



## **PUBLIC NOTICE!**

# **Armstrong Court Phase 4**

(Low Income Housing Tax Credit Program)

## **3-Bedroom Units**

# **Pre-Applications Now Available!**

**April 2, 2025 – April 23, 2025**



Greenwich Communities are now accepting pre-applications for our 3-bedroom units at Armstrong Court Phase 4.

**Pre-application forms can be found on our website!**

**[www.GreenwichCommunity.org](http://www.GreenwichCommunity.org)**

Applications must be returned by either mail or email and sent to the address below.

**Any applications that are mailed must be postmarked by April 23, 2025.  
Incomplete or illegible applications will be rejected.**

- By Email: [ACP4@greenwichcommunity.org](mailto:ACP4@greenwichcommunity.org).
- By Mail: Greenwich Communities  
c/o ACP4 Pre-App  
249 Milbank Avenue  
Greenwich, CT 06830



## **ARMSTRONG COURT PHASE 4 (ACP4)**

(Low-Income Housing Tax Credit Property)

### **PRE-APPLICATION**

The purpose of this pre-application is to identify eligible applicants who meet the criteria for ACP4 housing. Once an eligible applicant is identified, a formal application will be provided to the applicant.

The information provided will be used in the tenant selection process to occupy **six (6) 3BR units** at ACP4. In the event the information provided is determined to be falsified, Greenwich Communities will reject your application. Gathering information from, and about prospective applicants is for the sole benefit of Greenwich Communities.

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Below, please find the maximum income limits per household size.  
Income limits reflect the gross annual income of all members in your household.

<b>2025 MAXIMUM INCOME LIMITS</b>				
<b>HOUSEHOLD SIZE</b>	<b>3 persons</b>	<b>4 persons</b>	<b>5 persons</b>	<b>6 persons</b>
<b>Income Limit</b>	<b>\$97,500</b>	<b>\$108,300</b>	<b>\$117,000</b>	<b>\$125,640</b>

**If the household's gross annual income is over the income limit numbers above, you will not be eligible to apply.**



# **ARMSTRONG COURT PHASE 4 (ACP4)**

(Low-Income Housing Tax Credit Property)

## **PRE-APPLICATION**

Pre-Applicant's Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

### **HOUSEHOLD COMPOSITION / INCOME STATUS**

HOUSEHOLD MEMBERS NAMES	RELATIONSHIP TO HEAD OF HOUSEHOLD	SOCIAL SECURITY NUMBER	DATE OF BIRTH	GROSS INCOME	SOURCE OF INCOME
	HEAD				

**DISABILITY STATUS:**

WOULD YOU OR ANYONE IN YOUR HOUSEHOLD BENEFIT FROM THE FEATURES OF A HANDICAP-ACCESSIBLE UNIT?	YES	NO
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**SECTION-8, VOUCHER STATUS:**

Do you or anyone in your household have a Section-8 Voucher?	YES	NO
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I hereby warrant that all representations set forth above are true. To verify the above statements, I authorize an investigation of my/our credit, tenant history, banking, employment, and criminal history, for the sole purpose of renting an apartment at ACP4 from Greenwich Communities.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
Date