



I N S T R U C T I O N S

PLEASE READ CAREFULLY. PRIORITY WILL NOT BE ESTABLISHED ON THE WAITING LIST UNTIL APPLICATION IS COMPLETE. YOU WILL BE NOTIFIED IN WRITING WITHIN TEN DAYS IF YOUR APPLICATION IS INCOMPLETE AND MUST SUBMIT REQUIRED INFORMATION WITHIN TEN DAYS IN ORDER TO REMAIN ACTIVE ON THE WAITING LIST.

1. COMPLETE ALL AREAS. If an item does not apply to you, mark "N/A" on that line.
2. **SIGNATURES are required** by all adult applicants.
3. RETURN YOUR APPLICATION TO:

**Baldwin Bayshore LLC.
9457 Chalkstone Course
Brewerton, NY 13029
(315) 668-9696
TTD Relay Service(711) for Hearing Impaired**

NOTE: PETS ARE ONLY ALLOWED IN OUR SENIOR CITIZEN PROPERTIES OR FOR PERSONS WITH DISABILITIES WHO REQUIRE A SERVICE ANIMAL.



Baldwin Real Estate Corp. USE ONLY: DATE RECEIVED: _____ TIME RECEIVED: _____ ID #: _____

APPLICATION FOR ASSISTED HOUSING (USDA, Rural Development)

- If the information provided by or about any applicant from any source at any time during the screening process reveals negative information relating to the applicant's ability to meet the obligations of tenancy, the information will be researched as part of the tenant selection screening process and that applicant will be asked to explain this information as part of a uniformly applied policy applicable to all applicants.
- All applicants must be able to meet essential obligations of tenancy -- they must be able to pay rent, to care for their apartment, to report required information to Baldwin Real Estate Corp., to avoid disturbing their neighbors, etc., but there is no requirement that they be able to do these things without assistance.
- Baldwin Real Estate Corp. is a management company that provides low rent housing to eligible households, elderly households and single people. Baldwin Real Estate Corp. is not permitted to discriminate against applicants on the basis of their race, color, religion, sex, national origin, disability or familial status. In addition, Baldwin Real Estate Corp. has a legal obligation to provide "reasonable accommodations" to applicants if they, or any household member, have a disability.
- A reasonable accommodation is some modification or change Baldwin Real Estate Corp. can make to its apartments or procedures that will assist an otherwise eligible applicant with a disability to take advantage of government programs.
- If you, or a member of your household, have a disability and think you might need or want a reasonable accommodation, or qualify for a disability adjustment to income under the USDA, Rural Development program, or any other adjustment you are eligible for, you may request it at any time in the application process or after admission. This is up to you. If you would prefer not to discuss your situation with the management company, that is your right.
- If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at program.intake@usda.gov.

A. **FAMILY SUMMARY** -List all persons, including yourself, who will be living in the apartment. List head of household first.

Name (First Name, Middle Initial, Last Name)	Relationship	Birth Date	Full-time student Y or N	Soc. Sec. #
1	Head			
2				
3				
4				
5				
6				

Mailing Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Physical Address: _____ **City:** _____ **State:** _____ **Zip:** _____

(if different than mailing address)

Telephone No. (which you can be reached at): _____ E-Mail Address _____

Applying to Property(s): _____ Requested Unit Size: _____ **Bedrooms** _____

How did you hear about the apartment for which you are applying? _____

If you require a barrier free unit, check here

If you require any modifications to an apartment, check here and explain in a note to us

Do you believe that you qualify as an elderly household (62 or over or disabled, regardless of age)

B. INCOME - All sources of regularly received monies must be listed regardless of recipient's age.

Family Member Name	Sources of Income	Amount
	Social Security Gross Monthly Amount	\$
	Social Security Gross Monthly Amount	\$
	Pension Gross Monthly Amount	\$
	Source:	
	Address:	
	Claim No.	
	Pension Gross Monthly Amount	\$
	Source:	
	Address:	
	Claim No.	
	VA Benefits (Claim #)	\$
	SSI Benefits Gross Monthly Amount	\$
	Unemployment Compensation Gross Monthly Amount	\$
	Address:	
	Social Services Gross Monthly Amount	\$
	Wages Gross Monthly Amount	\$
	Employer:	
	Address:	
	Wages Gross Monthly Amount	\$
	Employer:	
	Address:	
	Alimony Gross Monthly Amount	\$
	Child Support Gross Monthly Amount	\$
	Other Income Gross Monthly Amount (for example, rental income, etc.)	
		\$
		\$

C. ASSETS:

Have you sold or disposed of any asset(s) valued over \$1,000 in the last two years? Yes_____ No_____

If yes, type of asset (e.g., money/land/house) _____

Market value when sold/disposed \$_____ Amount sold/disposed for \$_____ Date of transaction _____

C. **ASSETS** (continued)

Provide the following information for all members of the household (use another sheet of paper if necessary).

Checking Accounts

Bank	Bank
Address	Address
Account No.	Account No.
Int. Rate Balance \$	Int. Rate Balance \$

Savings Accounts

Bank	Bank
Address	Address
Account No.	Account No.
Int. Rate Balance \$	Int. Rate Balance \$

Certificates of Deposit

Bank	Bank
Address	Address
Acct.# Int Rate Amt. \$	Acct.# Int Rate Amt. \$
Penalty for Early Withdrawal Maturity Date	Penalty for Early Withdrawal Maturity Date

Stocks

IRA's/401-K's

Name	Bank
Address	Address
Value \$ Div. Rate	Value \$ Div. Rate

Bonds

Trust Accounts

Bank	Bank
Address	Address
Present Value \$	Account No.
Maturity Date	Int. Rate Balance \$

C. **ASSETS** (continued):

Real Estate

Do you own any property? Yes _____ No _____

If yes, type & location of property _____

Appraised market value \$ _____ Mortgage or outstanding loan due \$ _____

Name & address of broker/realtor who would provide verification of market value:

Broker/Realtor	Address	City	State	Zip
----------------	---------	------	-------	-----

D. **MEDICAL AND CHILD CARE EXPENSES**

FOR ELDERLY, DISABLED APPLICANTS ONLY

Medical Costs - Complete only if head, spouse, or co-head is 62 or older or disabled AND ONLY if these medical expenses are paid for out of your own pocket and not reimbursed by medical insurance.

Medicare

Monthly Amount \$ _____	Monthly Amount \$ _____
-------------------------	-------------------------

Medical Insurance

Name	Name
Address	Address
Claim No. Monthly Amt. \$	Claim No. Monthly Amt. \$

Pharmacy

Name	Name
Address	Address
Anticipated prescription costs not covered by insurance - Monthly Amount \$	Anticipated prescription costs not covered by insurance - Monthly Amount \$

Physician

Are you seeing a physician REGULARLY ? Yes _____ No _____	
Name	Name
Address	Address
Anticipated costs not covered by insurance - Monthly Amount \$	Anticipated costs not covered by insurance - Monthly Amount \$

Outstanding Medical Bills for which You are Making Monthly Payments

Name	Name
Address	Address
Anticipated costs not covered by insurance - Balance Due \$ Monthly Amount \$	Anticipated costs not covered by insurance - Balance Due \$ Monthly Amount \$

Child Care Expenses - Complete for children 12 and younger - Weekly cost for Child Care \$ _____

Name & Address of Person/Agency caring for children: _____

E. PROGRAM INFORMATION

Are you currently living in subsidized housing? Yes _____ No _____

F. APPLICANT INFORMATION-Please place a checkmark in the box if any of the following statements apply to you.

Do you have a Section 8 Voucher or any other type of voucher? Yes _____ No _____

1. You have been served a Notice to Quit or been asked to leave by a previous landlord

2. You have been served with lease violations from a previous landlord

3. You have been evicted

4. You or any household member have been evicted from federally assisted housing for drug-related criminal activity?

If you checked any of the above boxes, please explain the circumstances on an attached sheet of paper and identify property & landlord.

5. You or a household member have been convicted of a sex related crime or are subject to a lifetime registration in a State sex offender registration program?

List all states, other than the one that you reside in now, in which you have lived in during the last seven years? _____

6. Has anyone in your household ever been convicted of a felony offense?

G. REFERENCE INFORMATION

Current Landlord (Name, Address, & Phone No.)

How long have you lived there? _____ Is this landlord related to you? Yes _____ No _____

List all Previous Landlords for ALL Adults in Household (Attach a sheet of paper if more space is needed.) (Name, Address & Phone No.)

1.	2.
Address of Apt.	Address of Apt.
How long did you live there?	How long did you live there?
Is this landlord related to you? Yes _____ No _____	Is this landlord related to you? Yes _____ No _____

List two Professional Personal References for ALL Adults in Household (Attach a sheet of paper if more space is needed.) (Name, Address, Phone No. & Relationship)

(Examples: teachers, principals, past/present employers, physicians, etc.) Please do not list relatives or friends.

1.	2.
Phone No. Relationship	Phone No. Relationship

All information received by Baldwin Real Estate Corp. during the application process regarding the applicant or applicant's household will be taken into consideration as part of the application.

Other Information

Please provide us with the name, address, & phone number of an emergency contact:

Vehicles - List any vehicle owned

Type _____ Year/Make _____

Color _____ License Plate No. _____

Do you own a pet? Yes____ No____ If yes, describe _____

CERTIFICATION

I/we hereby certify that I/we do not and will not maintain a separate, subsidized rental unit in another location. I/we understand I/we must pay a security deposit for this apartment prior to occupancy. I/we certify that the housing I/we will occupy is/will be my/our permanent residence.

I/we understand that eligibility for housing will be based on either the USDA, Rural Development or the Department of Housing and Urban Development's eligibility criteria and Baldwin Real Estate Corp. resident selection criteria (see attached). I/we understand that this application in no way ensures occupancy and that my/our application can be rejected based on, but not limited to (1) a history of unjustified and/or chronic nonpayment of rent and/or financial obligations; (2) a history of living or housekeeping habits that would pose a direct threat to the health and safety of other individuals or whose tenancy would result in substantial physical damage to the property of others; (3) a history of disturbance of neighbors; (4) a history of violations of the terms of previous rental agreements, especially those resulting in eviction from housing or termination from residential programs; (5) police records indicating any type of criminal activity or convictions; and (6) any records which show the applicant's behavior to be unacceptable, even if it is a manifestation of an applicant's disability.

I/we certify that the information given in this application is true to the best of my/our knowledge. I/we understand that any false information or any omission of any significant information is punishable by law, and could be grounds for cancellation of this application or termination of residency after occupancy.

Head of Household (✓) _____ Date _____

Spouse/Co-Tenant (✓) _____ Date _____

For Baldwin Bayshore LLC.

The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.

Race:
() 1. American Indian or Alaskan Native () 2. Asian () 3. Black or African American () 4. Native Hawaiian or Other Pacific Islander () 5. White

Gender:
() Male () Female

Ethnicity:
() Hispanic or Latino () Not Hispanic or Latino

Please sign ALL black checkmarks

Authorization

I/we do hereby authorize **Baldwin Real Estate Corp.** and its staff to contact any agencies, offices, credit bureaus, landlords, or professional references for the purpose of verifying the information I/we have provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I/we are applying for and the information that is supplied will be kept confidential.

Signatures

(✓)

Applicant Signature

Date

(✓)

Co-Applicant Signature

Date

Authorization

I/we do hereby authorize **Baldwin Real Estate Corp.** and its staff to contact any agencies, offices, credit bureaus, landlords, or professional references for the purpose of verifying the information I/we have provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I/we are applying for and the information that is supplied will be kept confidential.

Signatures

(✓)

Applicant Signature

Date

(✓)

Co-Applicant Signature

Date

Authorization

I/we do hereby authorize **Baldwin Real Estate Corp.** and its staff to contact any agencies, offices, credit bureaus, landlords, or professional references for the purpose of verifying the information I/we have provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I/we are applying for and the information that is supplied will be kept confidential.

Signatures

(✓)

Applicant Signature

Date

(✓)

Co-Applicant Signature

Date

Baldwin Bayshore LLC.
CRIMINAL & SEX OFFENDER BACKGROUND INFORMATION

Federal law requires Baldwin Bayshore LLC. to get drug and criminal background and sex offender registration information for all adult household members applying for assisted housing. To enable us to do so, all household members age 18 or older must answer the questions below, and then sign below to consent to a background check. The questions ask about drug related and other criminal activity that could adversely affect the health, safety, or welfare of other residents.

Baldwin Bayshore LLC. will deny the application of any applicant who does not provide complete and accurate information on this form or does not consent to a background check.

1. Have you been evicted from a federally assisted site for drug related criminal activity within the past 3 years? YES ___ NO ___
2. Do you currently use illegal drugs or abuse alcohol? YES ___ NO ___
3. Are you currently subject to lifetime registration requirements under the sex offender registration program? YES ___ NO ___
4. Have you been convicted of any drug related crime within the past five years? YES ___ NO ___
5. Have you been convicted of any felony within the past five years? YES ___ NO ___
6. Have you been convicted of any crime involving fraud or dishonesty within the past five years? YES ___ NO ___
7. Have you been convicted of any crime involving violence within the past five years? YES ___ NO ___
8. Are you currently charged with any of the above-mentioned criminal activities? YES ___ NO ___
9. Please list all states in which you have lived or have held licenses to drive and driver's lic. #'s of each _____

10. Have you ever used or been known as another name? YES ___ NO ___
If yes, please list names used _____

I understand that the above information is required to determine my eligibility for residency. I certify that my answers to the above questions are true and complete to the best of my knowledge. I understand that making false statements on this form is grounds for rejection or termination of my lease. I authorize Baldwin Bayshore LLC. to verify the above information, and I consent to the release of the necessary information to determine my eligibility.

I hereby authorize law enforcement agencies to release criminal records and/or sex offender registration information to Baldwin Bayshore LLC., to an agency contracted by Baldwin Bayshore LLC. to conduct criminal background checks.

APPLICANT'S
SIGNATURE _____ DATE _____
APPLICANT'S NAME (Please Print) _____

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at program.intake@usda.gov.

Baldwin Bayshore LLC.
CRIMINAL & SEX OFFENDER BACKGROUND INFORMATION

Federal law requires Baldwin Bayshore LLC. to get drug and criminal background and sex offender registration information for all adult household members applying for assisted housing. To enable us to do so, all household members age 18 or older must answer the questions below, and then sign below to consent to a background check. The questions ask about drug related and other criminal activity that could adversely affect the health, safety, or welfare of other residents.

Baldwin Bayshore LLC. will deny the application of any applicant who does not provide complete and accurate information on this form or does not consent to a background check.

1. Have you been evicted from a federally assisted site for drug related criminal activity within the past 3 years? YES___ NO___
2. Do you currently use illegal drugs or abuse alcohol? YES___ NO___
3. Are you currently subject to lifetime registration requirements under the sex offender registration program? YES___ NO___
4. Have you been convicted of any drug related crime within the past five years? YES___ NO___
5. Have you been convicted of any felony within the past five years? YES___ NO___
6. Have you been convicted of any crime involving fraud or dishonesty within the past five years? YES___ NO___
7. Have you been convicted of any crime involving violence within the past five years? YES___ NO___
8. Are you currently charged with any of the above-mentioned criminal activities? YES___ NO___
9. Please list all states in which you have lived or have held licenses to drive and driver's lic. #'s of each. _____
10. Have you ever used or been known as another name? YES___ NO___
If yes, please list names used _____

I understand that the above information is required to determine my eligibility for residency. I certify that my answers to the above questions are true and complete to the best of my knowledge. I understand that making false statements on this form is grounds for rejection or termination of my lease. I authorize Baldwin Bayshore LLC. to verify the above information, and I consent to the release of the necessary information to determine my eligibility.

I hereby authorize law enforcement agencies to release criminal records and/or sex offender registration information to Baldwin Bayshore LLC., to an agency contracted by Baldwin Bayshore LLC. to conduct criminal background checks.

APPLICANT'S
SIGNATURE _____ DATE _____
APPLICANT'S NAME (Please Print) _____

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202)690-7442 or email at program.intake@usda.gov.



**Certification of Receipt
(Things You Should Know About USDA)**

I, _____ am the designated head of this household. I certify that I have received Things you Should Know about USDA Rural Rental Housing from Baldwin Real Estate Corp. I also certify that this document has been read and reviewed by all adult members of this household.

Signature of Head of Household

Date

Baldwin Real Estate Corp Signature

Date





Rural Housing and Community Programs

Things You Should Know About USDA Rural Rental Housing

Don't risk losing your chances for federally assisted housing by providing false, incomplete, or inaccurate information on your application or recertification

Penalties for Committing Fraud

You must provide information about your household status and income when you apply for assisted housing in apartments financed by the U.S. Department of Agriculture (USDA). USDA places a high priority on preventing fraud. If you deliberately omit information or give false information to the management company on your application or recertification forms, you may be:

- Evicted from your apartment;
- Required to repay all the extra rental assistance you received based on faulty information;
- Fined;
- Put in prison and/or barred from receiving future assistance.

Your State and local governments also may have laws that allow them to impose other penalties for fraud in addition to the ones listed here.

How To Complete Your Application

When you meet with the landlord to complete your application, you must provide information about:

- **All Household Income.** List all sources of money that you receive. If any other adults will be living with you in the apartment, you must also list all of their income. Sources of money include:
 - Wages, unemployment and disability compensation, welfare payments, alimony, Social Security benefits, pensions, etc.;
 - Any money you receive on behalf of your children, such as child support, children's Social Security, etc.;
 - Income from assets such as interest from a savings account, credit union, certificate of deposit, stock dividends, etc.;
 - Any income you expect to receive, such as a pay raise or bonus.
- **All Household Assets.** List all assets that you have. If any other adults will be living with you, you must also list all of their assets. Assets include:
 - Bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.;
 - Any business or asset you sold in the last 2 years for less than its full value, such as selling your home to your children.

- **All Household Members.** List the names of all the people, including adults and children, who will actually live with you in the apartment, whether or not they are related to you.

Ask for Help if You Need It

If you are having problems understanding any part of the application, let the landlord know and ask for help with any questions you may have. The landlord is trained to help you with the application process.

Before You Sign the Application

- Make sure that you read the entire application and understand everything it says;
- Check it carefully to ensure that all the questions have been answered completely and accurately;
- Don't sign it unless you are sure that there aren't any errors or missing information.

By signing the application and certification forms, you are stating that they are complete to the best of your knowledge and belief. Signing a form when you know it contains misinformation is considered fraud.

- The management company will verify your information. USDA may conduct computer matches with other Federal, State or private agencies to verify that the income you reported is correct;
- Ask for a copy of your signed application and keep a copy of it for your records.

Tenant Recertification

Residents in USDA-financed assisted housing must provide updated information to the management company at least once a year. Ask your landlord when you must recertify your income.

You must **immediately** report:

- Any changes in income of \$100 or more per month;
- Any changes in the number of household members.

For your annual recertification, you must report:

- All income changes, such as increases in pay or benefits, job change or job loss, loss of benefits, etc., for any adult household member;

- Any household member who has moved in or out;
- All assets that you or your adult housemates own, or any assets that were sold in the last 2 years for less than their full value.

Avoid Fraud, Report Abuse

Prevent fraudulent schemes through these steps:

- Don't pay any money to file your application;
- Don't pay any money to move up on the waiting list;
- Don't pay for anything not covered by your lease;
- Get receipts for any money you do pay;
- Get a written explanation for any money you are required to pay besides rent, such as maintenance charges.

Report Abuse: If you know anyone who has falsified an application, or who tries to persuade you to make false statements, report him or her to the manager. If you cannot report to your manager, call your local or state USDA office at 1 (800) 670-6553, or write: USDA, STOP 0782, 1400 Independence Ave., SW, Washington, DC 20250.

If You Disagree With a Decision

Tenants may file a grievance in writing with the complex owner in response to the owner's actions, or failure to act, that result in a denial, significant reduction, or termination of benefits. Grievances may also be filed when a tenant disputes the owner's notice of proposed adverse action.

Notice of Adverse Action

The complex owner must notify tenants in writing about any proposed actions that may have adverse consequences, such as denial of occupancy and changes in the occupancy rules or lease. The written notice must give specific reasons for the proposed action, and must also advise tenants of the "right to respond to the notice within 10 calendar days after the date of the notice" and of "the right to a hearing." Housing complexes in areas with a concentration of non-English-speaking people must send notices in English and in the majority non-English language.

Grievance Process Overview

USDA believes that the best way to resolve grievances is through an informal meeting between tenants and the landlord or owner. Once the owner learns about a tenant grievance, the process should begin with an informal meeting between the two parties. Owners must offer to meet with tenants to discuss the grievance within 10 calendar days of receipt of the complaint. USDA encourages owners and tenants to try to reach a mutually satisfactory resolution to the problem at the meeting.

If the grievance is not resolved, the tenant must request a hearing within 10 days of receipt of the meeting findings. The parties will then select a hearing panel or hearing officer to govern the hearing. All parties are notified of the decision 10 days after the hearing.

When a Grievance Is Legitimate

The landlord must determine if a grievance is within the established rules for the program. For example, "I want to file a complaint because the manager doesn't speak to me" is not a legitimate complaint. However, "I want to file a complaint because the manager isn't maintaining the property according to USDA guidelines" is a legitimate complaint. Below are examples of cases in which tenants may and may not file a complaint.

A complaint may not be filed with the owner/management if:	A complaint may be filed with the owner/management if:
USDA has authorized a proposed rent change.	There is a modification of the lease, or changes in the rules or rent that are not authorized by USDA.
A tenant believes that he/she has been discriminated against because of race, color, religion, national origin, sex, age, familial status, or disability. Discrimination complaints should be filed with USDA and/or the Department of U.S. Housing and Urban Development (HUD), not with the owner/management.	The owner or management fails to maintain the property in a decent, safe, and sanitary manner.
The complex has formed a tenant's association and all parties have agreed to use the association to settle grievances.	The owner violates a lease provision or occupancy rule.
USDA has required a change in the rules and proper notices have been given.	A tenant is denied admission to the complex.
The tenant is in violation of the lease and the result is termination of tenancy.	
There are disputes between tenants that do not involve the owner/management.	
Tenants are displaced or other adverse effects occur as a result of loan prepayment.	

PA 1998
December 2008

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.