

# APPLICATION FOR RENTAL

with

## Meadows Point/ LaMesa Point Apartments

Date Received: _____
Time Received: _____
Bedroom Size: _____
Received By: _____

Please complete this application with pertinent details. This information requested provides the basis for our selection of the best neighbors for you and all residents. If accepted as a resident, this application will become part of your resident file.

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Alt Phone # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Marital Status: (Check one):  Married  Single  Unmarried

For statistical purposes only, please check all that apply:

White  Black  Am. Indian/Alaskan Native  Asian  Native Hawaiian/Other

Also please designate your ethnicity:  Hispanic  Non-Hispanic

**Household Information:** Complete the following information for each household member that will occupy the unit at time of move-in:

Name (Last, First, MI)	Relationship to the Head of Household	Birth Date (mm, dd, yyyy)	Student (Y/N)	Social Security Number

1. Does anyone live with you who is not listed above?  Yes  No
2. Is Head of Household or Spouse a person with disabilities? \*  Yes  No
3. Are you now living in a federally subsidized housing unit?  Yes  No
4. Have you ever been evicted from Public Housing, Indian Housing, a Section 23 or Section 8 Program?  Yes  No  
 If yes, please provide the following information: When? \_\_\_\_\_ For what reason? \_\_\_\_\_  
 Name of the Housing Authority Owner: \_\_\_\_\_
5. Are you or any member of your household registered as a lifetime sex offender?  Yes  No
6. Have you, or a member of your household, ever been Arrested of a felony?  Yes  No  
 If Yes, what was the date of the arrest? \_\_\_\_\_  
 If Yes, what was the charge? \_\_\_\_\_  
 If arrested for a felony, did the arrest result in a conviction?  Yes  No  
 If No, is the case still pending?  Yes  No  
 If the case is not pending, were you acquitted of the charge?  Yes  No  
 If you were convicted of the felony, were you incarcerated?  Yes  No  
 If Yes, what was the date of your release? \_\_\_\_\_

**FAILURE TO ANSWER QUESTIONS 5 AND 6 WILL BE REASON FOR DENIAL OF APPLICATION.**

\* These questions are asked only for the purposes of calculating total tenant payment and determining the family's need for an accessible unit.

7. Name and address of current landlord: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Dates of occupancy: From \_\_\_\_\_ to \_\_\_\_\_ Amount of rent: \_\_\_\_\_

**IF YOU ARE STAYING IN A SHELTER OR WITH FAMILY YOU MUST STILL ANSWER THE ABOVE QUESTION.**

8. Have you ever been evicted? \_\_\_\_\_ If so, from where and when? \_\_\_\_\_

Please list your place of dwelling for the past three years:

ADDRESS	LANDLORD NAME AND ADDRESS	LANDLORD'S PHONE	DATES TO AND FROM

**FINANCIAL INFORMATION**

Please answer each of the following questions. For each "yes", please provide detail in the chart below.

Does any member of your household:

- 1. Work full-time, part-time or seasonally?  Yes  No
- 2. Expect to work for any period during the next year?  Yes  No
- 3. Work for someone who pays them cash?  Yes  No
- 4. Expect a leave of absence from work due to lay-off, medical, maternity, or military leave?  Yes  No
- 5. Now receive or expect to receive unemployment benefits?  Yes  No
- 6. Now receive or expect to receive child support?  Yes  No
- 7. Have an entitlement to receive child support that he/she is not now receiving?  Yes  No
- 8. Now receive or expect to receive alimony?  Yes  No
- 9. Have an entitlement to receive alimony that is not currently being received?  Yes  No
- 10. Now receive or expect to receive public assistance (welfare)?  Yes  No
- 11. Now receive or expect to receive Social Security benefits?  Yes  No
- 12. Now receive or expect to receive income from a pension or annuity?  Yes  No
- 13. Now receive or expect to receive regular contributions from organizations or individuals not living in the unit?  Yes  No
- 14. Receive income from assets including interest on checking or savings accounts, interest, and dividends from certificates of deposit, stocks or bonds, or income from rental property?  Yes  No
- 15. Own real estate or any assets for which you receive no income (checking account, cash)?  Yes  No
- 16. Have you sold, given away or otherwise transferred an asset(s) for less than fair market value in the past two years? Explain:  Yes  No

Member #	Source of Income/Type of Income	Annual Income

17. Do you have expenses for child care of a child aged 12 or younger?  Yes  No  
If yes, provide the name, address, and telephone number of the care provider:

What is the weekly cost to you of the child care? \_\_\_\_\_

18. Do you pay a care attendant or for any equipment for any household member(s) with disabilities necessary to permit that person or someone else in the household to work?  Yes  No  
If you pay a care attendant, provide the name address and telephone number:

What is the weekly cost to you for the care attendant and/or the equipment? \_\_\_\_\_

**Please note the following items relative to the processing of this application:**

1. **After formal processing of this application has begun, the information and verification must be updated every six (6) months prior to move-in.**
2. **A credit report may be obtained prior to initial occupancy.**

**I (meaning all adults listed on this application) hereby consent to the release of all criminal conviction records to Gorman Management Company (GMC) as agent for the Owner of the Property I am applying for occupancy. Any law enforcement agency, court or any other organization that houses said records may release criminal conviction records concerning my household to GMC. Furthermore, I consent to the release of all rental history, credit history and driving records to GMC for use in determining my eligibility for occupancy. GMC will maintain complete confidentiality of any information attained from this release.**

*I/We the applicant(s) agree to give the management/Owner the authority to investigate my/our credit rating, my/our current and past rental record, and all other information necessary to determine eligibility. I/We understand that any misrepresentation of information on this form will disqualify me from consideration for leasing and may be grounds for eviction.*

*I hereby affirm that the foregoing information is true and correct to the best of my knowledge.*

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Other Adult Member

\_\_\_\_\_  
Date

**PENALTIES FOR MISUSING THIS CONSENT:**

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. Section 408 (a) (6), (7) and (8).

Meadows Point/ LaMesa Point does not discriminate on the basis of handicapped status in the admission for access to, or treatment or employment in its federally assisted programs and activity.



**Application Declarations and Authorization**

(To accompany the rental application)

**Accurate Information:** You declare that all of your statements on the accompanying application and any supplemental information are true and correct. If you fail to fully and completely answer any question or give false information, we may reject the application, retain all application fees as liquidated damages for our time and expense. Giving false information is a serious criminal offense.

**Authorization:** You authorize us to verify all information relating to this application through any means, including but not limited to One Site Screening and any other consumer reporting agencies, public record resources, and other rental housing owners. You further authorize us to furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your lease obligations, including both favorable and unfavorable information about your compliance with any lease, rules, or financial obligations.

In the event that anything contained herein is in conflict with any additional application document, this document will be controlling.

(Each applicant must be named, sign and date/time this "Declarations and Authorization")

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant Name      Applicant Signature      Date/Time

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant Name      Applicant Signature      Date/Time

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
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\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
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