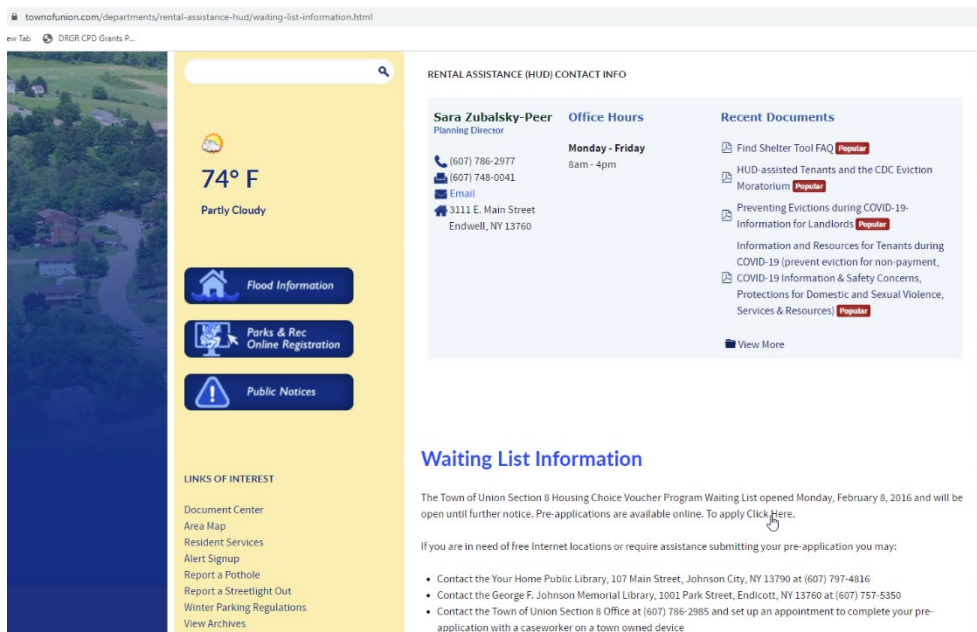
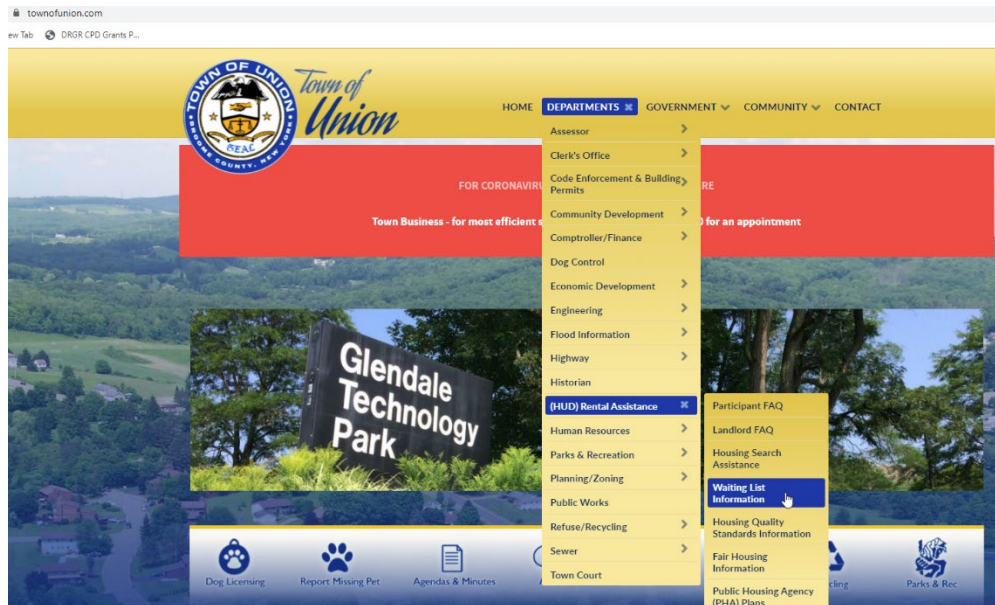


## Town of Union Section 8 Housing Choice Voucher Program WaitListCheck Pre-Application Guide

To apply, go to [www.townofunion.com](http://www.townofunion.com), click “Departments”, go to “HUD/Rental Assistance”, go to “Waiting List Information” and click the “Click Here” link to apply.



The “Click Here” link will take you to the Landing Page; please read the instructions, scroll down and click the blue “Get Started” button.



### TOWN OF UNION Section 8 Rental Assistance Program

3111 East Main Street  
Endwell, New York 13760-5990  
Telephone 607-786-2985/TTY 607-786-2915  
Fax 607-748-0041

English ▼

#### Instructions

Thank you for your interest in the Town of Union Section 8 Housing Choice Voucher Program. The Waiting List is currently open. To apply online you will need to create an account. If you have any questions or require assistance, please contact the office at (607) 786-2985 Monday through Friday from 8AM-4PM. Hearing or speech impaired persons should call the town's TTY/TTD phone number at (607) 786-2915.

Please note, the preliminary application does not guarantee placement on the WaitList and is not an offer of assistance. The WaitList is established to determine the order of selection when funding becomes available. Your pre-application will be reviewed and ranked based on a Local Preference System.

For the purposes of the Local Preference, the Town of Union includes the following communities:

- Endwell (including part-town areas commonly referred to as Westover, Coconut Center, Fairmont Park, and West Corners)
- Endicott (including the Village of Endicott)
- Johnson City (including the Village of Johnson City)
- Town of Vestal

Please note that if you do not qualify for a Local Preference, it is unlikely that your name will reach the top of the list due to the high demand for assistance. Applications will be ranked based on the following preferences:

1. Town of Union residents displaced by a natural disaster (FEMA documentation required)
2. Families who reside in the Town of Union and who work or are hired to work at least 20 hours in the Town of Union, or who receive income based on inability to work
3. Families who reside in the Town of Union but do not meet the above working preference
4. Non-Town of Union residents with a working preference
5. Non-Town of Union residents without a working preference
6. All others

The Town of Union has established the local preferences and applicants will be required to provide documentation for any preferences applied to your household when your name is reached on the WaitList.

If you move after submitting your preliminary application, it is your responsibility to submit an update which is available through the WaitListCheck system.

If the Town of Union is unable to contact you at the address provided, you will be removed from the Waiting List.

To obtain or attempt to obtain housing assistance by committing fraud is a criminal offense under federal and state laws.

[Get Started](#)

Once you click “Get Started” the system will bring you to the WaitListCheck page and you should click “Register Now”

**mri waitlistcheck**

**Town of Union**

Please sign in using your Waitlistcheck or Assistance Connect account. If you don't have an account, click or tap the "Register Now" link below.

Username

Password

[Log On](#) [Not a User Yet? Register Now](#)

[Forgot Password](#)

[Forgot Username](#)

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Once you register your name, email and/or phone, create a password, you will get to the below screen. Click “New Application” at the bottom.

The screenshot shows a web application interface for the Town of Union. At the top is a dark blue header with the text "Town of Union". Below this is a white content area. On the left, there is a logo for the Town of Union and the text "TOWN OF UNION Section 8 Rental Assistance Program". To the right of the logo, contact information is listed: "3111 East Main Street, Endwell, New York 13760-5990, Telephone: 607-786-2985/TTY: 607-786-5915, Fax: 607-748-0041". The main content area is divided into three sections: "Preliminary Applications" with a note about waiting lists, "Open Waiting Lists" with instructions on electronic submission and a list containing "Town of Union NY Section 8 Housing Choice Voucher Program Waiting List", and "Applications" with a note about previously submitted applications and the text "No Applications Found". At the bottom of the content area is a blue button labeled "New Application". The footer contains copyright information: "© 2021, HAPPY Software, an MRE Software Company Terms of Use | Privacy Policy" and an Equal Housing Opportunity logo.

Then you will get a pop up that lets you know some of your information will be pre-filled. Click “Ok”

The screenshot shows a pop-up dialog box titled "Account Information" with a close button (X) in the top right corner. The main text inside the dialog says "Portions of your application will be pre-filled to make it easier for you." At the bottom of the dialog is a blue button labeled "OK".

The first tab you will need to complete is titled “Applicant” (in the tab on the upper left); this is where you fill in all of YOUR personal information.

← Start Over

Town of Union

1 Applicant

2 Household

3 Income

4 Waiting Lists

5 Review

Note: Fields marked with an "\*" are required.

The Social Security Number field is required unless you do not have a valid Social Security Number or Alien Registration Number. If you don't have a valid one, leave it blank and you will be asked to certify in a later step.

Applicant Details

First Name

TOUSample1

\*

Middle Initial

Last Name

Samplesample

\*

Social Security Number

?

Date of Birth

\*

Sex

\*

Ethnicity

\*

Race (select all that apply)

\*

Citizenship

\*

?

Full-Time Student

☐ Yes
☐ No
Clear

Disabled

☐ Yes
☐ No

\*

Note: Ethnicity and Race are collected for statistical purposes only.

Contact Information

Home Number

Mobile Number

Work Number

E-mail

szubalsky@townofunion.com

☐ I agree to receive notifications from the Organization via e-mail. You will still receive a confirmation e-mail if unchecked.

Supplemental and Optional Contact Information

+ Add Contact

You have the right to include as part of your application, contact information for a person or organization that may be able to help you resolve any issues that may arise during your tenancy or to assist in providing any special care or services you may require should you become a tenant. You are not required to provide this contact information, but if you choose to do so, please click the "Add Contact" button.

Back

Continue

Anything with an asterisk next to it is required; you will not be able to complete your application without imputing this information. Anything with a blue circle with an "i" in it; if you click on the "i" icon it will give you more information on the item/information you should provide. Once you fill in the information, click "Continue"

← Start Over

Town of Union

1 Applicant

2 Household

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5 Review

Physical Address

Where you currently live

Street Address

3111 E Main St

\*

Apt/Suite /Other

City

Endwell

\*

State

New York

\*

ZIP Code

13760-\_\_

\*

☒ I receive mail at the same address

Mailing Address

Same as "Physical Address"

Household Members

+ Add Member

List information for adults first, then children under age 18. List relationship of each person to the Head of Household.

Back

Continue

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[Privacy Policy](#)

The next tab is "Household"; this is where you will enter your household information including address and household members. If you have the same physical address as mailing address, you can check the

little box that says “I receive mail at the same address” and the system will auto-fill your information into the mailing address section. Once you enter your address information and information for all of your household members, click continue. You may receive a pop-up message that provides a suggested address based on USPS information.

Address Validation

We could not find an exact match for your Address. However, we have provided a suggested address courtesy of USPS. Would you like to update your Application with the address below?

Your Entry

Street Address: 3111 E Main St

Apt/Suite/Other:

City: Endwell

State: NY

ZIP Code: 13760

USPS Suggestion

Street Address: 3111 E MAIN ST

Apt/Suite/Other:

City: ENDWELL

State: NY

ZIP Code: 13760-5907

Do Not Update Address

Use Suggested Address

We suggest always using the suggested address to ensure your address information matches what the USPS uses for delivery purposes. This will help ensure correspondence from this office will get to you.

If you have other people living with you, click on “+ Add Household Member” and complete the information in the pop-up.

Household Member

The Social Security Number field is required unless the member does not have a valid Social Security Number or Alien Registration Number. If they don't have a valid one, leave it blank and you will be asked to certify in a later step.

First Name

\*

Middle Initial

Last Name

\*

Relationship

\* ▾

?

Social Security Number

?

Date of Birth

▾ ▾ ▾

\*

Sex

\* ▾

Ethnicity

\* ▾

Race (select all that apply)

\*

Citizenship

\* ▾

?

Full-Time Student

☐ Yes

☐ No

Clear

Disabled

☐ Yes

☐ No

\*

Cancel

Save

The next tab is “Income”; here you will click the “+ Add Income” button if you or any household member 18 years of age or older receives wages, military pay, social security, SSI, welfare, child support, unemployment, self-employment, business, professional, or any other income. If you receive NO INCOME you may leave this section blank and will need to self-certify later in the pre-application process that you do not receive any income. When you click “+ Add Income” a pop-up will show and you will need to choose the household member whose income you are reporting, where they receive that income from, how that income is received (ex. hourly, weekly, monthly) and in what amount. The system will automatically calculate the annual income based on the information you provide. Click “Save”.

← Start Over

## Town of Union

✓ Applicant ✓ Household ③ **Income** ④ Waiting Lists ⑤ Review

**Income** + Add Income

List total gross income (before taxes) and payments received by each family member age 18 or older for wages, military pay, pensions, social security, SSI, welfare, child support, unemployment, business, profession, or any other source. Include payments made to family members age 18 or older on behalf of other family members under age 18. If you do not have any income, leave this section blank and you will be asked to certify in a later step.

**Total Annual Income:** \$0.00

**Asset** + Add Asset

List total cash value and total income received for assets owned by all family members.

**Total Cash Value:** \$0.00

Back Continue

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### Income

Family Member TOUSample1 Samplesample \*

Source Name Town of Union \*

Source Address

Apt/Suite /Other

City

State

ZIP Code

Income Type Federal Wage \* ⓘ

Frequency Weekly \*

Amount \$150.00 \*

Annual Amount \$7,800.00

Fixed Income ☐ Yes ☒ No [Clear](#)

Cancel Save

If you or any household member aged 18 or older have any assets you will click the “+ Add Asset” button and list the cash value of the assets. Your expected annual income for your assets would be the amount you earn in dividends/interest or the amount you withdraw and use. Click “Save”.

Once you have entered this information, click “Continue”.

Asset

Family Member

TOUSample1 Samplesample

\*

Source Name

Life Insurance

\*

Source Address

Apt/Suite /Other

City

State

▼

ZIP Code

Asset Type

Life Insurance

\*

Cash Value

\$50,000.00

\*

Expected Annual Income for Asset

\$5.00

\*

Rate of Asset

Cancel

Save

Note: Once you have entered this information, you can click “Edit” to go in and correct any errors you may have made.

List total gross income (before taxes) and payments received by each family member age 18 or older for wages, military pay, pensions, social security, SSI, welfare, child support, unemployment, business, profession, or any other source. Include payments made to family members age 18 or older on behalf of other family members under age 18. If you do not have any income, leave this section blank and you will be asked to certify in a later step.

\$ Town of Union

Family Member:

TOUSample1 Samplesample

Annual Amount:

\$7,800.00

Income Type:

Federal Wage

Edit

Total Annual Income: \$7,800.00

Asset

+ Add Asset

List total cash value and total income received for assets owned by all family members.

\$ Life Insurance

Family Member:

TOUSample1 Samplesample

Cash Value:

\$50,000.00

Asset Type:

Life Insurance

Edit

Total Cash Value: \$50,000.00

Back

Continue

Once you click “Continue”, if you have not input information that the system requires, it will provide you with a checklist once you get to the “Waiting Lists” tab. You can either go back and input the required information or check the little checkboxes certifying that this information does not apply to you.

← Start Over

Town of Union

✓ Applicant

✓ Household

✓ Income

4 Waiting Lists

5 Review

Additional Information Needed

Based on your responses so far, we just need to get a little more information from you.

Social Security Number

The Social Security Number field is required for all members. For those members missing a Social Security Number, please return to the appropriate section and enter it. Or use the checkbox below to certify that any member missing the information, does not have a valid Social Security Number or Alien Registration Number.

☐ I certify that any household member missing a Social Security Number or Alien Registration Number does not have a valid one.\*

No Alternate Contacts

You did not list any alternate contacts. If you would like to include an alternate contact, please return to the Applicant section. If you do not want to include an Alternate Contact, please check the box below.

☐ I do not want to provide an Alternate Contact.\*

Select Your Waiting Lists

Below are the waiting lists that are currently open. Select the Waiting List that you would like to apply to. Based on your selection, a set of questions may need to be answered for the list. Your responses will help determine your eligibility for rental assistance and if you are entitled to a preference when placed on the program's waiting list.

☐ Town of Union NY Section 8 Housing Choice Voucher Program Waiting List

Back

Continue

Then you must select the Waiting List to which you are applying. Click the bubble next to “Town of Union NY Section 8 Housing Choice Voucher Program Waiting List”. Once you click the bubble, the Town of Union Preferences will automatically show up. You must click “Yes” or “No” depending on which situations apply to you.

#### Select Your Waiting Lists

Below are the waiting lists that are currently open. Select the Waiting List that you would like to apply to. Based on your selection, a set of questions may need to be answered for the list. Your responses will help determine your eligibility for rental assistance and if you are entitled to a preference when placed on the program's waiting list.

- ☒ Town of Union NY Section 8 Housing Choice Voucher Program Waiting List

#### Town of Union NY Section 8 Housing Choice Voucher Program Waiting List Preferences

Housing may be contingent upon the submission and verification of evidence of citizenship or eligible immigration status prior to the time housing is made available. Based on the evidence submitted at that time, assistance may be prorated, denied or terminated following appeals and informal hearing processes.

- Do you currently reside within the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) and have at least one adult who is employed to work at least 20 hours in the Town of Union? \*
- Do you currently reside within the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) and the head of household or spouse of head of household is elderly (aged 62 or older) or receiving income based on their inability to work? \*
- Do you currently reside in the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) but do not work, work outside of the Town of Union, or do not receive income based on inability to work? \*
- Do you live outside of the Town of Union (anywhere other than Endwell, Endicott, Johnson City, and Vestal) but receive income from working or receive income based on inability to work? \*
- Do you live outside of the Town of Union (anywhere other than Endwell, Endicott, Johnson City, and Vestal) and do not receive any income? \*
- Do you not meet any of the previously listed criteria? \*

Once you have answered “Yes” or “No” to the Preferences list, click “Continue”. This will bring you to the “Review” tab.



← Start Over

## Town of Union

✔ Applicant   ✔ Household   ✔ Income   ✔ Waiting Lists   ⑤ Review

Please review your application below. If the information provided is true and complete to the best of your knowledge and belief, please click or tap the "Continue" button below. You will then be prompted to certify and submit the application. To add, update, or remove any of the information, please return to the appropriate section using the "Back" button below.



### TOWN OF UNION Section 8 Rental Assistance Program

3111 East Main Street  
Endwell, New York 13760-5990  
Telephone 607-786-2985 TTY 607-786-2915  
Fax 607-748-0041

#### Preliminary Application for the Town of Union

This application must be submitted electronically using this system to create a receipt of application. Paper copies of this form cannot be accepted.

#### Head of Household

First Name:	TOUSample1	Ethnicity:	Not Hispanic or Latino
Middle Initial:		Race (select all that apply):	Black/African American
Last Name:	Samplesample	Citizenship:	Eligible Citizen
Social Security Number:		Full-Time Student:	
Date of Birth (mm/dd/yyyy):	05/01/1981	Disabled:	No
Sex:	Female		

#### Contact Information

Home Number:	E-mail: szubalsky@townofunion.com
Mobile Number:	I agree to receive notifications from the
Work Number:	Organization via E-mail:

#### Physical Address

Where you currently live

Street Address: 3111 E MAIN ST  
Apt/Suite/Other:  
City: ENDWELL  
State: NY  
ZIP Code: 13760-5907

I receive mail at the same address: Yes

#### Mailing Address

Same as "Physical Address"

#### Household Members

Number of People in Household: 1

Number of Dependents: 0

No Additional Household Members

#### Income

Total gross income (before taxes) and payments received by each family member age 18 or older for wages, military pay, pensions, social security, SSI, welfare, child support, unemployment, business, profession, or any other source. Include payments made to family members age 18 or older on behalf of other family members under age 18.

Total Annual Income: \$7,800.00

#### \$ Town of Union

Family Member:	TOUSample1 Samplesample	Income Type:	Federal Wage
Street Address:		Frequency:	Weekly
Apt/Suite/Other:		Fixed Income:	No
City:		Amount:	\$150.00
State:		Annual Amount:	\$7,800.00
ZIP Code:			

#### Asset

Total cash value and total income received for assets owned by all family members.

Total Cash Value: \$50,000.00

#### \$ Life Insurance

Family Member:	TOUSample1 Samplesample	Asset Type:	Life Insurance
Street Address:		Cash Value:	\$50,000.00
Apt/Suite/Other:		Expected Annual Income for Asset:	\$5.00
City:		Rate of Asset:	0
State:			
ZIP Code:			

### Additional Information Needed

Based on your responses, we needed to get a little more information from you.

### Social Security Number

The Social Security Number field is required for all members. For those members missing a Social Security Number, please return to the appropriate section and enter it. Or use the checkbox below to certify that any member missing the information, does not have a valid Social Security Number or Alien Registration Number.

☒ I certify that any household member missing a Social Security Number or Alien Registration Number does not have a valid one.

### No Alternate Contacts

You did not list any alternate contacts. If you would like to include an alternate contact, please return to the Applicant section.

☒ I do not want to provide an Alternate Contact.

### Select Your Waiting Lists

Below are the waiting lists you have selected to apply to. Your responses will help determine your eligibility for rental assistance and if you are entitled to a preference when placed on the program's waiting list.

#### ☐ Town of Union NY Section 8 Housing Choice Voucher Program Waiting List

Housing may be contingent upon the submission and verification of evidence of citizenship or eligible immigration status prior to the time housing is made available. Based on the evidence submitted at that time, assistance may be prorated, denied or terminated following appeals and informal hearing processes.

Do you currently reside within the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) and have at least one adult who is employed to work at least 20 hours in the Town of Union?	Yes
Do you currently reside within the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) and the head of household or spouse of head of household is elderly (aged 62 or older) or receiving income based on their inability to work?	No
Do you currently reside in the Town of Union (including Endwell, Endicott, Johnson City, and Vestal) but do not work, work outside of the Town of Union, or do not receive income based on inability to work?	No
Do you live outside of the Town of Union (anywhere other than Endwell, Endicott, Johnson City, and Vestal) but receive income from working or receive income based on inability to work?	No
Do you live outside of the Town of Union (anywhere other than Endwell, Endicott, Johnson City, and Vestal) and do not receive any income?	No
Do you not meet any of the previously listed criteria?	No

### Supplemental and Optional Contact Information

You have the right to include as part of your application contact information for a person or organization that may be able to help you resolve any issues that may arise during your tenancy or to assist in providing any special care or services you may require should you become a tenant. You are not required to provide this contact information.

No Alternate Contacts

### Certification

By submitting this form, I certify that the information provided is true and complete to the best of my knowledge and belief. Warning! Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly making false statements or misrepresentation to any department or agency of the United States.

Back

Continue

You should review your ENTIRE application before submitting. Please make sure ALL of your information is correct! Please read through the Certification at the bottom and then click “Continue”. You will get a pop-up restating the certification and then either go back to the application to make changes or click “submit”.

Certification

By submitting this form, I certify that the information provided is true and complete to the best of my knowledge and belief. Warning! Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly making false statements or misrepresentation to any department or agency of the United States.

Back to Application

Submit

Once you submit your pre-application, you should print or screenshot the page showing you have submitted your pre-application for your records. You will receive one of a number of messages; if your application is successful, you will receive a message letting you know it was successful. We will not see the pre-application in our system until the next business day. If your pre-application was not successful, you will receive a message letting you know WHY it wasn't successful. A caseworker will work on processing your pre-application and will contact you via USPS mail.