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RESIDENT SELECTION CRITERIA

Each Adult Household Member Must Complete a Separate Application Form.

Applications must meet the following *eligibility* requirements:

Rent:	\$730
Household Limits	2 Bedrooms -1- 4 Persons
Income Qualifications: <u>Minimum:</u>	\$19, 200
<u>Maximum:</u>	\$103,050

The following information affecting Eligibility will be verified for all household members:

- Annual Income & Household Composition
- Age
- Student Status (If every member of the household is a full-time student, the household may Not be eligible for residency. Please discuss with Manager)
- Social Security Number

After reviewing the *eligibility* criteria, you should complete the application form. Please be sure to answer all questions completely; in order to ensure the most prompt attention! When you are sure that you have answered all questions, return the application form to us. When your completed application form is received at our rental office, you will enter in the Initial Processing Phase. Once initial eligibility has been confirmed, the application will be processed as outlined below. Again, thank you for your interest in **Wellington Place Apartments**. We look forward to receiving your completed application form.

Credit Report/Criminal Background Search

A credit check will be completed. Numerous negative credit ratings along with positive credit ratings (not including Student or Medical) could result in last months rent payment in advance. The following items could cause your application to be rejected:

- Any one judgment/collection other than medical/student loan not remedied; Any judgment/collection less than 6 months, remedied or not.
- Any one record of eviction or Unlawful Detainer from a Landlord;
- Any one repossession of material or personal property;
- Ratings on a credit report of 4 – 9 are not acceptable; (one rating of 4 - 9 over 1 year old is acceptable as long as applicant has a minimum of two accounts with a rating of 2 or better)
- Any evidence that the applicant will be unable or unwilling to meet the rental obligation on a consistent monthly basis.
- Bankruptcy will be acceptable as long as it has been discharged at least one (1) year ago, proof of accounts included in Bankruptcy must be provided and no adverse credit since date of discharge.
- A criminal background check will be performed. Any felony, or any felony or misdemeanor involving sexual misconduct or illegal drug use, or any kind of violent criminal activity will be reason for rejection.

Landlord Reference

A landlord check will also be completed. The following items could cause your application to be rejected: Any one instance of leaving a prior residence owing a balance or without giving proper notice; Any one eviction or skip from a prior residence; any three (3) late payments of rent within a twelve (12) month period from a current or past residence; Any record of disturbance of neighbors or destruction of private or public property or any disruptive or dangerous behavior; Any record of unsanitary or hazardous housekeeping; Any record of failure to cooperate with applicable re-certification procedures or termination of assistance based on fraud; Any record of material non-compliance breaches of current or prior leases or community rules; Any evidence that there is a substantial risk that the applicant will be unable or unwilling to maintain their apartment in the condition that would be required by the Lease.

When would you like to move? _____ What size? _____ Property? _____ Leasing Consultant: _____

Each Adult Household Member must complete a separate application form and must qualify individually. **PLEASE PRINT !**

Applicant's Name _____ Age _____ DOB _____ Student? _____ Social Security # _____

Please list other Occupants Below:

Full Name _____

Full Name _____

Full Name _____

Will any occupants be added to the household within the next 12 months? Yes _____ No _____
If yes, Name _____ Age _____ Student? Yes _____ No _____

Home Phone Number: _____ Work Phone Number: _____ Em: _____

STUDENT STATUS:

Are all of the residents full-time students? () Yes () No

If yes: is the household comprised of a single parent and child, neither of whom is dependent on a third party? () Yes () No

If yes: are Applicant & Co-Applicant married and file a joint tax return? () Yes () No

If yes: does the household receive AFDC ? () Yes () No

RENTAL HISTORY

Current Address _____ Monthly Rent: \$ _____ From _____ to _____

City _____ State _____ Zip Code _____

Landlord's Name: _____ Phone No: _____ Reason for Moving: _____

Previous Address _____ Monthly Rent: \$ _____ From _____ to _____

City _____ State _____ Zip Code _____

Landlord's Name: _____ Phone No: _____ Reason for Moving: _____

OTHER INFORMATION

CHECKING: _____ Average Balance: _____ Account # _____

SAVINGS: _____ Current Balance: _____ Account # _____
Name and address of your bank _____

Driver's License: _____ State: _____ Expires: _____

Vehicle Model: _____ Year: _____ License Plate #: _____

Nearest Living Relative _____
Name _____ Phone _____ Relationship _____
Address: _____

HAVE YOU EVER: Filed for Bankruptcy? () Yes () No Been evicted from your home? () Yes () No

CRIMINAL HISTORY: (Have you ever . . .)

Been convicted of or pleaded guilty or "no contest" to a felony? () Yes () No

Been convicted of or pleaded guilty or "no contest" to a misdemeanor involving sexual misconduct? () Yes () No
(whether or not the felony or misdemeanor resulted in a conviction)

EMPLOYMENT

Circle all applicable: Employed full time Employed part time Self-employed Non-employed Unemployed

Current Employer: _____ Position: _____ How Long: _____

Address: _____ Supervisor: _____ Phone: _____

Current Wages: \$ _____ per. Hour Week Month Year ? (circle one)

Do you expect to earn substantial overtime? () Yes () No If so, how much? _____

Note: Applicants must complete this section in order to determine qualification for residency within the Federal Low Income Housing Tax Credit Program. Although this information is voluntary under the Federal Fair Housing Act, failure to provide such income may result in non-qualification for residency for any rental unit in the Affordable Housing Program.

Other Income Includes: Alimony, child support, welfare, unemployment, aid to dependent children, social security, annuities, insurance policies, retirement benefits, pensions and other regular periodic payments. Please consult the leasing personnel for a complete list of other income.

If none, check here: () NO OTHER SOURCES OF INCOME

Table with 3 columns: (1) Type of income, (2) Annual Amount, (3) Contact address or phone. Includes three rows for data entry.

ASSETS

Assets include: Cash (wherever held), trust corpus, equity in real estate or capital investments, notes receivable, stocks, bonds, Bonds, money market accounts, profit shares, IRAs, retirement & pension funds, and luxury personal property (gems, jewelry, art, coin collections, etc...)

Asset Do Not include: Necessary personal property such as clothing, furniture, daily-use autos, tools, dishes, etc. Also excluded is any special equipment for use by the handicapped, cash value of life insurance polices, and assets of a business.

Are the assets (as defined above) of the whole household less than \$5,000.00 ? () Yes () No

If no, what is the anticipated earning on all household assets for the next year? \$ _____

If no, please complete the following section:

Table with 3 columns: Asset, Value, Anticipated Annual Earnings on Asset. Includes three rows for data entry.

Do you receive regular cash contributions from individuals not living in the unit or from agencies? ___ Yes ___ No \$ _____

List any other source of income not listed above: _____

I hereby apply to lease the above described premises on substantially the terms set forth herein. As an inducement to Square One Property Management, Inc., Agent for the owner of the property, to accept this application, I warrant that all statements contained herein are true. I have been advised and understand that residency at Wellington Place Apartments entails certain income restrictions and that residency is subject to qualification. I hereby authorize Landlord to procure a consumer report as defined in the Fair Credit Reporting Act, 15 U.S.C. 1881 a (d) seeking information on the credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. I tender in addition to any security deposit, the amount of \$ 32.00/40.00 which I acknowledge is the cost of procuring a consumer credit report, employment verification, character references and other administrative set-up costs. This fee is non-refundable. I agree that in addition to execution of a Lease Agreement that I will execute a resident certification attesting to the information contained herein which certification will be made under the penalty of perjury.

A Security Deposit of \$ 320.00 is made herein. Said deposit would be held as security for the performance of the covenants of the lease and as a damage deposit. If after the application is approved, prospective resident cancels and no longer wishes to rent said apartment, Landlord reserves the right to retain the full security deposit. (You will forfeit your security deposit) In addition, if for any reason, prospective resident fails to move in within 7 days of the initial pre-arranged move in date, management will be forced to withdraw the application for tenancy due to Management regulations.

By execution of this application, I hereby authorize Square One Property Management, Inc., to make such investigations into my credit history as they may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, rental history and consumer credit reports.

The undersigned do hereby acknowledge disclosure that the licensee, Square One Property Management, Inc., represents the Landlord in a real estate transaction.

Applicant _____

Date _____

Leasing Consultant - This Signature certifies that this application has been checked for Completeness _____

Date _____

DECLARATION OF MARITAL STATUS AND JOINT ASSETS

I CERTIFY THAT I AM CURRENTLY:

___ NEVER MARRIED

___ MARRIED

___ SEPARATED (not legally)

___ SEPARATED (**legally** - agreement attached)

___ (I do not intend to reconcile with my spouse and he/she will not reside with me in the future.)

___ DIVORCED (no children)

___ DIVORCED (children)

___ WIDOWED

(Birth certificates and/or legal custody will be required for households with children.)

I CERTIFY THE FOLLOWING STATUS AS TO JOINT ASSETS:

(includes cash, checking, savings, certificates of deposit, money market accounts, 401 K's, Keogh plans, other retirement accounts, stocks, bonds, trust funds, savings bonds, real estate or rental property, cash value of life insurance policies, assets such as art or jewelry held as an investment real estate, or any other asset.)

___ I **DO NOT HAVE** ANY JOINT ASSETS WITH MY SPOUSE/EX-SPOUSE

___ I **HAVE JOINT INTEREST** IN THE ASSETS LISTED BELOW:

Print Name

Date

Signature

Date

Management Witness

Date

STUDENT STATUS VERIFICATION

- A. I certify that I am NOT a full-time student and I do not anticipate becoming a full-time student in the future.
- B. I certify that I am a full-time student at the following institution:

AT NO TIME MAY A LOW INCOME TAX CREDIT APARTMENT BE OCCUPIED ENTIRELY BY NON-EXEMPT, FULL-TIME STUDENTS. SHOULD OUR HOUSEHOLD STUDENT STATUS CHANGE, I WILL ALERT THE RENTAL OFFICE IMMEDIATELY IN WRITNG. ALSO, I HEREBY ACKNOWLEDGE THAT OUR HOUSEHOLD WILL TERMINATE THE LEASE IMMEDIATELY IF ALL MEMBES BECOME FULL- TIME STUDENTS. (See addendum 5, entitled Eligibility and Ineligibility)

Applicants name (Please Print)

Date

Applicants Signature

Date

Management Witness

Date

Household Questionnaire/Application Addendum (Page 1)

Household Name _____ Unit # _____

1. Does any member of the household now receive or expect to receive?

Other Income:

			Mo. Income
Child Support	_____ Yes	_____ No	_____
Spousal Support	_____ Yes	_____ No	_____
Social Security or SSI	_____ Yes	_____ No	_____
Income from Pension or Annuity	_____ Yes	_____ No	_____
Unemployment of Workers comp	_____ Yes	_____ No	_____
Regular Cash Contributions	_____ Yes	_____ No	_____

Assets:

2. Does any member of the household have any of the following?

If Yes:

Savings account	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Checking Account	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Cert of Deposit	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
IRA/ Keogh	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Stocks	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Bonds	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
401K Account	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Trust fund	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Cash on Hand	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Equity in Real Estate	_____ Yes	_____ No	Current Balance	_____	Interest %	_____
Other Retirement Fund	_____ Yes	_____ No	Current Balance	_____	Interest %	_____

Household Questionnaire/ Application Addendum (Page 2)

Assets (Continued):

Life Insurance

(With cash value) _____ Yes _____ No Current Balance _____ Interest % _____

Personal Property

Held as an

Investment _____ Yes _____ No Current Balance _____ Interest % _____

**** Certain funds such a (Retirement, 401K, Trust) may or may not be fully accessible to you. Include only those amounts which are.**

3. I/We have _____ have not _____ sold or given away any assets (including cash, real estate, etc.) for less than fair market value during the past two (2) years.

4. I Certify that the total household assets are _____ are not _____ more than \$5000.

Under penalty of perjury, I/We certify that the information presented herein is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of the lease agreement.

Applicant Signature

Date

Applicant Signature

Date

(For Office Use Only)
ASSET WORKSHEET

Type of Asset

Value of Asset

Income from Asset

TOTAL

(A) _____

(B) _____

If (A) is greater than \$5000, complete the following:

Total from (A) _____ **multiply by 2% = (C)** _____