

Rental Application for Residents and Occupants

Each co-resident and each occupant over 18 must submit a separate Application.

ABOUT YOU

Full name (exactly as it appears on driver license or govt. ID card) _____

Former name (if applicable) _____

Gender _____ Birthdate _____ Social Security # _____

Driver license # _____ State _____

Government ID # _____ State (if applicable) _____

Home phone _____ Cell phone _____

Work phone _____ Email address _____

Marital status single married

U.S. citizen? yes no

Do you or does any occupant smoke? yes no

I am applying for the apartment located at _____

Is there another co-applicant? yes no

Co-applicant name _____ Email _____

Co-applicant name _____ Email _____

Co-applicant name _____ Email _____

Co-applicant name _____ Email _____

OTHER OCCUPANTS

Full name _____ Relationship _____

Birthdate _____ Social Security # _____

Driver license # _____ State _____

Government ID # _____ State (if applicable) _____

Full name _____ Relationship _____

Birthdate _____ Social Security # _____

Driver license # _____ State _____

Government ID # _____ State (if applicable) _____

Full name _____ Relationship _____

Birthdate _____ Social Security # _____

Driver license # _____ State _____

Government ID # _____ State (if applicable) _____

Full name _____ Relationship _____

Birthdate _____ Social Security # _____

Driver license # _____ State _____

Government ID # _____ State (if applicable) _____

WHERE YOU LIVE

Current home address (where you live now) _____

City _____ State _____ Zip _____

Do you rent or own? Beginning date of residency: _____ Monthly payment \$ _____

Apartment name _____

Name of owner or manager _____

Phone _____ Reason for leaving _____

Previous home address (most recent) _____

City _____ State _____ Zip _____

Do you rent or own? Dates: From _____ To _____ Monthly payment \$ _____

Apartment name _____

Name of owner or manager _____

Phone _____ Reason for leaving _____

YOUR WORK

Current employer _____

Address _____

City _____ State _____ Zip _____

Work phone _____ Beginning date of employment _____

YOUR WORK, continued

Gross monthly income \$ _____ Position _____
 Supervisor _____ Phone _____
 Previous employer (most recent) _____
 Address _____
 City _____ State _____ Zip _____
 Work phone _____ Dates: From _____ To _____
 Gross monthly income \$ _____ Position _____
 Supervisor _____ Phone _____

ADDITIONAL INCOME

(Income must be verified to be considered.)

Type _____ Source _____ Gross monthly amount \$ _____
 Type _____ Source _____ Gross monthly amount \$ _____

CREDIT HISTORY

If applicable, please explain any past credit problem: _____

RENTAL AND CRIMINAL HISTORY

Check only if applicable.

Have you or any occupant listed in this Application ever:

- been evicted or asked to move out?
- moved out of a dwelling before the end of the lease term without the owner's consent?
- declared bankruptcy?
- been sued for rent?
- been sued for property damage?
- been convicted or received probation (other than deferred adjudication) for a felony, sex crime, or any crime against persons or property?

Please indicate below the year, location, and type of each felony, sex crime, or any crime against persons or property for which you were convicted or received probation. We may need to discuss more facts before making a decision. You represent the answer is "no" to any item not checked above. _____

HOW DID YOU FIND US?

- Online search (website address) _____
- Referral from a person or locator? Name _____
- Social media (please be specific) _____
- Other _____

EMERGENCY CONTACT

Emergency contact person over 18 who will not be living with you:

Name _____ Relationship _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____
 Work Phone _____ Email Address _____

If you die or are seriously ill, missing, or incarcerated according to an affidavit of (check one or more) the above person, your spouse, or your parent or child, we may allow such person(s) to enter your dwelling to remove all contents, as well as your property in the mailbox, storerooms, and common areas. If no box is checked, any of the above are authorized at our option. If you are seriously ill or injured, you authorize us to call EMS or send for an ambulance at your expense. We're not legally obligated to do so.

YOUR VEHICLES

(If applicable)

List all vehicles owned or operated by you or any occupants (including cars, trucks, motorcycles, trailers, etc.)

Make _____ Model _____ Color _____
 Year _____ License # _____ State _____
 Make _____ Model _____ Color _____
 Year _____ License # _____ State _____
 Make _____ Model _____ Color _____
 Year _____ License # _____ State _____
 Make _____ Model _____ Color _____
 Year _____ License # _____ State _____

YOUR ANIMALS

(if applicable)

You may not have any animal in your unit without management’s prior authorization in writing. If we allow your requested animal, you must sign a separate animal addendum, which may require additional deposits, rents, fees or other charges.

Kind _____ Weight _____
 Breed _____ Age _____

Kind _____ Weight _____
 Breed _____ Age _____

Special Provisions

Application Agreement

The following Application Agreement will be signed by you and all co-applicants prior to signing a Lease. While some of the information below may not yet apply to your situation, there are some provisions that may become applicable prior to signing a Lease. In order to continue with this Application, you’ll need to review the Application Agreement carefully and acknowledge that you accept the terms.

1. **Apartment Lease information.** The Lease contemplated by the parties will be the current TAA Lease. Special information and conditions must be explicitly noted on the Lease.
2. **Approval when Lease is signed in advance.** If you and all co-applicants have already signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease, and then credit the application deposit of all applicants toward the required security deposit.
3. **Approval when Lease isn’t yet signed.** If you and all co-applicants have not signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit.
4. **If you fail to sign Lease after approval.** Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required **your Application will be deemed withdrawn**, and we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
5. **If you withdraw before approval.** If you or any co-applicant withdraws an Application or notifies us that you’ve changed your mind about renting the dwelling unit, we’ll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.
6. **Approval/non-approval.** If we do not approve your Application within 7 days after the date we received a completed Application, your Application will be considered “disapproved.” Notification may be in person or by mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 7-day time period may be changed only by separate written agreement.
7. **Refund after non-approval.** If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we’ll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
8. **Extension of deadlines.** If the deadline for approving or refunding under paragraphs 6 or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
9. **Keys or access devices.** We’ll furnish keys and/or access devices only after: (1) all parties have signed the Lease and other rental documents referred to in the Lease; and (2) all applicable rents and security deposits have been paid in full.
10. **Application submission.** Submission of an Application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease. Images on our website may represent a sample of a unit and may not reflect specific details of any unit. For information not found on our website regarding unit availability, unit characteristics, pricing or other questions, please call or visit our office.
11. **Notice to or from co-applicants.** Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicants is considered notice from all co-applicants.

Disclosures

1. **Application fee (non-refundable).** You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph 3. Payment of the application fee does not guarantee that your Application will be accepted. The application fee offsets the cost of screening an applicant for acceptance.
2. **Application deposit (may or may not be refundable).** In addition to any application fees, you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit when the Lease has been

signed by all parties; OR, it will be refunded under paragraph 7 if the applicant is not approved; OR it will be retained by us as liquidated damages if you fail to sign or withdraw under paragraphs 4 and 5 of the Application Agreement.

3. **Fees due.** Your Application will not be processed until we receive your completed Application (and the completed Application of all co-applicants, if applicable) and the following fees:
- A. Application fee (non-refundable): \$ _____
 - B. Application deposit (may or may not be refundable) \$ _____
4. **Completed Application.** Your Application will not be considered "complete" and will not be processed until we receive the following documentation and fees:
- A. Your completed Application;
 - B. Completed Applications for each co-applicant (if applicable);
 - C. Application fees for all applicants;
 - D. Application deposit.

Authorization and Acknowledgment

I authorize Seaside Lodge At Chesapeake Bay

(name of owner/agent) to obtain reports from any consumer or criminal record reporting agencies before, during, and after residency on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this Application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Application. Authority to obtain work history information expires 365 days from the date of this Application. You agree the information provided may be used for business purposes.

Payment Authorization

I authorize Seaside Lodge At Chesapeake Bay

(name of owner/agent) to collect payment of the application fee and application deposit in the amounts specified under paragraph 3 of the Disclosures.

Non-sufficient funds and dishonored payments. If a check from an applicant is returned to us by a bank or other entity for any reason, if any credit card or debit card payment from applicant to us is rejected, or if we are unable, through no fault of our own or our bank, to successfully process any ACH debit, credit card, or debit card transaction, then:

- 1. Applicant shall pay a charge of \$ _____ for each returned payment; and
- 2. We reserve the right to refer the matter for criminal prosecution.

Acknowledgment

You declare that all your statements in this Application are true and complete. **Applicant's submission of this Application, including payment of any fees and deposits, is being done only after applicant has fully investigated, to its satisfaction, those facts which applicant deems material and necessary to the decision to apply for a rental unit.** You authorize us to verify your information through any means, including consumer-reporting agencies and other rental-housing owners. **You acknowledge that you had an opportunity to review our rental-selection criteria, which include reasons your Application may be denied, such as criminal history, credit history, current income and rental history. You understand that if you do not meet our rental-selection criteria or if you fail to answer any question or give false information, we may reject the Application, retain all application fees as liquidated damages for our time and expense, and terminate your right of occupancy.** Giving false information is a serious criminal offense. In lawsuits relating to the Application or Lease, the prevailing party may recover from the non-prevailing party all attorney's fees and litigation costs. We may at any time furnish information to consumer-reporting agencies and other rental-housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease, the rules, and financial obligations. Fax or electronic signatures are legally binding. You acknowledge that our privacy policy is available to you.

Right to review the Lease. Before you submit an Application or pay any fees or deposits, you have the right to review the Application and Lease, as well as any community rules or policies we have. You may also consult an attorney. These documents are binding legal documents when signed. We will not take a particular dwelling off the market until we receive a completed Application and any other required information or monies to rent that dwelling. Additional provisions or changes may be made in the Lease if agreed to in writing by all parties. You are entitled to a copy of the Lease after it is fully signed.

Images on our website may represent a sample of a unit and may not reflect specific details of any unit. For information not found on our website regarding availability, unit characteristics or other questions, please call or visit our office.

This Application and the Lease are binding documents when signed. Before submitting an Application or signing a Lease, you may take a copy of these documents to review and/or consult an attorney. Additional provisions or changes may be made in the Lease if agreed to in writing by all parties.

Applicant's signature

Date

FOR OFFICE USE ONLY	
1. Apt. name or dwelling address (street, city): _____	Unit # or type: _____
2. Person accepting application: _____	Phone: _____
3. Person processing application: _____	Phone: _____
4. Date that the applicant or co-applicant was notified <input type="checkbox"/> by telephone, <input type="checkbox"/> by letter, <input type="checkbox"/> by email, or <input type="checkbox"/> in person of <input type="checkbox"/> acceptance or <input type="checkbox"/> nonacceptance: _____ <small>(Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.)</small>	
5. Name of person or persons notified (if there are more than one applicant, at least one of them must be notified): _____	
6. Name of owner's representative who notified the applicant: _____	
Additional comments: _____	



Supplemental Rental Application for Units Under Government Regulated Affordable Housing Programs

Date when filled out: _____

1. **Supplemental Information.** The purpose of this Supplemental Rental Application is to determine whether you qualify for affordable rental housing under a government regulated affordable housing program. It is very important that you answer all questions fully and accurately.
2. **Employment Update.** Present employer: _____
Address: _____ City, State, ZIP: _____
Work Phone: _____ Position: _____
3. **Household Composition.** List all persons, including yourself, who will be living in your household.

Number of Persons	Full Name	Relationship	Age	Student Status
1 (Head of Household)				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A
2				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A
3				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A
4				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A
5				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A
6				<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> N/A

Does anyone live with you now who is not listed above? Yes No. Does anyone plan to live with you in the future who is not listed above? Yes No. If you answered "Yes" to any question, please explain: _____

Are you a veteran? Yes No **Important Information for Former Military Services Members.** Women and men who served in any branch of the United States Armed Forces, including Army, Navy, Air Force, Marines, Coast Guard, Reserves or National Guard, may be eligible for additional benefits and services. For more information please visit the Texas Veterans Portal at <https://veterans.portal.texas.gov/>.

Are any of the household members listed above: Foster children? Yes No Live-in attendants? Yes No

Were any of the names listed above students in the year this application was completed? Yes No. Do any of them plan to be students in the year this application is completed? Yes No. If you answered "Yes" to either question, please explain: _____

4. **Income.** List all income of all adults and persons in your household, including those under 18 (except for income earned from employment by persons under the age of 18 who are dependents of another household member).

Gross Monthly Income Source: <small>Indicate whether anyone in your household receives income from the following</small>		Applicant	Co-Applicant	Other Household Members	Total
Salary <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Overtime Pay <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Commissions and Fees <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Tips and Bonuses <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Interest and/or Dividends <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Net Income from Business <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Net Rental Income <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Social Security, Supplemental Security Income <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Pensions, Retirement Funds, etc. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Support from Parents or Relatives <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Unemployment Benefits <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Workers' Compensation, etc. <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Alimony <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Sources of Child Support:					
• Court-ordered (regardless if paid) <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
• Voluntary payments <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
• Anticipated payments <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
AFDC/TANF <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Student Financial Assistance <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	\$	\$	\$	\$
Other: <input type="checkbox"/> Yes <input type="checkbox"/> No (explain)	<input type="checkbox"/>	\$	\$	\$	\$
TOTAL \$					

5. **Assets.** List all assets of all adults and persons in your household, including those under the age of 18.

Listing of All Assets	Cash Value	Annual Interest, Dividends or Rent from Assets	Name of Financial Institution or Description of Asset	Account Number
Checking Account(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Savings Account(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Credit Union Account(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Stocks, Bonds or Mutual Funds <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Real Estate or Home <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
IRA/Keough Account <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Retirement Fund (401(k), 457, 403(b), etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Pension Fund <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Trust Fund <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Mortgage Note Held <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Whole Life Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$		
Cash Value				
Other: <input type="checkbox"/> Yes <input type="checkbox"/> No (explain)	\$	\$		

6. **Rental Assistance.** Do you receive any type of federal, state, or local government rental assistance? Yes No. If yes, please explain: _____
7. **Asset Verification.** Have you disposed of any assets for less than fair market value in the last two years preceding the date of this application? Yes No.
8. **Certification.** By signing this Supplemental Rental Application, you as the applicant are certifying that all the above information is true and correct. You are consenting to disclosure of income and financial information from your employer(s) and any financial institutions where your assets are kept.
9. **Recertification.** If this form is being used for recertification and you have changed employment during the past year, you must complete the "Your Work" section of the TAA Rental Application.

Applicant

Date of Signing Application

Co-Applicant

Date of Signing Application

**Seaside Lodge
Compliance Information Sheet**

NAME: _____

UNIT #: _____

Household Income: \$ _____

UNIT: 1br, 2br

Unit Type: 30% , 50% , 80%

Circle applicable household income limit:

Chambers County HTC effective 4/1/21 - HOME limits effective 7/1/21							
AMI %	Number of Household Members						
# of HH Members	1	2	3	4	5	6	7
30% LLH	\$ 16,650	\$ 19,000	\$ 21,400	\$ 23,750	\$ 25,650	\$ 27,550	\$ 29,450
50% LH	\$ 27,750	\$ 31,700	\$ 35,650	\$ 39,600	\$ 42,800	\$ 45,950	\$ 49,150
80% HH	\$ 44,350	\$ 50,700	\$ 57,050	\$ 63,350	\$ 68,450	\$ 73,500	\$ 78,600
80% HTC Limit	\$ 44,400	\$ 50,720	\$ 57,040	\$ 63,360	\$ 68,480	\$ 73,520	\$ 78,640

Circle applicable rent limit:

Diamond UA Effective 2021								
# of Bedrooms	Rent Qualifications							
	1 BR 30%/LLH	1 BR 50%/LH	1 BR 80%/HH	1 BR 80% HTC	2 BR 30%/LLH	2 BR 50%/LH	2 BR 80%/HH	2 BR 80% HTC
Max rent	\$ 445	\$ 743	\$ 946	\$ 1,189	\$ 535	\$ 891	\$ 1,137	\$1,426
Less: Utility Allowance	\$ 94	\$ 94	\$ 94	\$ 94	\$ 111	\$ 111	\$ 111	\$111
Allowable Tenant Paid Rent	\$ 351	\$ 649	\$ 852	\$ 1,095	\$ 424	\$ 780	\$ 1,026	\$1,315

Unit Mix - 92 Units			
Designation	Floorplan	Unit Type	# of Units
30% LLH	LLH 1-1 LMI	1 BR 1 BA	4
30% LLH	LLH 2 HLMI	2 BR 2 BA	1
30% LLH	LLH 2-2LMI	2 BR 2 BA	3
50% LH	LH 1-1	1 BR 1 BA	5
50% LH	LH 1-1 LMI	1 BR 1 BA	1
50% LH	LH 2-2 50%	2 BR 2 BA	5
80% HH	HH 1-1 80%	1 BR 1 BA	12
80% HH	HH 1-1 HC	1 BR 1 BA	3
80% HH	HH 2-2 80%	2 BR 2 BA	12
80% HH	HH 2-2 HC	2 BR 2 BA	2
80% HTC	TC 1-1 HC	1 BR 1 BA	3
80% HTC	TC 80% 1-1	1 BR 1 BA	19
80% HTC	TC 2-2 HC	2 BR 2 BA	4
80% HTC	TC 80% 2-2	2 BR 2 BA	18

Seaside Lodge Apartments
Effective Date: November 1, 2021

RESIDENT SELECTION PLAN-POLICY

Welcome to **Seaside Lodge** Apartments. This apartment community was developed with special financing, which allows the rental rates to be more affordable. It is not connected with the Section 8 program, although applicants with Section 8 vouchers and certificates are welcome to apply.

I. FAIR HOUSING AND EQUAL OPPORTUNITY LAWS

The Development will comply with state and federal fair housing and antidiscrimination laws; including, but not limited to, consideration of reasonable accommodations requested to complete the application process. Texas Administrative Code, Title 10, Chapter 1, Subchapter B of this title provides more detail about reasonable accommodations. Screening criteria will be applied in a manner consistent with all applicable laws, including the Texas and Federal Fair Housing Acts, the Federal Fair Credit Reporting Act, program guidelines, and the Department's rules. Management will not discriminate based on race, color, religion, sex, age (except in eligibility requirements), handicap, familial status, national origin, and/or applicants covered by the Violence Against Women Reauthorization Act of 2013, in any phase of the occupancy process. The occupancy process includes, but is not necessarily limited to, application processing, leasing, delivery of management and service, access to common facilities, and termination of occupancy.

II. ACCEPTING APPLICATIONS

Management will accept an application for rental from any and all interested persons during normal business hours. All persons desiring to apply for occupancy will be provided the opportunity to submit completed applications. It must be recognized that submission of an application neither guarantees the applicant housing nor obligates the property's agent to provide housing. Admission and move-in is contingent upon verified qualification of the applicant and availability of an appropriate unit.

- A. Written application, on the property's Texas Apartment Association (TAA) form, must be made in order to be considered for residency. Application may be made in person by the applicant(s), by mail, email, fax or by on-line service, if available.
 1. Proof of identity will be required for all family members (such as driver's license, state identification card, social security numbers for all family members)
 2. Should the applicant be personally unable to complete the form, the:
 - a. Applicant must be present to provide the information to the person that is completing the application form, or
 - b. Persons assisting the applicant must sign and date the application, indicate it was completed at the direction of the named applicant, and provide identification to management.
 3. The application must be fully completed and signed by the adult member(s). Any information not readily available to the applicant, must be so noted on the application form by the applicant.
 4. Seaside Lodge at Chesapeake Bay is a Senior **55+** Affordable Housing Community, which participates in the CDBG-DR/HOME Investment Partnerships Program. No persons under the age of 18 can occupy a unit at this property.

5. 6 units are set-aside for households that are referred by the Coalition for the Homeless.
- B. In order to process your application, management may need information/documentation to verify the following:
1. Current gross annual income. Income cannot exceed program requirement. HUD establishes income limits and the respective state agency adopt these limits annually with all limits based on family size. The annual income for households participating in the program may not exceed the current income limit per household size. Residents must provide all sources of earned and unearned gross annual income for all adult household members.

Acceptable forms of income and assets verifications include but are not limited to Employment Verification form completed and received directly from resident employer, or current consecutive pay stubs covering two (2) months, last two (2) years tax return if self-employed, current Social Security benefit award letter, Pension benefits, two (2) months bank statements for checking accounts and current savings account statement, IRA, 401K, and/or money market account.
 2. Credit and statewide Criminal History Background Check on all family members 18 years and older.
 3. Rental history. It is your responsibility to provide necessary information that allows us to contact your past landlords. If we are unable to verify your previous landlord and/or references, we reserve the right to deny your application.
- C. The screening criteria will be applied uniformly and, in a manner, consistent with all applicable laws, including Texas state laws, the Federal Fair Housing Act, the Federal Fair Credit Reporting Act and all Affordable Housing program guidelines. Information will be obtained and considered for all household members who are:
1. 18 years of age or over regardless of marriage or married at one time and presently divorced.
 2. A minor (under 18) who is emancipated from parental control by court order.

III. REASONABLE ACCOMODATION POLICY

A person with a disability may request reasonable accommodations during application and while residing at the development by contacting the management office by phone, by email or in person. Management will submit the request for review, and approval or denial of such request will be given to the applicant within three (3) business days.

IV. VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY

Property managers understand that, regardless of whether state or local laws protect victims of domestic violence, people who have been victims of violence have certain rights under federal fair housing laws. The intent of this Policy is to support or assist victims of domestic violence, dating violence or stalking as well as to protect victims and members of their family, from being denied housing because of domestic violence, sexual assault, dating violence or stalking.

- A. If any applicant or resident wishes to exercise the protections provided in the VAWA, he/she should contact the owner/agent immediately. The owner/agent is committed to ensuring that the Privacy Act is enforced in this and all other situations.

B. The owner/agent will not assume that any act is a result of abuse covered under the VAWA. In order to receive the protections outlined in the VAWA, the applicant/resident must specify that he/she wishes to exercise these protections.

C. Compliance with Requirements Outlined in the Violence Against Women Act (VAWA)

1. The VAWA was promoted for a noble cause to make the lives of victims of abuse easier and to prevent homelessness. Some key points provided in the Act include:
 - a. A potential resident who certifies they were the victim of domestic violence would be allowed to be admitted, even with poor credit and/or poor owner/agent evaluations, if they can show the cause of these negative factors were caused by domestic violence. The owner/agent does require self-certification from the applicant. This may include verification from police, domestic violence victims' advocates and social service agencies.
 - b. The Act assured that victims of domestic violence, sexual assault, etc. can have access to the criminal justice system without facing eviction.
 - c. Where someone is abusive to other members of the household, only the abuser may be evicted, if the reason for eviction is directly related to such abuse.
 - d. Residents living in assisted housing facing violence can be allowed early lease termination for a matter of safety.

D. Certification and Confidentiality

1. When the owner/agent responds to a claim of protected status under the VAWA the owner/agent will request, in writing if appropriate, that an individual complete, sign, and submit the VAWA Certification Form (HUD form 5382) within 14 business days of the request. The owner/agent understands that the delivery of the certification form to the resident via mail may place the victim at risk, e.g., the abuser may monitor the mail.

Therefore, in order to mitigate risks, the owner/agent will work with the resident in making acceptable delivery arrangements, such as inviting them into the office to pick up the certification form or making other discreet arrangements. Owner/agent will respond to the request within three (3) business days of receiving completed certification with all required back up documentation.

2. If the resident has sought assistance in addressing domestic violence, dating violence or stalking from a federal, state, tribal, territorial jurisdiction, local police or court, the resident may submit written proof of this outreach.

E. In addition to submitting VAWA certification, the victim can submit one of the following:

1. A federal, state, tribal, territorial, or local police record or court record, or
2. Documentation signed and attested to by a professional (employee, agent or volunteer of a victim service provider, an attorney, medical personnel, etc.) From whom the victim has sought assistance in addressing domestic violence, dating violence or stalking or the effects of the abuse. The signatory attests under penalty of perjury (28 U.S.C. §1746) to his/her belief that the incident in question represents bona fide abuse, and the victim of domestic violence, dating violence or stalking has signed or attested to the documentation.

F. The owner/agent will carefully evaluate abuse claims as to avoid conducting an eviction based on false or unsubstantiated accusations.

- G. The identity of the victim and all information provided to owner/agent relating to the incident(s) of abuse covered under the VAWA will be retained in confidence. Information will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is:
 - 1. Requested or consented to by the victim in writing;
 - 2. Required for use in an eviction proceeding or termination of assistance; or
 - 3. Otherwise required by applicable law.
- H. The VAWA certification provides notice to the resident of the confidentiality of the form and the limits thereof. The owner/agent will retain all documentation relating to an individual's domestic violence, rape, dating violence or stalking in a separate file that is kept in a separate secure location from other resident files.
- I. If the owner/agent determines that physical abuse caused by a resident is clear and present, the law provides owner/agent the authority to bifurcate a lease i.e., remove, evict, terminate housing assistance to that individual, while allowing the victim, who lawfully occupies the home, to maintain tenancy.
- J. Owners/agents must keep in mind that the eviction of or the termination action against the individual must be in accordance with the procedures prescribed by federal, state, and local law. In the event that one household member is removed from the unit because of engaging in acts of domestic violence, dating violence or stalking against another household member, an interim recertification will be processed reflecting the change in household composition.
- K. Lease Addendum
The owner/agent is required to attach the VAWA Lease Addendum, which includes the VAWA provisions, to each existing or new lease.
- L. Notice of Occupancy Rights under the Violence Against Women Act
Each applicant or resident is provided a copy at move-in, denial and non-renewal.

V. DENYING APPLICANTS

- A. Applicants will be denied for the following reasons:
 - 1. For not meeting the affordable housing program requirements. Requirements include meeting the income restrictions published annually.
 - 2. For not meeting property screening criteria.
 - a. Screening score of 9 or below.
 - b. For not having current verifiable monthly income minimum 2 times the resident's portion of the rental rate. However, if a family's share of the rent is \$50 or less, a minimum annual income of the greater of a monthly income of 2 times the household's share of the total monthly rent amount or \$2,500.00 annually will be required.
 - c. Rental History, failure to pay rent in a timely manner, history of lease violations, repeated disturbance of neighbor's peace, reports of drug dealing, drug use, manufacturing, gambling or prostitution. There is reasonable cause to believe that a household member's abuse or pattern of abuse of alcohol interferes with the health, safety, or right or peaceful enjoyment of the premises by other residents. Allowing person(s) not on the lease to reside at the residence. Damage to the property beyond normal wear and tear. Failure to give proper notice when vacating. Eviction, landlord claims or balances will not be accepted within the past 36 months or unless balance is paid in full. It is your responsibility to provide us with contact information for previous landlords. If we are unable to verify your previous rental history, we reserve the right to deny the application.

First time renters may be considered with additional security deposit.

d. Criminal Record(s):

Automatic Denial Felony:

- Sex Offender Registration
- Murder, Homicide, Manslaughter related offenses
- Sexually Oriented offenses
- Threat/Terrorist Related offenses
- Current or past drug-related criminal activity for the production or manufacture of methamphetamine on the premises of federally assisted housing

Automatic Denial Felony if offense is within the past 84 months:

- Abuse/Assault and Battery related offenses
- Theft, Robbery, Breaking and Entering related offenses
- Abduction/Kidnapping offenses
- Arson related offenses
- Forgery, Money, Check related offenses
- Prostitution, Solicitation related offenses
- Fraud, Embezzlement, Tampering related offenses
- Firearms, Weapons, Explosive related offenses
- Narcotics Drug related offenses
- Gang related offenses
- Pornography related offenses
- Stolen Property related offenses
- Trespassing, Prowling related offenses
- Environmental, Animal related offenses
- Corruption of Minors related offenses

Automatic Denial Misdemeanor:

- Murder, Homicide, Manslaughter related offenses
- Sexually Oriented offenses
- Threat/Terrorist Related offenses

Automatic Denial Misdemeanor if offense is within the 24 months:

- Abuse/Assault and Battery related offenses
- Theft, Robbery, Breaking and Entering related offenses
- Abduction/Kidnapping offenses
- Arson related offenses
- Forgery, Money, Check related offenses
- Prostitution, Solicitation related offenses
- Fraud, Embezzlement, Tampering related offenses
- Firearms, Weapons, Explosive related offenses
- Narcotics Drug related offenses
- Gang related offenses
- Pornography related offenses
- Stolen Property related offenses
- Trespassing, Prowling related offenses
- Environmental, Animal related offenses
- Corruption of Minors related offenses

3. Application is incomplete and cannot be made complete based upon the applicant's lack of cooperation.
4. Family composition does not conform to units available on property.
5. Applicant provided false information necessary in the determination of eligibility.
6. Voluntary withdrawal of the application by the applicant.

7. Management is not able to reach the applicant by phone, mail or email.

If you do not meet our Screening/Eligibility Criteria you will be provided a written explanation of the grounds for rejection within seven (7) days of application completion. If an applicant disputes the decision the application is considered incomplete until documentation is provided by the applicant to clear the dispute.

VI. OCCUPANCY STANDARDS

There are no government program requirements relative to the number, sex or relationship of people who may share a bedroom. **Seaside Lodge** Apartments has established the following occupancy standards:

<u>Bedroom size</u>	<u>Maximum # of Occupants</u>
1 Bedroom	2
2 Bedrooms	4

VII. ANIMAL POLICY and ANIMAL DEPOSITS

No animal, which may constitute a threat to a resident or the community, will be allowed. Only dogs, cats, birds or fish are allowed. Aquariums will be allowed with a 20-gallon maximum capacity. No more than two pets shall be permitted per apartment. Pet Deposit is \$300.00 per pet. All pets must meet the following requirements:

- A. Animals full grown must weigh no more than 25 lbs.
- B. All pets must be photographed at move-in and photograph to be attached to Animal Agreement.
- C. Pets must have vaccinations and be registered with the City.
- D. All pets must be on a leash when outside of the apartment.
- E. Breed restrictions apply to dogs. Unacceptable breeds may include, but are not limited to:

Boxer, Bull Terrier, Dingo, Giant Schnauzer, German Shepherds, Rottweiler, Pit/Bulls/American Staffordshire Terriers, Chow Chows, Presa Canarios, Akitas, Dobermans, Mastiffs, Huskies, Malamutes, Great Danes, Saint Bernard, Shar-Peis, Wolf-hybrids and other breeds of a vicious or aggressive nature or mixes of these breeds.

- F. Prohibited Animals/Reptiles, may include:

Tarantulas, Reptiles (snakes, iguana, etc.), Ferrets, Skunks, Squirrels, Rabbits, Raccoons, Rodents (rats, mice), Pot Belly pigs, other farm or exotic animals

The Resident understands that he will be assessed a lease violation penalty and may be asked to remove his pet from the premises if any of these rules are violated.

Specific animal, breed, number, weight restrictions, pet rules, and pet deposits will not apply to households having a qualified service/assistance animal(s).

VIII. WAITING LIST POLICY

Only fully executed TAA applications will be accepted and will be recorded by date. Applicants will be placed on a waiting list when the preferred unit is not available.

- A. The applicant's name will be placed on the established Waiting List. The applications will be entered based on the date the application is received. Qualified applicants are selected on a

first-come, first-served basis. Management will also indicate on the Waiting List the following about each applicant:

1. Eligible bedroom size based on occupancy standards.
2. Need for an accessible unit.
3. Applicants covered by the Violence Against Women Reauthorization Act (VAWA).
4. Program eligibility based on income. Will be reviewed again at move in for accuracy and/or designation change requirements.

B. Waiting List Notification:

It is the applicant's responsibility for reporting any changes such as address, family size and phone numbers. You are required to update your household information every three (3) months either by phone, email, or in writing to the rental office.

Your name will be removed from the list if you fail to contact management every three months.

C. Waiting List Preferences

Handicap Accessible Unit Preference:

Before offering a vacant accessible unit to a non-handicapped applicant, management will offer such units as follows:

- First, to a current resident of the property having a disability that requires the accessibility feature of the vacant unit. A resident requiring an accessible unit will be placed on a Transfer List until such time as an appropriate unit becomes available.
- Second, to an eligible qualified applicant on the waiting list having disabilities that require the accessibility features of the vacant unit.
- Third, to an eligible qualified applicant not having a need for an accessible unit. This person will be housed with the understanding, via a lease addendum, that should an applicant require the features of the accessible unit, this resident not requiring the accessible unit will move to the next available non-accessible unit.

Non-Handicapped Accessible Unit Preference:

Management will offer available non-handicapped units as follows:

- First, Applicants that fall under VAWA.
- Second, Current Residents.
- Third, all other waitlist applicants.

Additional Rent Restricted Units:

All applicants are pre-screened prior to adding to the waitlist. If the property has lower rent restricted units and one of those units become available, we will choose next household that qualifies based on their pre-screened income.

OPENING & CLOSING THE WAITING LIST

Once the waiting list has a maximum of 25 applicants, the acceptance of applications may be suspended. Notice of the suspension will be posted in the office where all Applicants can see. When the waiting list has five (5) applicants remaining, Management will reopen the waiting list to the public. Management will contact outreach agencies listed on the AFHMP when the Waiting List has reopened.

ASSIGNMENT OF APARTMENTS

An applicant will be offered an apartment of appropriate size and type. If more than one (1) such appropriate apartment is vacant and available, applicant may be given a choice. You will be notified when management will start processing your application for eligibility for an apartment. You will have three (3) days from the date of notification to schedule an appointment. If you do not respond to the application processing notification, management will notify you by letter that you have been removed from the waiting list. If the applicant rejects the vacancy offered, he/she shall be removed from the waiting list.

IX. UNIT TRANSFER POLICY

Residents must complete a Unit Transfer Request to be reviewed by management.

A. No in-house transfers will be allowed during a resident's initial lease term unless there is a medical reason for the transfer.

B. Families needing special consideration because of a disability or reasonable accommodations shall be accommodated before other families. Third-party verification from a Physician or licensed medical professional is required.

C. Residents may be eligible for a unit transfer if their income or family composition changes.

D. Resident in poor standing; balances owed, more than 3 lease violation(s), violation of unit conditions defined in the TAA lease paragraphs 19.2 and 25.2, will not be allowed a transfer.

E. The property restrictions require Households may transfer without having to re-qualify but must have Supervisor and Compliance approval. If a unit is not available, the resident will be placed and selected from the waitlist as described in the wait list procedures. Residents will not be given priority over applicants not residing at the property that are on the waitlist unless there is a medical reason for the transfer. Third-party verification from a Physician or licensed medical professional is required.

F. If a resident has requested a transfer, the resident shall be offered the apartment and must complete the transfer at their expense within ten (10) calendar days. All damage or cleaning charges must be paid prior to the transfer.

G. Same floorplan, same rent apartment transfers will not be allowed unless there is a medical reason for the transfer. Third-party verification from a Physician or licensed medical professional is required.

H. A resident who has indicated intention of vacating within a three-month period will not be transferred.

I. A new security deposit based upon unit size will be required to be paid prior to moving into the new unit. An inspection will be made after the resident has moved out of the old unit and any damages, delinquent rent, unreturned keys, gate or garage remotes, etc. will be deducted from the prior security deposit and a final account statement will be provided.

X. NON RENEWAL AND/OR TERMINATION

Non-Renewal Notices:

For all Programs a 30-Day Written Notice will be delivered by posting the notice on the back of the front door of the unit or by hand to an occupant 16 years or older.

Termination Notices:

For HTC, BOND, HTC, TCAP, and Exchange Developments:

- A 3-Day Written Notice to Vacate will be delivered by posting the notice on the back of the front door of the unit or by hand to an occupant 16 years or older.

For HOME and NSP Developments:

- A 30-Day Written Notice to Vacate will be delivered by posting the notice on the back of the front door of the unit or by hand to an occupant 16 years or older.

XI. GRIEVANCE PROCEDURES

Every resident or applicant of this apartment community has the right to utilize the following Resident Grievance Procedures. Any grievance of a resident or applicant either against another resident or against the Landlord or the Landlord's agents (staff members) may be presented either orally or in writing to the Community Manager for forwarding to the Regional Property Manager. The resident or applicant also has the right to submit the grievance directly to the corporate office or to the Harris County Community Services Department. The resident or applicant may also submit the grievance directly to the Regional Property Manager should the resident desire to discuss a grievance *against* the Community Manager.

Definitions applicable to the grievance procedure:

- A. Grievance: Any dispute a Tenant or Applicant may have with respect to FDI Management Group's action or failure to act in accordance as it pertains to the lease or Application submitted, or regulations that adversely affects the individual Tenant's rights, duties, welfare or status.
- B. Complainant: Any Tenant or Applicant (as defined below) whose grievance is presented to FDI Management Group in accordance with the requirements presented in this procedure.
- C. Elements of due process: An eviction action or a termination of tenancy in a State or local court in which the following procedural safeguards are required: (1) Adequate notice to the Tenant of the grounds for terminating the tenancy and for eviction; (2) Right of the Tenant to be represented by counsel; (3) Opportunity for the Tenant to refute the evidence presented by Management; (4) A decision on the merits of the case.
- D. Tenant: The adult person (or persons other than a Live-in aide): (1) Who resides in the unit, and who executed the lease as lessee of the dwelling unit, or, if no such person now resides in the unit, (2) Who resides in the unit, and who is the remaining head of the household of the Tenant family residing in the dwelling unit.
- E. Applicant: The adult person (or persons other than a Live-in aide) that is in the process of, or has completed, submitting an application for residency.

In accordance with the applicable Federal regulations this grievance procedure shall be applicable to all individual grievances between Tenants or Applicants and FDI Management Group with the following exceptions:

- 1) Any household in which any member was evicted in the last three years from federally assisted housing for drug-related criminal activity
- 2) A household in which any member is currently engaged in illegal use of drugs or for which the owner/agent has reasonable cause to believe that a member's illegal use or pattern of illegal use of a drug may interfere with the health, safety, and right to peaceful enjoyment of the property by other residents
- 3) Any household member who is subject to any state lifetime sex offender registration requirement
- 4) Any household member if there is reasonable cause to believe that member's behavior, from abuse or pattern of abuse of alcohol, may interfere with the health, safety, and right to peaceful enjoyment by other residents. The screening standards must be based on behavior, not the condition of alcoholism or alcohol abuse

Any grievance must be personally presented, either orally or in writing, to one of the contacts listed at the end of this document within ten days after the event. As soon as the grievance is received, it will be reviewed to be certain that neither of the exclusions listed above applies to the grievance. Should one of the exclusions apply, the complainant will be notified in writing that the matter raised is not subject to grievance procedure.

If none of the exclusions apply, the complainant will be contacted to arrange a mutually convenient time within ten (10) working days to meet so the grievance may be discussed. The complainant will present the grievance and the person in charge will attempt to settle the grievance to the satisfaction of both parties.

If the resident or applicant feels that the grievance cannot be resolved, then the grievance will be referred to either the Regional Manager or the Section 504 Coordinator within 5 business days. The Regional

Manager or Section 504 Coordinator will, within 10 business days, either meet with the resident or applicant in person, or discuss the issue over the phone, in an attempt to reach a mutually satisfactory resolution to the grievance and to see if any extenuating circumstances would apply to the final decision.

Within five working days following each discussion, FDI Management Group, shall prepare and either hand deliver or mail to the complainant a summary of the discussion that must specify the names of the participants, the dates of meeting, the nature of the proposed disposition of the complaint and the outcome of either approval or denial. A receipt signed by the complainant or a return receipt for delivery of certified mail, whether or not signed, will be sufficient proof of time of delivery for the summary of the discussion.

Rejected applicants may request a meeting to discuss/appeal the denial. The owner/agent will grant a reasonable accommodation, if there is the presence of a disability, to allow the applicant to participate in the appeal. Common reasons to appeal denial include, but are not limited to:

- If you believe the decision has been made in error
- If you believe there are extenuating circumstances that should be considered
- If you are a victim of abuse covered by the Violence Against Women Act and you feel your status as a victim contributes to the decision to deny (Section 8 and 202/8 programs only)
- If you are a person with a disability, and believe a reasonable accommodation would allow us to continue processing your application

If an applicant is clearly eligible and passes the screening guidelines, admission shall be authorized. Likewise, if the applicant is not eligible, or does not meet the screening requirements, rejection shall be authorized. The owner/agent will advise the applicant, in writing, of the final decision within five (5) business days of the meeting.

FDI Management Group Contact Information

**Regional Property Manager
Michelle Farmer
26303 Oak Ridge Dr
Spring, TX 77380
PH 281-367-5222 TDD/TTY 711 or (1-800-735-2989)**

**Harris County Community Services Department:
Grievance Officer in the Care of Housing Resource Center
Linda Hudson
8410 Lantern Point Drive
Houston, TX 77054
PH 832-927-4700**

XII. OTHER POLICIES

For Housing Tax Credit units:

No household can consist of all full-time students unless the household meets one of the following exemptions:

1. At least one student receives assistance under title IV of the Social Security Act
2. At least one student participates in a program receiving assistance under the Job Training Partnership Act (JTPA), Workforce Investment Act or under other similar federal, state or local laws.
3. At least one student is a single parent with child(ren) *and* this parent is not a dependent of another individual *and* the child(ren) is/are not dependent(s) of someone other than a parent.
4. Students are married and file (or entitled to file) a joint federal tax return.
5. At least one student was previously under the care and placement responsibility of the state agency responsible for administering foster care.

For HOME/NSP units:

Any adult household member that is either a part time or full time student must meet one of the following exemptions:

1. Be at least 24 years old by December 31 of the award year for which aid is sought
 2. Have legal dependents other than spouse (child or elderly parent)
 3. Married
 4. Be a veteran of the U.S. Armed Forces
 5. Be a graduate or professional student
 6. Be an orphan or a ward of the court through the age of 18
- A non-refundable application fee of \$15 for each applicant 18 years or older is required. The monies must be paid with a cashier's check, no personal checks or money orders will be accepted.
 - Security Deposits vary by floor plan. All security deposits will be paid in full with a cashier's check at time of move-in, no personal checks or money orders will be accepted. Deposits are refundable upon move out and charges may apply in accordance with the Lease.

1 Bedroom	\$150.00
2 Bedroom	\$250.00

- Smoking Policy – We are a non-smoking community.

Annual Recertifications Certifications- All households participating in the CDBG-DR/HOME program must complete annual recertifications within one-hundred twenty (120) days of the anniversary date of their initial certification. At this time, if any household that initially income qualified for a CDBG-DR/HOME assisted unit whose income now exceeds the income limit will become subject to a possible rental rate increase (as the lease permits) according to the next available unit rule set forth by the Program. In addition to annual income certifications, all CDBG-DR/HOME units must complete an annual Housing Quality Standards (HQS) inspection.

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XII. 12 Point Qualifying Rental Criteria:

Seaside Lodge

Name: _____

Apartment #: _____

**12 Point Criteria Effective 11/1/21
QUALIFYING RENTAL CRITERIA & OCCUPANCY STANDARDS**

FDI Management Group supports the Fair Housing Act, as amended, prohibiting discrimination in housing based on race, color, religion, national origin, handicap, or familial status. The following qualification standards will be required from every prospective resident.

RENT WISE	Excludes student loans, tax liens or medical	POINT VALUE	POINTS EARNED	
			HH1	HH2
HH Member #1	559+	4		
HH Member #2	472-557	4		
	381-471	3		
	234-380	2		
	558- Thin File, No credit or Tradelines	1		
	Below 233	0		

JOB STABILITY	(consecutive)	POINT VALUE	POINTS EARNED	
	4 to 5 years	4		
	2 to 3 years	3		
	1 to 2 years	2		
	6 months to 1 year	1		
	Social Security, SSI, or Other Retirement Funds	4		
	1 to 6 months, or no current job.	0		

RENTAL HISTORY	(consecutive)	POINT VALUE	POINTS EARNED	
	4 years and more	5		
	3 years	4		
	13 months to 2 years	3		
	6 months to 12 months	2		
	First time renter	0		
	Rental History-lease violations, eviction/judgment/move-out owing money.	Reject		
	Mortgage-must be verifiable via credit report or written documentation.	5		

RENT/EARNINGS RATIO		POINT VALUE	POINTS EARNED	
	Gross monthly income must be at least 2.0 times the resident's rental portion.	6		
	Less than 2.0 times.	0		
		TOTAL		

ROOMMATES - must qualify individually in all areas except income. Each roommate must qualify for his or her percentage of the rent amount unless it is agreed within the lease that one or more roommates will guarantee the lease.

Applicant's gross yearly income must not exceed the following:

HOME Income/Rent Limits for this property are: 07-01-21				
Household Size	1	2	3	4
30% (LLH)	\$16,650	\$19,000	\$21,400	\$23,750
50% (LH)	\$27,750	\$31,700	\$35,650	\$39,600
60% (HH)	\$33,300	\$38,040	\$42,780	\$47,520
80% (HTC)	\$44,400	\$50,720	\$57,040	\$63,360

Maximum Rent Limits		
Unit Size	1	2
30% (LLH)	\$351	424
50% (LH)	\$649	\$780
60% (HH)	\$852	\$1026
80% (HTC)	\$1,095	\$1,315

APPROVAL CRITERIA	
12 + Points	ACCEPTED - Does not guarantee approval, must pass rental criteria.
10 to 11 points	Will Require Supervisor Approval, Additional Deposit Does Not Guarantee Approval.
9 points or below	DENIED

I have read and understand the Resident Selection Policy and Qualifying Rental Criteria.

Resident Signature

Date

Resident Signature

Date

Staff Signature

Date

Supervisor Signature

Date