

## **Census Forms are due by December 1, 2022**

**Notices start going out in November and continue to go out on a weekly basis.**

**We are required to turn census forms in to the Federal Housing should we get audited. If we do not have adequate information or fall short of regulation we stand to lose our senior exemption and the community could be fined upwards of \$20,000.**

**An application affidavit, or other document signed by an adult member of the household asserting that at least one occupant in the unit is 55 years of age or older must be provided.**

**The following documents are considered to be reliable for age verification: birth certificate, driver's license, passport, immigration card, military identification, or any other state, local, national or international documentation, provided it contains current information about the age or birth of the possessor.**

**In order to qualify for the senior exemption, the housing community/facility must satisfy each of the following requirements:**

**a) at least 80 percent of the occupied units must be occupied by at least one person 55 years of age or older per unit;**

**b) the owner or management of the housing facility/community must publish and adhere to policies and procedures that demonstrate an intent to provide housing for persons 55 years or older; and**

**c) the facility/community must comply with rules issued by the Secretary of State for verification of occupancy through reliable surveys and affidavits.**

**Violations to homeowners will begin February 1, 2023 to those who have not yet turned in their completed form and current driver's license. Form is attached to this email. Please drop off at the clubhouse or scan and email to: [bridget.garcia@fsresidential.com](mailto:bridget.garcia@fsresidential.com)**

**REGENCY AT THE WOODS OF SOUTH BARRINGTON HOMEOWNER  
ASSOCIATION  
AGE COMPLIANCE AUDIT CENSUS – 2022/2023**

Name of Owner(s): \_\_\_\_\_

Address: \_\_\_\_\_  
South Barrington, IL 60010

DO YOU OCCUPY THE RESIDENCE? YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE PROVIDE US THE FOLLOWING INFORMATION FOR THE AGE COMPLIANCE AUDIT. IF YOU DO NOT OCCUPY THE RESIDENCE, PLEASE SUPPLY THE FOLLOWING INFORMATION ABOUT THE OCCUPANT(S):

NAME OF OCCUPANT: \_\_\_\_\_

AGE: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_

NAME OF OCCUPANT SPOUSE: \_\_\_\_\_

AGE: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_

NAMES OF CHILDREN WHO OCCUPY THE HOME:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

AS PART OF THE REGENCY AT WOODS OF SOUTH BARRINGTON HOMEOWNERS ASSOCIATION, I (WE) UNDERSTAND THAT REGENCY AT WOODS OF SOUTH BARRINGTON IS BEING DEVELOPED AS HOUSING FOR OLDER PERSONS AND, IN ORDER TO COMPLY WITH THE REQUIREMENTS OF THE FAIR HOUSING AMENDMENTS ACT OF 1988, REGENCY AT WOODS OF SOUTH BARRINGTON MUST CONSISTENTLY EVIDENCE AN INTENTION TO PROVIDE HOUSING FOR OLDER PERSONS, AND AT LEAST EIGHTY PERCENT (80%) OF THE RESIDENCES MUST BE OCCUPIED BY AT LEAST ONE PERSON FIFTY (50) YEARS OF AGE OR OLDER, I (WE) FURTHER ACKNOWLEDGE THAT THE REGENCY AT WOODS OF SOUTH BARRINGTON HOMEOWNERS ASSOCIATION IS REQUIRED TO MONITOR AND VERIFY THE AGE OF THE OCCUPANTS IN REGENCY AT WOODS OF SOUTH BARRINGTON AND, IN THE EVENT THE RESIDENCE IS OCCUPIED BY PERSONS OTHER THAN AS PROVIDED HEREIN, SUCH THAT SUCH OCCUPANCY SHALL NOT DEMONSTRATE AN INTENTION TO PROVIDE HOUSING FOR OLDER PERSONS OR SHALL CAUSE LESS THAN AT LEAST EIGHTY PERCENT (80%) OF THE UNITS AT REGENCY AT WOODS OF SOUTH BARRINGTON TO BE OCCUPIED BY AT LEAST ONE PERSON WHOSE AGE IS FIFTY (50) YEARS OR OVER, THE REGENCY AT WOODS OF SOUTH BARRINGTON HOMEOWNERS ASSOCIATION SHALL HAVE THE RIGHT TO ENFORCE THE PROVISIONS OF THE COVENANTS AND RESTRICTIONS OF RECORD (COPIES OF WHICH YOU ACKNOWLEDGE HAVE BEEN PROVIDED TO YOU) BY ANY APPROPRIATE MEANS. I (WE) CERTIFY THAT THE INFORMATION SUPPLIED BY ME (US) IS TRUE AND CORRECT.

PLEASE ATTACH THE FOLLOWING WHEN SUBMITTING YOUR COMPLETED FORM

\_\_\_\_\_ COPY OF DRIVERS LICENSE, BIRTH CERTIFICATE, ETC. (PROOF OF AGE)

\_\_\_\_\_ PHOTOCOPY OF RENTAL AGREEMENT/LEASE (IF APPLICABLE)

\_\_\_\_\_  
OCCUPANT SIGNATURE

\_\_\_\_\_  
OCCUPANT SPOUSE SIGNATURE

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

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