Housing Authority of Okanogan County

MEADOWLARK SENIOR HOUSING RENTAL APPLICATION

An affordable housing community for adults 62 and older

Meadowlark Senior Housing is a 16-unit affordable housing community in Omak, Washington for adults aged 62 and older (every member of the household must be62 years or older to be a resident). The one and two-bedroom units do not have rental assistance; however, the rents are very affordable. Section 8 vouchers are welcome. Residency is restricted to those who earn 50% or less than the Area Median Income (AMI) for Okanogan County.

You must COMPLETE ALL SECTIONS of this pre-application before submitting. All information provided will be kept confidential. If any section is not completed, the pre-application will not be accepted.

TENANT SELECTION CRITERIA

All pre-applications will be considered in the order of date and time they are received at the office of the Housing Authority of Okanogan County. Selection of units will be given on a first come, first serve basis.

When a unit becomes available the first two (2) on the projects waiting list will be sent the project's tenancy and release of information documents and asked to provide recent picture ID, Social Security cards, birth certificates for all household members, income and asset information with a certain deadline.

Applicants will be screened for **employment/income verification**, **criminal background check** (including drug-related criminal activity), **credit check**, **and a landlord history screening**. If you become a tenant of the Housing Authority, this pre-application will become part of your permanent file.

We reserve the right to reject any application that does not meet our requirements. The submission of any false information on the application will be cause for rejection of the application, or if discovered later, eviction from the property.



MEADOWLARK SENIOR HOUSING RENTAL APPLICATION

PROPERTY INFORMATION	Owned and manage	ed by the Housing A	utho	rity of (Okano	gan Coun	ty	
Property Address: <u>624 North Pine, Omak, WA 98841</u>								
Monthly Rent: <u>TDB</u>	Security Deposit: Equal to rent Desired Move-In Date:							
How did you hear about this property?								
Ideally, how long do you plan to stay in your next home?								
What made you want to ap	oply to this property?)						
APPLICANT INFORMATION	l							
Name (First Middle Last):								
Date of Birth:	SSN:		[Driver L	icense	e #:		
Email:	Mobile Phone:		(Other P	hone:			
List all other persons who	will occupy the Prop	erty:						
Name:		Relationship:					Age:	
Name:		Relationship:					Age:	
Name:		Relationship:					Age:	
Name:		Relationship:					Age:	
RENTAL HISTORY 2 years	residency may be red	quired						
Current Address:						Apt #:		
City:	State:		Zip:	:				
Landlord's Name:								
Phone:	Email:		Ren	nt \$:				
Move-In Date:	Move-Out Date	2:						
Reason for move:								
Previous Address:						Apt #:		
City:	State:		Zip:	:				
Landlord's Name:								
Phone:	Email:		Ren	nt \$:				
Move-In Date:								
Reason for move:								
EMPLOYMENT INFORMAT	ION If no employme	ent, enter source(s)	of ir	ncome				
Current Employer:								
Address (street, city, state,	zip):							
Supervisor's Name:		Phone:			Email:			
Start Date:	Gross Monthly Incor	ne: \$	Ρ	osition	:			
Previous Employer:								
Address (street, city, state,	zip):							
Supervisor's Name:		Phone:			Email:			
Start Date:	Gross Monthly Incor	ne: \$	Ρ	osition	:			

Describe any other income Applicant wants considered:										
EMERGEN	CY CONTACT		-							
Name:			Phone:				Email:			
Address:										
VEHICLE IN	IFORMATION 2 veh	nicles n	nax per hou	isehol	d					
Year:	Make/Model:			License/State:				Color:		
Year:	ear: Make/Model: Lice			Licens	se/Stat	e:		Color:		
SERVICE A	NIMAL INFO	Pets	s are NOT a	llowe	d					
Type/Bree	ed:		Weight:		Age:			Gender:		
Neutered	?	Nam	ne:				Shots Current?			
Type/Bree	ed:	-1	Weight:				Age:	Gender:		
Neutered	?	Nam	ne:				Shots Current?			
OTHER IN	FORMATION									
					Yes	No	Explanation:			
Does anyo	one who will occupy	the Pro	operty smol	ke?			Smoking in the unit is NOT allowed			
Will Applie	cant maintain renter	's insu	rance?				Not required but	highly advised		
Are all members of the household 62 and older?										
Has Applicant ever:				1						
Been evicted?										
Been asked to move out by a landlord?										
Breached a lease or rental agreement?										
Filed for bankruptcy?										
Been convicted of sales, distribution, possesion of drugs?			ugs?							
Had any credit problems, slow-pays, or delinquencies?										
Been convicted of a crime?										
Is any applicant a registered sex offender?										
Are there any criminal matters pending against an applicant?										
Is there ac considere	dditional informatior d?	n Applie	cant wants							

AUTHORIZATION

Applicant authorizes Landlord and Landlord's agent, at any time before, during, or after any tenancy, to:

(1) obtain a copy of Applicant's credit report, verification of income assets and housing references;

(2) obtain a criminal background check related to Applicant and any occupant; and

(3) verify any rental or employment history or verify any other information related to this application with persons knowledgeable of such information.

Notice of Landlord's Right to Continue to Show the Property: Unless Landlord and Applicant enter into a separate written agreement otherwise, the Property remains on the market until a lease is signed by all parties and Landlord may continue to show the Property to other prospective tenants and accept another offer.

Acknowledgement & Representation:

(1) Signing this application indicates that Applicant has had the opportunity to review Landlord's tenant selection criteria, which is shown on the applicant information sheet. The tenant selection criteria may include factors such as criminal history, credit history, current income, positive identification and rental.

(2) Applicant understands that providing inaccurate or incomplete information is grounds for rejection of this application and forfeiture of any application fee and may be grounds to declare Applicant in breach of any lease the Applicant may sign.

(3) Applicant represents that the statements in this application are true and complete.

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Δn	nlica	nt's	Signa	ature:
/ \P	p		0.0.0	

Date:

ADDITIONAL INFORMATION

CURRENT HOUSEHOLD INFORMATION

List <u>all household members</u>, other than yourself, who will be living in the unit with you.

Use the following numbers under the race category:

1 White2 Black/African American3 American Indian/Alaska Native4 Asian5 Native Hawaiian/Other Pacific Islander.

The race and ethnicity information will not affect your status on the waiting list in any way, but it is a federal requirement for reporting purposes.

If you are the only person in your household, this table should remain blank.

First Name	Last Name	Relationship to Head of Household	US Citizen Y or N	Date Of Birth	Gender	SS #	Race

INCOME

What is the current ANNUAL gross income for ALL household members from ALL sources? \$_____

What is the source of this income?	
Name & address of Employer	
What is your current MONTHLY rent payment? \$	
What is your total MONTHLY utility payments: \$ (do not include phone, cable or inte	rnet)?
ASSETS Do you have a checking account? Yes No A savings account? Yes No	
Any other assets (such as CD's, annuity, rental income from real estate)YesNo	

RELEASE STATEMENT: I/we understand that my/our eligibility for housing is based on income limits and other applicable selection criteria. I/we understand I/we must report any changes in the above information to the Housing Authority in writing as soon as any changes happens.

I/we understand that I/we will be required to successfully complete a criminal background check, a credit history check and verification of income, assets and housing references. I/we certify that all information in this pre-application is true to the best of my/our knowledge and I/we understand that false statements or information are punishable by law and will lead to cancellation of the application or termination of tenancy after occupation. All applicants must be 62 kWstand must sign the application.

Applicant signature (62 and older or over)	Date