

# MARYVALE EAST SENIOR APARTMENTS

100-120 Moorman Drive  
Cheektowaga, NY 14225

---

Phone (716) 681-5061  
Fax (716) 683-5123  
www.maryvaleeast.com

MARYVALE EAST SENIOR APARTMENTS located at 100-120 Moorman Drive, Cheektowaga, NY is now accepting applications for tenancy in newly rehabilitated units.

Rent: Efficiency/Studio @ \$510.00/month  
1-Bedroom @ \$585.00/month  
2-Bedroom @ \$695.00/month  
Includes All utilities; excluding cable/satellite and telephone service

All apartments at Maryvale have been completely remodeled and are equipped with new and modern appliances.

The complex offers a variety of amenities not found in Western New York in Low-Income Senior Housing including, but not limited, to the following:

Maryvale is a Low-Income Tax Credit Senior 55+ Housing Project. All residents must qualify before occupancy. Eligibility criteria are as follows:

INCOME: Single applicants must have income under \$31,380.00/year.  
Two person household must have combined income under \$35,880.00/year.

- Covered Parking
- Unisex Hair Salon
- Supervised Craft Program
- Exercise Room
- Library/Media Room
- Game Room
- Planned Activities
- Van Service for Shopping and Planned Trips
- Erie County Nutrition Site
- Private Apartment Entrances
- Pet Friendly ó Restrictions Apply

Please complete the attached application and return to the rental office or mail to the above address.

Thank you,

Christine Friol  
Operations Manager



**RENTAL APPLICATION FOR  
MARYVALE EAST SENIOR HOUSING**

NAME: \_\_\_\_\_ SOC. SEC. #: \_\_\_\_\_

CO-APPLICANT: \_\_\_\_\_ SOC. SEC. #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ CO-APPLICANT BIRTH DATE: \_\_\_\_\_

DO YOU OWN: \_\_\_\_\_ DO YOU RENT: \_\_\_\_\_ EXPIRATION OF LEASE: \_\_\_\_\_

DESIRED OCCUPANCY DATE: \_\_\_\_\_ NO. OF BEDROOMS: \_\_\_\_\_

CURRENT LANDLORD'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

This Senior Complex is a low-income housing project. The questions below must be completed to further evaluate your eligibility.

**PLEASE LIST ALL SOURCES OF INCOME:**

SOCIAL SECURITY: \$ \_\_\_\_\_ PENSION: \$ \_\_\_\_\_

SUPPLEMENTAL SECURITY: \$ \_\_\_\_\_ UNEMPLOYMENT: \$ \_\_\_\_\_

INTEREST FROM SAVINGS: \$ \_\_\_\_\_ DISABILITY: \$ \_\_\_\_\_

PUBLIC ASSISTANCE: \$ \_\_\_\_\_ OTHER: \$ \_\_\_\_\_ TOTAL AMOUNT: \$ \_\_\_\_\_

DO YOU HAVE A HANDICAP REQUIREMENT: \_\_\_\_\_

ARE YOU A SMOKER: \_\_\_\_\_ DO YOU DRIVE: \_\_\_\_\_

ARE YOU A PET OWNER / TYPE OF PET: \_\_\_\_\_

PERSON TO CONTACT IN AN EMERGENCY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

I swear to the best of my knowledge that the information provided above is true, and I give my permission for Maryvale East Management Corporation to verify any information on this application.  
ALL INFORMATION IS STRICTLY CONFIDENTIAL.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE RETURN APPLICATION TO:  
MARYVALE EAST SENIOR APARTMENT COMPLEX  
100 Moorman Drive  
Cheektowaga, New York 14225  
Phone (716) 681-5061 or Fax (716) 683-5123

