

### **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misses two (2) scheduled appointments, management will withdraw the application, and the waiting list will be noted "Withdrawn".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

DATE APPLICATION RECEIVED TIME APPLICATION RECEIVED MANAGER'S INITIALS

## **Rental Application**

Last Name:		First Name:			Middle Name:				
Social Security #			Birthdate:					_	
Age	:	Sex:	Dri	vers License State	& No.:				
Curi	rent Address:								
City	:			State:			Zip Coo	de:	
Tele	phone No:			Cellph	one/Messa	age No.	:		
Face	simile No:			E-Mail	:				
Hov	v long have y			s given above?					
Curi	rent Landlord	:			Address:				
Land	dlord's Teleph	none No:			Reason for which you are moving:				
Curi	rent Rent \$	Do	you cur	rently receive gov	vernment s	ubsidy	?	No Y	es
		lf y	es, whic	ch type?					
Are	you presently	y being or have	you eve	er been evicted?		No	Ye	s If yes, ple	ease
prov	vide explanati	ion							
list	helow all of t	he neonle in v	our hou	sehold that plan	on living in	the ur	nit .		
LISC	Last Name	First Name	M.I.	Social Security #	Birthdate	Age	Sex	Drivers License #	Relationship
1.									
2.									
3. 4.									
5.									
6. 7									
7. Doe	s anvone live	with you now	who is r	not listed above?	I	No	Yes	s	
DUC	If yes, who?				Rel	ationsł		5	
Dov	•			her name and/or			·		
	No	-	es, desc			,			
Ара		size requested		Studio	1 Bdrm	21	Bdrm	3 Bdrm	4 Bdrm
•	. ,	•		ge 18 or older atte	4				
	, No	-	es, who	-					
Doy	/ou own a pe	t? No		Yes If yes, how	v many?		Descrip	otion	
Do you have a waterbed? No Yes If yes, do you have waterbed insurance?									
Do you have a Section 8 Certificate (voucher program)?									
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 Requir	ed)	
Previous Address:			Unit No.:
	State:	Zip Code:	
Previous Landlord Name:			
Previous Landlord Address:			
Previous Landlord Telephone	No:	Previous	Rent Paid: \$
Dates you lived there: From	То		
Reason for moving:			
Previous Address:			Unit No.:
City:			
Previous Landlord Name:			
Previous Landlord Address:			
- Previous Landlord Telephone			Rent Paid: \$
Dates you lived there: From			
Reason for moving:			
Previous Address:			Unit No:
	State:	Zip Code:	
Previous Landlord Name:			
Previous Landlord Address:			
- Previous Landlord Telephone	No:	Previous	Rent Paid: \$
Dates you lived there: From			
Reason for moving:			
Personal References			
Name:		Telephone No:	
Address:			
Nama		Telephone No:	_
Address:			_
Emergency Contact Person N	lot Living in the Household	(Must be Completed in I	Full)
Name:		Telephone No:	
Address			
Relationship:			
Automobile(s)			
Make:	Model:	Year:	Color:
License Plate No.:	State:	Currently Registered?	Yes No
	Model:	Year:	
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?			
Η	Β	Has any household member been convicted of a violent crime? Is any household member currently on probation for a violent or drug-related offense?			
Certifi	cation 8	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 reverences) and to conduct a civil and criminal background check. By signing this applicatoin, I certify the above to be true and correct.

How did you hear about the complex:

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

Applicant	Signature
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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		Ethnicity	Ge
	1) American Indian or Alaska Native	1) Hispanic or Latino	
	2) Asian	2) Not Hispanic or Latino	
	3) Black or African American		
	4) Native Hawaiian or Pacific Islander		
	5) White		
	6) Some other race		

7) Two or more races