

## QUALIFICATION CRITERIA:

*Approval is dependent upon rental history, credit history, background check, employment history, and income.*

<b>Rental History:</b>	<b><u>No extreme negative and adverse rental history, e.g., no unpaid rental/utility balance, documented complaints and/or damages.</u></b>
<b>Credit History:</b>	<b><u>A satisfactory rating on credit report. No credit may be considered good credit.</u></b>
<b>Employment:</b>	<b><u>Verifiable employment and/or guaranteed source of income for 12 months.</u></b>
<b>Income:</b>	<b><u>Must meet minimum income requirements.</u></b> <i>Verifiable and/or guaranteed source of income for 12 months.</i>
<b>Social Security:</b>	<b><u>Applicant must have a valid, verifiable social security number and/or valid visa, alien registration receipt card, temporary resident card, employment authorization card number of other identification verifying eligibility to reside in the United States.</u></b> <i>Falsification of any of these numbers will result in denial.</i>
<b>Background Check:</b>	<b><u>A national background check will be assessed.</u></b>
<b>Rental Counseling:</b>	<b><u>Applicant must attend rental counseling prior to move in.</u></b>

### **Please return the following information with your rental application:**

- Rental application and a **non-refundable** application fee of \$50.00 in the form of Money Order or Check **only**.
- Valid driver's license, state issued ID, or Military ID for everyone over the age of 18 years.
- Social Security cards and Birth Certificates for all members of the household.
- Proof of income for the last 2 months for everyone in the household over the age of 18, or you **must** have your employer complete the Employment Verification form.
  - Individuals who are over the age of 18 and are without income must complete a Zero Income Affidavit.
- 2 recent bank statements for all members in the household over the age of 18.

**\*\*All items listed above need to be returned at the same time in order to process your application. Partial applications **WILL NOT** be accepted!!!!**

**\*\*Please allow at least 14 days for your application to be processed.**

**\*\*Attention\*\* we are **NOT** income based housing.**

**\*\*DCA /Section 8 Vouchers are accepted**

**City of Albany**  
**Department of Community & Economic Development**  
**Rental Application**

For Office Use Only	
Street Add. Unit #	
Street Add. Unit #	

Jefferson Place  Windsor Arms  Broadway Court  Villas at Broadway  Other

**Applicant Information**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ # of Bedrooms Preferred: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Drivers License#: \_\_\_\_\_ State: \_\_\_\_\_

**Household Composition** *(List all members in household including minors)*

Family Member	Age	Social Security #	Relationship	Student	Elderly/Disabled
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Rental History**

Current Address \_\_\_\_\_  
Street City State Zip  
 How Long: From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Rent Paid: \_\_\_\_\_  
 Owner/Manager: \_\_\_\_\_ Tel: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Previous Address \_\_\_\_\_  
Street City State Zip  
 How Long: From (Month/Year): \_\_\_\_\_ To: \_\_\_\_\_ Rent Paid: \_\_\_\_\_  
 Owner/Manager: \_\_\_\_\_ Tel: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**Current Employment**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_  
 Name of Supervisor: \_\_\_\_\_ Dates of Employment-From: \_\_\_\_\_ To: \_\_\_\_\_

**Other Income Information** *(List all other household income)*



**Additional Information**

- 1. Have you ever been evicted for non-payment of rent or for any other reason?  Yes  No
- 2. Have you ever been convicted of a felony?  Yes  No
- 3. Do you currently receive a Section 8 Housing Voucher or other rental assistance?  Yes  No  
If so, please list \_\_\_\_\_
- 4. Do you currently pay for child care?  Yes  No

**Asset Information** (List all assets. Please note that assets do not disqualify you from living at our community)

Asset Type	Do you own	\$ Amount Or Value	Asset Type	Do you own	\$ Amount Or Value
Checking	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	IRA	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Saving	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	401k	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Cash	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	Other retirement	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
CD	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	Stocks or Bonds	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Life insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	Trust Fund	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Investment Property	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	Other investments	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

**Emergency Contact**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Street City/State

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Vehicles**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License # \_\_\_\_\_ State: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ License # \_\_\_\_\_ State: \_\_\_\_\_

**WARNING: This affordable housing is funded by U.S. Dept of Housing & Urban Development, CDBG and HOME Programs. Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.**

I/We certify that the information presented on this form is true and complete to the best of my/our knowledge and belief. I/We understand that this certification is part of the application process and does not guarantee occupancy.

I/We hereby acknowledge a **NON-REFUNDABLE APPLICATION FEE OF \$50.00** to be used in the processing of the application.

\_\_\_\_\_  
Signature (Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Co-Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Staff)

\_\_\_\_\_  
Date

