type="text"/>	Current Balance \$ <input type="text"/>

Other Assets

Do you own real estate? Yes No

If "Yes," where is it located? Market Value \$

Is this property rented to others? Yes No

Does anyone applying own any other asset not already listed? **(Do not include furniture. Do not include motor vehicles used for personal transportation.)** Yes No

If "Yes," please describe. Market Value \$

Do you or any member of the household receive regular gifts or contributions from any person or organization? Gifts or contributions include cash, non-cash items, bills paid on your behalf, or items paid on your behalf. Yes No

If "Yes," please describe.

Received From <input type="text"/>	How Often (i.e. monthly) <input type="text"/>	Amount \$ <input type="text"/>
---------------------------------------	--	-----------------------------------

General Information

Do you require a handicapped/accessible apartment? If you answered "Yes", please explain	<input type="radio"/> Yes <input type="radio"/> No	
Are you requesting a reasonable accommodation to enable you to live in this apartment?	<input type="radio"/> Yes <input type="radio"/> No	
Will you or any member of your household require a live-in attendant?	<input type="radio"/> Yes <input type="radio"/> No	
Do you require a service or emotional support animal?	<input type="radio"/> Yes <input type="radio"/> No	
Have you or any member of your household been a full-time student in the past year or plan to enroll as a full-time student in the upcoming year? <i>(Please list all household members who are full-time students)</i>	<input type="radio"/> Yes <input type="radio"/> No	
Household Member Name	Household Member Name	Household Member Name
<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Household Member Name	Household Member Name	Household Member Name
<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Have you ever been evicted or have any eviction proceedings ever been started against you?	<input type="radio"/> Yes <input type="radio"/> No	
If you answered "Yes", please explain and provide dates	Dates	
<input style="width:70%;" type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
Has anyone in your household ever been convicted of a crime or are there any pending criminal charges against you?	<input type="radio"/> Yes <input type="radio"/> No	
If you answered "Yes", provide the charge, mark Felony or Misdemeanor, and provide the date of the charge. <i>Failure to provide this information may jeopardize the approval of this application.</i>	Dates (mm/yy)	
Charge: <input style="width:40%;" type="text"/> <input type="radio"/> Felony <input type="radio"/> Misdemeanor	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
Charge: <input style="width:40%;" type="text"/> <input type="radio"/> Felony <input type="radio"/> Misdemeanor	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	
Is anyone in your household subject to a registration requirement under a state sex offender registration program? <i>Failure to answer this question may jeopardize the approval of this application.</i>	<input type="radio"/> Yes <input type="radio"/> No	
Do you have any pets? <i>Most Champlain Housing Trust properties do not allow dogs as pets</i>	<input type="radio"/> Yes <input type="radio"/> No	
What Type?	How Many?	
<input style="width:70%;" type="text"/>	<input style="width:20%;" type="text"/>	

Champlain Housing Trust is an equal opportunity housing provider. We do not discriminate on account of race, sex, sexual orientation, color, age, familial status, marital status, religion, national origin, U.S. military veteran status, disability, gender identity, gender-related characteristics or because a person is a recipient of public assistance, including Section 8 housing assistance.

If you are willing to help us with the US Government survey regarding racial/ethnic heritage, please complete the following information about the head/co-head of your household. You do not have to give this information, as it is not required to determine your eligibility. It is being used for statistical purposes to be sure that everyone receives assistance on a fair basis.

Ethnicity <i>(Mark one)</i>	<input type="radio"/> Not Hispanic or Latino <input type="radio"/> Hispanic or Latino	
Race <i>(Mark one or more)</i>		
<input type="checkbox"/> American Indian/Alaska native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African-American
<input type="checkbox"/> Native Hawaiian or other Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Other <input style="width:100%;" type="text"/>

Additional Contact Information Please provide the names of anyone who helped you with the application process.
(i.e. friend, relative, caseworker)

Name <input type="text"/>	Relationship <input type="text"/>	Email Address <input type="text"/>
Name <input type="text"/>	Relationship <input type="text"/>	Email Address <input type="text"/>

Do we have permission to contact the people above for assistance with your application? Yes No

Are you working with any of the following agencies? (check all that apply)

<input type="checkbox"/> AALV	<input type="checkbox"/> Howard Center	<input type="checkbox"/> Safe Harbor	<input type="checkbox"/> Steps To End DV
<input type="checkbox"/> BHA	<input type="checkbox"/> NCSS	<input type="checkbox"/> Samaritan House	<input type="checkbox"/> Veterans Administration
<input type="checkbox"/> COTS	<input type="checkbox"/> Pathways	<input type="checkbox"/> Spectrum	<input type="checkbox"/> Voices Against Violence
<input type="checkbox"/> Other <input type="text"/>			

Do we have permission to contact the agencies above for assistance with your application? Yes No

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION:

I understand that the information contained in this application will be used to determine my eligibility for housing. I grant consent for the management to make any and all inquiries to verify the information, with rental, criminal and credit screening services, and to contact previous and current landlords or other sources for credit, and verification of other information which may be released to appropriate Federal, State or Local agencies.

I authorize management to obtain one or more "credit and consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S.C. Section 1681a(d), seeking information on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

In the event my application is approved, I also give my consent to have Champlain Housing Trust and/or its assigned credit bureau to obtain additional credit reports and other information after approval of my credit, both in connection with the same Transaction or an extension of credit; to obtain credit reports, criminal background checks and other information for account review purposes and other legitimate purposes associated with the account.

Furthermore, I understand that providing any false or misleading information will make me ineligible for rental assistance and may result in prosecution by the United States Government. Therefore, I certify that all of the above information is true and complete to the best of my knowledge and belief.

ALL MEMBERS OF THE HOUSEHOLD (18 YEARS AND OLDER) MUST SIGN THIS APPLICATION.

Signature – Head of Household <input type="text"/>	Print Name <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member <input type="text"/>	Print Name <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member <input type="text"/>	Print Name <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member <input type="text"/>	Print Name <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Signature – Other Adult Household Member <input type="text"/>	Print Name <input type="text"/>	Date <input type="text"/> / <input type="text"/> / <input type="text"/>



6 THINGS TO REVIEW BEFORE SUBMITTING YOUR APPLICATION

- 1** Is all of your personal and contact information correct and up-to-date? Yes
• Birthdates • SSN • Current Address • Phone Number/Email address
-
- 2** Did you list complete previous housing information for all members age 18+ for the last 5 years? Yes
• Renting or not Renting • Dates • Landlords & Contact Info • Mailing Addresses
-
- 3** Is your income information accurate, clear, and complete? Yes
• Employment • Social Security • Reach Up • Unemployment • Other
-
- 4** Make sure you have answered all of the General Information questions on page 5. Yes
• Be Clear • Be Honest
-
- 5** Have all household members who are 18 years old or older signed and dated the application on page 6? Yes
-
- 6** Have you checked off the boxes next to the waitlists you would like to be on (pages 7-11)? Yes
-

Submit Your Completed and Signed Application:

IN PERSON: Drop off your completed application at our Burlington or St. Albans Office

BY MAIL: 88 King St., Burlington VT, 05401 or 13 Lake Street, St. Albans, VT 05478

EMAIL: email the application to applications@getahome.org

FAX: 802-862-5054, Burlington or 802-527-2373, St. Albans

Champlain Housing Trust does not discriminate on the basis of any protected status, including disability, in the admission of or access to, or treatment or employment in its programs and activities. Champlain Housing Trust provides persons with disabilities the opportunity to request a Reasonable Accommodation in order to apply to and participate in such programs and activities. Champlain Housing Trust also provides people whose primary language isn't English and as a result have limited English proficiency the opportunity to request free language assistance in order to apply to or participate in its programs and activities. Josie Curtin coordinates Champlain Housing Trust compliance with all nondiscrimination requirements, including Section 504. Contact her with any questions or concerns relating to Champlain Housing Trust compliance with nondiscrimination requirements: Telephone (802) 862-6244 or Champlain Housing Trust, 88 King Street, Burlington, VT 05401





TENANT SELECTION POLICY

Statement of Equal Opportunity/Non-Discrimination

Champlain Housing Trust strongly supports the goals of equal access to housing and will comply with Title VI of the Civil Rights Act of 1964; Title VIII of the Civil Rights Act of 1968; Executive Order 11063; and the Age Discrimination Act of 1975; Section 504 of the Rehabilitation Act of 1973; Executive Order 11246 and with any State or Local law prohibiting discrimination in housing.

Champlain Housing Trust will not discriminate, deny any household the opportunity to apply for admission, or deny any applicant the opportunity to lease or rent a dwelling unit suitable to its needs if such is available; on account of age, race, color, disability, familial status, national origin, sex, sexual orientation, gender identity or gender-related characteristics or because the applicant intends to occupy the unit with minor children or because the applicant is a recipient of public assistance.

TENANT SELECTION PROCESS

APPLICATIONS

In order to be considered for a Champlain Housing Trust rental, a household must complete and submit a Champlain Housing Trust Rental Application to 88 King Street, Burlington, VT 05401. The application must be filled out completely and signed before it will be processed. If a section of the application does not apply, write "N/A" in the appropriate spot. Incomplete applications will be returned.

Applications may be picked up from all site offices and at the main office located at 88 King Street, Burlington, VT. Applications can also be accessed from the Champlain Housing Trust web site, www.getahome.org. Additionally, applications can be mailed to you by calling the Champlain Housing Trust main number at 802-862-6244 and requesting an application.

ELIGIBILITY

Applicants will be determined eligible if they submit a completed application and meet these requirements:

- Applicants for LIHTC, HOME, PRAC, USDA RD, Section 8 New Construction/Substantial Rehabilitation, HOPWA, Shelter Plus Care, must satisfy the applicable income standards, program restrictions and household size restrictions relative to the size of the apartment.
- Applicants for Market units, must satisfy applicable income standards and program restrictions (if any).

WAITLISTS

Champlain Housing Trust maintains waitlists for all properties, **in order to be added to the waitlist for these properties households must complete a Preliminary Rental Housing Application.** Once a preliminary application is received it is date and time stamped, and households are placed on the waitlist for which bedroom size they are eligible in the date order the it is received. **Once the household nears the top of the waitlist, they will be requested to complete a Rental Housing Application. At that time, they will be screening for eligibility.** Applicants must meet all eligibility requirements for the property and apartment as described above in the Eligibility section. When an apartment becomes available, applicants are contacted in the order they are listed on the waitlist.

Champlain Housing Trust may elect to close current waitlist(s) by following applicable program guidelines, for one or more bedroom size when the average wait is one year or more. In the event a waitlist is closed, it is published on the Champlain Housing Trust website.

In the event a previously closed waitlist is reopened, Champlain Housing Trust will publish that on the Champlain Housing Trust website and at its offices.

INCOME LIMITS

All of these income limits (at right) are based on the median income for a metropolitan statistical area (MSA). This table shows the four income limits as a percentage of median income in an MSA.

INCOME LIMIT	MEDIAN INCOME FOR THE AREA
Low-income limit	80% of median income
60% Limit	60% of median income
Very low-income limit	50% of median income
Extremely low-income limit	30% of median income

INCOME LIMITS BY PROGRAM

SUBSIDY	TYPE OF INCOME LIMIT
Section 8 (pre-1981)	Low, very low, and extremely low-income limit
Section 8 (post-1981)	Very low and extremely low-income limit
Section 202/811 PRACs, <u>except</u> those funded in FY 1995	Very low-income limit
Section 202/811 PRACs funded in FY 1995	Low-income limit

OCCUPANCY STANDARDS

NUMBER OF BEDROOMS	MINIMUM # OF PEOPLE	MAXIMUM # OF PEOPLE
0	1	1
1	1	3
2	2	5
3	3	7
4	4	9

TENANT SCREENING STANDARDS

Tenants will be selected from among a pool of eligible applicants who meet all of the following screening criteria:

ALL APPLICANTS IN THE HOUSEHOLD 18 AND OLDER MUST:

- 1) Have six months of positive credit history or no credit history.
- 2) Demonstrate satisfactory past performance in meeting financial obligations including but not limited to rent payment and payment of utility bills. Negative credit history is a factor for denial if past due amounts total more than \$1,500 per person. We exclude medical bills and student loans.
- 3) Have no convictions of violent crimes, crimes against children or other crimes that may adversely affect the safety, health or welfare of other tenants within the last 7 years for felonies or 3 years for misdemeanors or be listed on the lifetime sex offender registry.
- 4) Provide 5 years of housing history.
- 5) Have positive, formal rental history totaling one year or longer or attend the Rent Right class through CVOEO. A verifiable landlord reference will be obtained. Or have been a homeowner for the entirety of the past five years.
- 6) Have no record of lease violations, eviction, disturbance of neighbors, and destruction of property or housekeeping habits that may adversely affect the safety, health, or welfare of other tenants.
- 7) Demonstrate ability to meet current and projected financial obligations. The applicant's projected rent and utility payments must be under 50% of their gross income to be considered affordable.

In addition, any other criteria may be grounds for an application denial if Champlain Housing Trust determines it might be reasonably expected to affect the applicant's ability to successfully fulfill the responsibilities of the lease. **ANY APPLICANT DETERMINED TO HAVE WILLFULLY MADE FALSE STATEMENTS ON THEIR APPLICATION WILL BE DENIED.**

TENANT SCREENING STANDARDS: APARTMENTS RESERVED FOR HOMELESS HOUSEHOLDS AND SERVICE ENRICHED HOUSING

Tenants will be selected from the Community Housing Review Committee or based on the Memorandum of Understanding with the local partner.

All Applicants must meet the following:

- 1) For homeless preference units, meet the HUD definition of homeless, and
- 2) Meet the requirements in the Tenant Screening Standards above, or
- 3) Have a Service Plan at move-in with a local Service Provider that addresses any barriers to housing
- 4) For service-enriched units, meet the provider's criteria under the applicable Memorandum of Understanding

TENANT SCREENING STANDARDS: MANUFACTURED HOUSING COMMUNITIES

All Applicants must meet the following:

- 1) Have six months of positive credit history, no credit history or show the ability to finance a mobile home purchase.
- 2) Demonstrate satisfactory past performance in meeting financial obligations including but not limited to rent payment and payment of utility bills.
- 3) Have no felonies of any type or convictions of violent crimes, crimes against children or other crimes that may adversely affect the safety, health or welfare of other tenants within the last 10 years or be listed on the lifetime sex offender registry.
- 4) Provide 5 years of housing history.
- 5) Have no record of lease violations, eviction, disturbance of neighbors, and destruction of property or housekeeping habits that may adversely affect the safety, health, or welfare of other mobile home residents.
- 6) Demonstrate ability to meet current and projected financial obligations.

APPLICATION APPEAL PROCESS

Champlain Housing Trust will mail written notice to any denied applicant specifying the reason for denial. A denied applicant has 14 calendar days from the date the denial letter is sent to request an informal meeting to go over the reasons for rejection or to provide additional written documentation for consideration by the Appeals Officer. If written documentation is provided, each reason for the denial of the application must be addressed and explained in detail. No apartment will be held during this period, but if the denial is overturned, the applicant will retain his/her place on the waiting list. A decision will be made by the Appeal Officer within 14 days of receipt of a written appeal or meeting. Applicants can appeal their decision once.

UNIT TRANSFER REQUESTS: A TENANT UNIT TRANSFER WILL BE DEEMED APPROPRIATE FOR ONE OR MORE OF THE FOLLOWING REASONS:

- 1) The household is under-housed
- 2) The household is over-housed
- 3) The household lives in a designated project based unit and is no longer eligible for the program
- 4) The household becomes eligible for a project based voucher and must move to a designated project based unit
- 5) The household is in a designated handicapped accessible unit and doesn't need the features and there is a family in need of the accessibility features of the unit.
- 6) The household needs to move from one municipality to another based on family requirements.
- 7) Ongoing problems with neighbors that have not been able to be resolved by the Property Manager and Director of Resident Services (It must be determined that you are not the cause of these issues and that you have made a reasonable effort to resolve the issues prior to requesting a transfer).
- 8) Tenants are allowed to transfer only one time during their tenancy unless an additional transfer is deemed appropriate by the Director of Property Management.
- 9) Tenants have the right to appeal a unit transfer denial to the Director of Property Management.
- 10) Transfers to a new building at initial occupancy will only be considered for Reasonable Accommodations or at the discretion of the Director of Property Management.

REQUIREMENTS:

- All transfer requests must be made in writing and approved in advance by the Associate Director of Property Management.
- Tenants with an approved transfer request will be added to the waitlists with applications according to the date of their transfer request.
- Tenants with an approved reasonable accommodation to transfer will be given priority over people on the waiting list.
- Tenant must currently be a tenant in good standing and current on their rent.

PROJECT BASED VOUCHER PRIORITY

When a Project Based Voucher (PBV) becomes available at a property, priority will be given to existing residents of that property on the waiting list. If there are no residents listed, we will work with applicants in the order they appear on the waiting list.

REASONABLE ACCOMMODATIONS AND MODIFICATIONS

It is Champlain Housing Trust's policy to provide reasonable accommodation in housing for applicants and residents with disabilities and/or to permit applicants or residents with disabilities to make reasonable modifications where reasonable accommodation and/or modification is necessary to provide those individuals with an equal opportunity to use and enjoy CHT housing.

A resident or an applicant makes a reasonable accommodation or modification request whenever he/she makes clear to CHT staff that he/she is (i) requesting an exception, change, or adjustment to a rule, policy, practice, or service because of his/her disability; or (ii) requesting a structural modification to his/her apartment or to a common area because of his/her disability.

CHT shall make available to all persons applying for an apartment with CHT and to all current CHT residents, notice of the option to request a reasonable accommodation or modification and a form for requesting a reasonable accommodation or modification.

RELOCATIONS

For households being displaced by Champlain Housing Trust development activities they will be given priority on the waiting list.

VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2013

Champlain Housing Trust will not consider incidents of domestic violence, dating violence or stalking as serious or repeated violations of the lease or other "good cause" for termination of assistance, tenancy or occupancy rights of the victim of abuse.

Champlain Housing Trust will not consider criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse.

Champlain Housing Trust may request in writing that the victim, or a family member on the victim's behalf, certify that the individual is a victim of abuse and that the Certification of Domestic Violence, Dating Violence or Stalking, Form HUD-91066, or other documentation as noted on the certification form, be completed and submitted within 14 business days, or an agreed upon extension date, to receive protection under the VAWA. Failure to provide the certification or other supporting documentation within the specified time frame may result in eviction.

Any information submitted, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, or stalking shall be maintained in confidence by CHT and may not be entered into any shared database or disclosed to any other entity or individual, except to the extent that the disclosure is (A) requested or consented to by the individual in writing; (B) required for use in an eviction proceeding; or (C) otherwise required by applicable law.

The foregoing does not limit any otherwise available authority to evict or terminate assistance to a tenant for any violation of a lease not premised on the act of violence in question against the tenant or an affiliated person of the tenant (provided that CHT does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate) or if CHT can demonstrate that an actual and imminent threat to other tenants or individuals employed at or providing service to the property would be present if the assistance is not terminated or the tenant is not evicted.

APPLICANT BEHAVIOR

CHT may deny tenancy to an applicant household if the CHT determines that any member of the household has engaged in repeated harassing behavior or has threatened any violence toward the CHT's agents or staff.

Abusive or violent behavior towards CHT agents or staff includes, but is not limited to verbal as well as physical abuse or violence, use of racial epithets, or other harsh, threatening or discriminatory language, whether written or oral through any and all means/forms of communication, that is customarily used to intimidate may be considered abusive, threatening or violent behavior.

Threatening refers to oral or written threats or physical gestures that communicate intent to abuse, harm or commit violence.

Harassing behavior refers to the act of repeatedly disturbing, alarming, or threatening someone, to the extent that such conduct either causes harm or results in the person complaining of harassment to reasonably fear that harm may be caused to them. Harassing behavior may also include the electronic dissemination to third parties of embarrassing or inaccurate information about staff/agents. It also includes using the legal system to harass the CHT's staff/agents (litigation abuse) by continuously filing retaliatory and frivolous complaints with outside, third party governmental entities whether criminal or civil in nature against the CHT and/or its staff/agents.



CHAMPLAIN HOUSING TRUST



WWW.GETAHOME.ORG

FAIR CREDIT REPORTING ACT

We are hereby informing you of certain information pursuant to the Fair Credit Reporting Act and Fair and Accurate Credit Transactions Act of 2003, 15 U.S.C. §§1681 *et seq.*, as amended by the Consumer Credit Reporting Reform Act of 1996 (Public Law 104-208, the Omnibus Consolidated Appropriations Act for the Fiscal Year 1997, Title II, Subtitle D, Chapter 1).

1. A consumer credit report will be obtained when an application is submitted from the following consumer credit reporting agency:

Equifax

P.O. Box 105873

Atlanta, Georgia 30348

Toll Free Telephone Number: (800) 685-1111

2. Pursuant to Section 615 of the Fair Credit Reporting Act, we are notifying you that the above noted agency only provided information about your credit history. It took no part in making the decision to deny your rental application, nor can it explain why the decision was made.
3. You have certain rights under federal law, as explained in more detail in paragraphs 4 and 5 below. Pursuant to the Fair Credit Reporting Act, you have the right to obtain a copy of your credit report, dispute its accuracy and provide a consumer statement describing your position if you dispute the credit report. If you believe your report is inaccurate or incomplete, you may call the consumer credit reporting agency at the number listed above or write to the credit reporting agency at the listed address.
4. Pursuant to section 612 of the Fair Credit Reporting Act, you have the right to obtain a free copy of your consumer report from the consumer credit reporting agency whose name is listed. You must request the copy within 60 days of the date you received this letter.
5. Pursuant to Section 611 of the Fair Credit Reporting Act, if you dispute any of the information in your report, you have the right to add to your report a "consumer statement" of up to 100 words explaining your position of the item under dispute. Trained personnel are available at the consumer credit reporting agency to help prepare consumer statements.

To request a copy of your Credit Report or send in a Statement or Dispute:

Equifax
P.O. Box 105873
Atlanta, Georgia 30348
(800) 685-1111

LeasingDesk Screening
2201 Lakeside Blvd.
Richardson, Texas 75082
(866) 934-1124

<http://www.realtor.com/consumer-dispute>

