



# Application Instructions



Complex: \_\_\_\_\_

Date: \_\_\_\_\_

*THIS IS AN EQUAL HOUSING OPPORTUNITY COMPLEX AND ALL ARE WELCOME TO APPLY*

To apply for an apartment you must complete the entire application, leaving no blanks or unanswered questions. Do not use correction tape or "white-out". If you believe that a particular question does not apply to you, write "N/A". Every household member 18 years of age or older must complete a separate application.

To complete an application, the following information (at minimum) is required:

- 1) Name(s), birthdate(s), and Social Security numbers of household members
- 2) All sources of income, including assets for all adult members of the household and unearned income for minors
- 3) Your need for a unit with accessibility features
- 4) Current and prior landlord information (5 years history)
- 5) Credit, personal and business references
- 6) Your signature and date on page 4 of this application

If there are no current vacancies, you will be notified in writing that you have been placed on the waiting list. It is your responsibility - as the applicant - to notify the Rental Manager of any change in your address, telephone number, employment, income, or household size. The Rental Manager may be able to give you an estimate of when a unit may be available. The full application and verification process will be postponed until your name is near the top of the waiting list. The criteria for selection is verification of the following:

- 1) Income and assets of all applicants from all sources
- 2) Unearned income for minors
- 3) Present and past performance as a renter
- 4) Credit bureau report(s) and criminal background check
- 5) Personal and business references

If at any point in the verification process a negative verification report is received, the application process will be discontinued and the applicant notified of the rejection in writing. Otherwise, when all of the verifications are received, eligibility will be determined. The applicant will be notified that they have been accepted, or will receive notice of rejection in writing.

All applicants will have a personal interview with management. If an applicant misses two (2) scheduled appointments, management will withdraw the application, and the waiting list will be noted "Withdrawn".

**THIS APPLICATION MUST BE ACCOMPANIED BY A COMPLETED INCOME QUESTIONNAIRE IN ORDER TO BE PROCESSED AND/OR ADDED TO THE WAITING LIST.**

**EACH HOUSEHOLD MEMBER 18 YEARS OR OLDER MUST COMPLETE AN APPLICATION PACKAGE**

# Rental Application

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Social Security # \_\_\_\_\_ Birthdate: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Drivers License State & No.: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Cellphone/Message No.: \_\_\_\_\_

Facsimile No: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**How long have you lived at the address given above?** \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Address: \_\_\_\_\_

Landlord's Telephone No: \_\_\_\_\_ Reason for which you are moving: \_\_\_\_\_

Current Rent \$ \_\_\_\_\_ Do you currently receive government subsidy?  No  Yes

If yes, which type? \_\_\_\_\_

Are you presently being or have you ever been evicted?  No  Yes If yes, please

provide explanation \_\_\_\_\_

**List below all of the people in your household that plan on living in the unit**

	Last Name	First Name	M.I.	Social Security #	Birthdate	Age	Sex	Drivers License #	Relationship
1.									
2.									
3.									
4.									
5.									
6.									
7.									

Does anyone live with you now who is not listed above?  No  Yes

If yes, who? Name \_\_\_\_\_ Relationship \_\_\_\_\_

Do you now or have you ever used another name and/or Social Security number?

No  Yes If yes, describe \_\_\_\_\_

Apartment (unit) size requested:  Studio  1 Bdrm  2 Bdrm  3 Bdrm  4 Bdrm

Does any member of your household age 18 or older attend school?

No  Yes If yes, who? \_\_\_\_\_

Do you own a pet?  No  Yes If yes, how many? \_\_\_\_\_ Description \_\_\_\_\_

Do you have a waterbed?  No  Yes If yes, do you have waterbed insurance? \_\_\_\_\_

Do you have a Section 8 Certificate (voucher program)?  No  Yes

Are you being displaced?  No  Yes

Has your household's tenancy in a subsidized housing program ever been terminated for fraud, nonpayment of rent or failure to cooperate with the recertification procedure?

No  Yes If yes, please explain the circumstances on a separate sheet of paper.

**Landlord References** (5 Year Past History Required)

Previous Address: \_\_\_\_\_ Unit No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Previous Landlord Name: \_\_\_\_\_  
Previous Landlord Address: \_\_\_\_\_  
Previous Landlord Telephone No: \_\_\_\_\_ Previous Rent Paid: \$ \_\_\_\_\_  
Dates you lived there: From \_\_\_\_\_ To \_\_\_\_\_  
Reason for moving: \_\_\_\_\_

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Previous Address: \_\_\_\_\_ Unit No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Previous Landlord Name: \_\_\_\_\_  
Previous Landlord Address: \_\_\_\_\_  
Previous Landlord Telephone No: \_\_\_\_\_ Previous Rent Paid: \$ \_\_\_\_\_  
Dates you lived there: From \_\_\_\_\_ To \_\_\_\_\_  
Reason for moving: \_\_\_\_\_

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Previous Address: \_\_\_\_\_ Unit No.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Previous Landlord Name: \_\_\_\_\_  
Previous Landlord Address: \_\_\_\_\_  
Previous Landlord Telephone No: \_\_\_\_\_ Previous Rent Paid: \$ \_\_\_\_\_  
Dates you lived there: From \_\_\_\_\_ To \_\_\_\_\_  
Reason for moving: \_\_\_\_\_

**Personal References**

Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
Address: \_\_\_\_\_

**Emergency Contact Person Not Living in the Household (Must be Completed in Full)**

Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**Automobile(s)**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_  
License Plate No.: \_\_\_\_\_ State: \_\_\_\_\_ Currently Registered?  Yes  No  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_  
License Plate No.: \_\_\_\_\_ State: \_\_\_\_\_ Currently Registered?  Yes  No

It is required that all automobiles on the premises be currently registered, operable and do not leak oil or fluid

**Drug Free Housing**

In order to comply with Federal and State laws, all attempts must be made by the Owner of this apartment community to assure DRUG AND VIOLENCE-FREE HOUSING. The following questions MUST be answered by ALL applicants for this housing:

Yes      No

Is any household member a current illegal user of a controlled substance?

Has any household member had a previous conviction of illegal use, possession, sale or manufacturing of a controlled substance?

If either of the above questions were answered "Yes", which member? \_\_\_\_\_

Has any household member been convicted of the illegal possession, manufacturing or distribution of a controlled substance?

If yes, which member? \_\_\_\_\_

If any of the questions above were answered "Yes", has the household member successfully completed a controlled substance abuse recovery program?

Has any household member been convicted of a violent crime?

Is any household member currently on probation for a violent or drug-related offense?

**Certification & Signature**

I certify that the housing I will occupy at \_\_\_\_\_ Apartments will be my permanent residence and that I will not maintain a separate rental unit in a different location.

I also certify that the information given herein is accurate and complete, and understand that any misrepresentation will disqualify the application. I authorize the Owner's agent to obtain a credit report(s), verify or check any of the information provided (including credit references, employment, income, assets, current and prior landlords regarding past performance as a renter, & personal/ business references) and to conduct a civil and criminal background check. By signing this application, I certify the above to be true and correct.

**This application cannot be processed without a signature.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**Demographic Information**

The information regarding race, national origin and sex designation solicited on this application is requested in order to assure the Federal and/or State government, as applicable, acting through USDA-RD, HUD or another government agency, that the Federal and State laws prohibiting discrimination against tenant applicants 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 or Owner's agent is required to note the race, ethnicity, and sex of individual applicants on the basis of visual appearance and/or surname.

Please check the appropriate boxes:

Race

- 1) American Indian or Alaska Native
- 2) Asian
- 3) Black or African American
- 4) Native Hawaiian or Pacific Islander
- 5) White
- 6) Some other race
- 7) Two or more races

Ethnicity

- 1) Hispanic or Latino
- 2) Not Hispanic or Latino

Gender

- Female
- Male