



Eleanor Apartments Application Checklist

1510 N. Forest St.
Bellingham, Wa 98225

Leasing Office: 360-312-7280

E mail: Eleanor@MercyHousing.org

Please bring the following documents with your application.

- Missing items will result in failure to hold an apartment.
- Incomplete applications will result in delays and could disqualify your application.
- Applications should be completed in BLUE INK.

\$35.00 Money Order or Bank Certified Check PER ADULT for Credit/Criminal Screening
Money Order or Bank Certified Check equivalent to first month's rent.

Current Original Picture ID – **ALL** Occupants 18 years old or older
Original Social Security Card – **ALL** Occupants

Proof of Income – **MOST CURRENT Pay Stubs (4)**

*See Below for Additional Income Types

3 Years of Rental History (Name, Address, and Phone Number for each previous rental)
Name, Address, and Phone Number for all banks with which you hold an account*
(**ONLY** if Household **COMBINED** Assets are **\$52,787.00** or above.)

****ADDITIONAL INCOME TYPES:*** *If you receive income from any of the sources listed below, bring the Name, Address, and Phone Number of the agency and any other underlined documents from the list below.*

- △ **Social Security Benefits:** Copy of CURRENT Award Letter (Dated within 90 Days)
- △ **Child Support and/or Alimony:** Copy of Court Order (IF Applicable)
- △ **Disability or Death Benefits:** Copy of Letter of Determination or Award
- △ **Unemployment Benefits:** ONE of the following forms – Form 2000, Form UC-30, Letter of Determination, Most Recent Check Stub
- △ **VA Benefits or GI Bill:** Benefit Letter www.va.gov
- △ **Worker's Compensation Benefits:** Form DOL-203
- △ **Certificate of Deposit:** Copy of Deposit Certificate
- △ **Payments from Trusts or Inheritance:** Record of Latest Payment
- △ **Retirement Funds, Pensions, or Annuities:** Latest Check Stub
- △ **Payments from Real Estate:** IRS Schedule E and/or a copy of Mortgage Note



APPLICATION FOR OCCUPANCY

Site Name: _____
Leasing Office Address: _____
☐ Mark if Temporary
Leasing Office Ph#: _____
Leasing Office Fax#: _____
Leasing Office Email: _____

For Office Use Only		
Date Rcvd:	_____	
Time Rcvd:	_____	
Rcvd by:	_____	
☐ Original	☐ Updated	☐ Add-on
If updated, use original date and time stamps.		
HoH Name: _____		
Use to link multiple apps due to addt'l adults		

COMPLETED FORMS CAN BE SUBMITTED VIA FAX OR DROPPED OFF DURING BUSINESS HOURS:

This document is used to provided to households who are applying for an available unit. Each adult household member must complete their own application.

☐ Please note- if this box is checked, then the community is non-smoking.

ADDITIONAL PROTECTION FOR INDIVIDUALS WITH LIMITED ENGLISH PROFICIENCY

Executive Order 13166 requires all recipients of federal funds to take reasonable steps to ensure that persons with limited English proficiency (LEP persons) have meaningful access to federal programs and activities. In response to this executive order, this community has created a Language Access Plan which details the steps taken to ensure meaningful access including but not limited to providing for oral translation services for applicants who need language assistance. Copies of the Language Access Plan are available for review in our leasing office.

Please complete one application per adult household member.

Basic Details about yourself:

1. Legal/Birth Name of this Applicant: _____
2. Preferred Name (if different): _____
3. Phone #(s): _____
4. Email Address(es): _____
5. How many people will reside in the unit? _____
6. What unit size are you requesting?
7. We ask questions about marketing, so we know the best way to advertise to people. How did you find our apartment community? ☐ Newspaper Ad; ☐ Drove by; ☐ Resident Referral;
☐ Website; _____ ☐ Other; _____
- ☐ Yes ☐ No 8. Does your household have animals/pets?
a. If yes, what kind of pets?
☐ Cat(s), How many _____; ☐ Dog(s), How many _____;
☐ Other, # of _____ and Type of _____
- ☐ Yes ☐ No 9. Will this apartment be your sole place of residency?
- ☐ Yes ☐ No 10. Have you been involuntarily displaced by Government Action or a Presidentially Declared Disaster?

Mercy Housing Management Group is an equal opportunity housing provider abiding by the Federal Fair Housing Ordinance. We do not discriminate based on race, color, religion, creed, national origin, sex, age, familial status, AIDS/HIV status, ancestry, gender identity, height, weight, pregnancy status, source of income, sexual orientation or disability. This institution is an equal opportunity provider.

APPLICATION FOR OCCUPANCY

- ☐ Yes ☐ No 11. Are you a U.S. Veteran and/or in Active Duty? (Optional)
 a. If yes, can you tell us which branch? (Optional) _____
- ☐ Yes ☐ No 12. Do you have an existing Section 8 voucher?

GENERAL DISCLOSURES:

The information you provide on this application will be treated as confidential. This application gives no lease or rental rights. It includes both information necessary for determining your eligibility for housing and information required for statistical purposes. If you and your household appear to be eligible, you will need to submit additional information to complete the processing of this application. All information you provide will be verified by Mercy Housing Management Group. Incomplete and/or falsified information will cause the application to be denied and not processed.

Discrimination Prohibited: The landlord will not discriminate based upon race, color, religion, creed, national origin, sex, age, familial status, or disability. In addition, our housing programs are open to all eligible persons regardless of sexual orientation, gender identity, marital status, and ancestry. Owners shall accommodate persons with disabilities who, as a result of their disabilities, cannot utilize the owner's preferred application process by providing alternative methods of taking applications.

Any general information included as part of an individual household member's records will be made accessible between departments. Other information not routinely in a household's records may be shared between professional staff on a need-to-know basis at the discretion of the department or site head staff person. Information, which involves criminal acts, including use of physical force, offenses against other persons, child abuse and neglect, etc., will be automatically reported to appropriate authorities as required by law.

13. Household Composition: Tell us a little bit about the people who will live with you - include yourself as the first household member. Add more pages if you need to list more people

HHMBR Name	Relationship to you	Gender*	Married? (Y/N)	Birthdate	Student? (Y/N)	**Social Security #
	MYSELF					
Total number of people:						

*You may decline to provide your gender information

**Not Required: Information from applicants who do not contend eligible immigration status, who were age 62 or older as of January 31, 2010, and who do not have a SSN, if they were receiving HUD rental assistance at another location on January 31, 2010.



APPLICATION FOR OCCUPANCY

14. Please use the table below to record the names of any minors for which you are the parent or for whom you have guardianship, that will reside in the home. Add more pages if you need to list more people:

Name of Child or Minor	Relationship to you	Will both parents reside in the unit? (Y or N*)	Do you have 50% or more custody? (Y or N)	Birthdate

*If only one parent will reside in the home, a child support affidavit will be required. If you have guardianship instead, we may request additional documentation.

- ☐ Yes ☐ No 15. Do you anticipate a change in household composition (i.e., addition of adult household member, household member moving out, birth or adoption of child, etc.) in the next 12 mths?

a. If yes, please explain:

Employment Status: Please provide details on your employment. Add more pages if you need to list more employers

- ☐ Yes ☐ No 16. Are you employed?

☐ N/A 17. If unemployed within last year, enter last day worked: _____

a. ☐ Yes ☐ No If unemployed, have you received employment income in the past 12 mths?

b. If yes, from what source(s)? _____

c. If unemployed, why? (IDAHO only) _____

Questions	Job 1	Job 2	Job 3
18. If you are currently employed, where?			
19. What is your occupation, or type of work?			
20. What was your start date?			
21. How much are you paid?	\$	\$	\$
22. Are you paid per (circle one):	Hrly/ Wkly/ Mnthly Yrly / Other_____	Hrly/ Wkly/ Mnthly Yrly / Other_____	Hrly/ Wkly/ Mnthly Yrly / Other_____
23. How many hours do you work per week?			
24. Do you receive tips?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
a. If yes to tips, approx. how much do you receive per week (cash and credit)?	\$	\$	\$
25. Have you worked sporadically or seasonally?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
26. Name of Manager:			
27. Phone # or email of Manager:			

APPLICATION FOR OCCUPANCY

Address: The Resident Selection Criteria or Tenant Selection Plan for this property will outline the provisions that will be evaluated to determine prior history as a tenant. Tell us about where you have been living. Add more pages if you need to list more residences.

Questions	Current Residence	Previous Residence
28. Address of residence:		☐ Mark if previous
29. Dates of Occupancy (mm/yy - mm/yy):		
30. Do you:	☐ Own ☐ Rent ☐ No Cost	☐ Own ☐ Rent ☐ No Cost
31. If you rent, name of Landlord or Apt building:		
32. If you rent, Ph# or Email of Provider/Landlord:		
33. If you rent, what is the rent amount?		
34. Where you evicted or is eviction pending?	☐ Yes ☐ No ☐ N/A	☐ Yes ☐ No ☐ N/A
a. If so, why?	☐ N/A	☐ N/A

35. Below, please provide a complete list of all states in which you or any other household member has resided. You:

Other HHMBRs:

Background: The Resident Selection Criteria or Tenant Selection Plan for this property will outline the background provisions that will be evaluated.

- ☐ Yes ☐ No 36. Have you ever been convicted of a felony or do you have a criminal history?
 a. If yes, please explain:

- ☐ Yes ☐ No 37. Are you or anyone in your household subject lifetime registration requirement under a State Sex Offender Registration Program?
- ☐ Yes ☐ No 38. Have you been evicted in the last three years from federally-assisted housing for drug related criminal activity?
- ☐ Yes ☐ No 39. Has your tenancy or government assistance in a subsidized housing program ever been terminated for fraud, non-payment of rent, or failure to comply with recertification procedures?
- ☐ Yes ☐ No 40. Do you currently engage in the illegal use of drugs or your/their behavior from this illegal use interferes with the health, safety, and right to peaceful enjoyment of the property by other residents?
- ☐ Yes ☐ No 41. Has your behavior, from abuse or pattern of abuse of alcohol, interfered with the health, safety, and right to peaceful enjoyment by other residents?

VOLUNTARY Reasonable Accommodation Requests: We are committed to ensuring that our residents and applicants have equal access to use and enjoy your apartment and related facilities. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way.

APPLICATION FOR OCCUPANCY

☐ Yes ☐ No 42. Would you or a household member like to request a disability related special accommodation or would you or a household member need accessible features in your unit?

a. If yes, what accommodations do you need, or would you like us to make?

☐ Service/Assistance Animal ☐ Live in Aide ☐ Part time/overnight caregiver ☐ Parking space
☐ ADA Unit ☐ Grab Bars ☐ Other:

b. If you are requesting a live in aide, please provide the name of the person who will serve as the live in aide:

43. **VOLUNTARY Emergency Contact Information:** You may update, remove, or change the information you provide on this form at any time. Management will remind you to update this form annually at your recertification. You are encouraged to list at least one emergency contact but you may add additional pages for additional contacts.

Emergency Contact - Permission to Enter Unit: ☐ Yes ☐ No

Name: _____	Relationship to Household: _____
Contact Address: _____	City, State, Zip: _____
Cell Phone #: _____	Home Phone #: _____
Work Phone #: _____	Email Address: _____

Please contact this person for the following issues:

☐ Medical Emergencies ☐ Unable to contact household members

ADDITIONAL DOCUMENTATION PROVIDED TO APPLICANT HOUSEHOLD:

☐ Resident Selection Criteria/ RSC/TSP Addendum ☐ Notice of Occupancy Rights Under VAWA ☐ Notice of Reasonable Accommodation Modification ☐ Tenant Eligibility Certification- Questionnaire (for all move ins, adult add-ons, transfers or ARs)	☐ Demographics Collection Forms (as applicable) ☐ Pricing Sheet/Welcome Letter ☐ Grievance Policy
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DISCLOSURES AND CERTIFICATION

Any general information included as part of an individual household member's records will be made accessible between departments. Other information not routinely in a household's records may be shared between professional staff on a need-to-know basis at the discretion of the department or site head staff person. Information, which involves criminal acts, including use of physical force, offenses against other persons, child abuse and neglect, etc., will be automatically reported to appropriate authorities as required by law. I/We am/are applying for housing and state that all information provided herein is true, accurate, and complete to the best of my knowledge and belief. Application includes pages 1 through 6

APPLICATION FOR OCCUPANCY

of this application. The information obtained will be used for management purposes only and will be held in confidence.

APPLICATION ACKNOWLEDGMENT:

Any changes to your income, assets, household composition or student status from the date you signed your application up to the execution of your final documents, must be reported to Mercy Housing Management. **Failure to do so could result in the denial of your tenancy.** If after final documents are executed we discover that changes were not reported, Mercy Housing Management may be required to take steps that could result in eviction.

I am applying for housing and state that all information provided herein is true, accurate, and complete to the best of my knowledge and belief.

Applicant/Resident Head of Household Signature

Applicant/Resident HoH Printed Name

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 and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use 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 willingly 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 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. 408 (a) (6), (7) and (8)**. 6/29/2007

APPLICATION CLARIFICATION NOTES: This section is to be used only to clarify items listed on the application itself.

NOTICE OF RIGHT TO REASONABLE ACCOMMODATION/MODIFICATION

If you have a disability and as a result of your disability you need . . .

- a change in the rules or policies or how we do things that would give you an equal opportunity to use and enjoy the housing and facilities at this housing development or take part in programs on site,
- a change or repair in your apartment or a special type of apartment that would give you an equal opportunity to use and enjoy the housing and facilities at this housing development or take part in programs on site,
- a change or repair to some other part of the housing site that would give you an equal opportunity to use and enjoy the housing and facilities at this housing development or take part in programs on site.

If you can show that you have a disability and if your request is reasonable (***does not pose “an undue financial or administrative burden”**), we will try to make the changes you request.

We will give you an answer in 10 working days unless there is a need for verification of the request. In that case, the response time is 15 working days unless there is a problem getting the information we need or unless you agree to a longer time. We will let you know if we need more information or verification from you or if we would like to talk to you about other ways to meet your needs.

If we turn down your request, we will explain the reasons and you can give us more information if you think that will help.

If you need help filling out a REASONABLE ACCOMMODATION/MODIFICATION REQUEST FORM or if you want to give us your request in some other way, we will help you.

You can get a REASONABLE ACCOMMODATION/MODIFICATION REQUEST FORM at the Property office or by emailing:

504 Coordinator
Mercy Housing Management Group, Inc.
504adacoordinator@mercyhousing.org
Fax: 877-245-7121
303-830-3300
TTY: 1-800-877-8973 or 711

NOTE: All information you provide will be kept confidential and be used only to help you have an equal opportunity to use and enjoy your housing and the common areas.

**** This legal phrase means if it is not too expensive and too difficult to arrange.***



ELEANOR APARTMENTS
RESIDENT SELECTION CRITERIA
Tax Credit & HOME - Senior Housing

LIMITED ENGLISH PROFICIENCY (LEP)

Reasonable steps will be taken to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in our services, activities, programs and other benefits. We ensure meaningful communication with LEP applicants and residents and their authorized representatives. Interpreters, translators and other aids needed to comply with this policy shall be provided free of charge to the person being served, and residents and their families will be informed of the availability of such assistance. Language assistance will be provided through use of a contracted telephonic interpretation service, competent bilingual staff, staff interpreters, or formal arrangements with local organizations providing interpretation or translation services or technology.

INTRODUCTION: Eleanor Apartments is an eighty (80) unit affordable community for Seniors that are sixty-two (62) years of age or older. All residents of Eleanor Apartments are required to be sixty-two (62) years of age or older. Eighty (80) units follow the IRS Tax Credit/Section 42 program, and eleven (11) units also follow the HOME program. All units are subject to household income limitations.

Sixteen (16) units are set-aside for persons who are at least sixty-two (62) years of age with disabilities.

Eight (8) units are set-aside for formerly homeless persons sixty-two (62) years of age or older, and applicants will be referred from the Opportunity Council.

I. PREFERENCES – Preferences are not permitted if they in any way negate affirmative marketing efforts or fair housing obligations. The following preferences apply:

A. Existing Tenant Preferences – The following actions are always given priority for current households, if applicable.

1. A unit transfer due to domestic violence, dating violence, sexual assault or stalking.
2. A unit transfer based on the need for an accessible unit, a verifiable medical necessity, or any other reason due to the need of a reasonable accommodation.
3. A unit transfer of a non-disabled individual living in a wheelchair accessible unit to accommodate an applicant on the Waiting List in need of a wheelchair accessible unit. (A lease addendum will be entered into with non-disabled tenant living in a wheelchair accessible unit.)
4. A unit transfer based on the need of an emergency temporary relocation. (If a unit becomes uninhabitable due to a catastrophe, the resident family will be given any open unit for temporary living quarters until their own unit is repaired.)

B. Optional Preferences – In addition to the Existing Tenant Preferences listed above, **Eleanor Apartments** has the following preferences. The preferences listed below are subordinate to the Existing Tenant Preferences:

1. Preference for Persons with Disabilities
2. Preference for Homeless Families

Preference will be given to eligible applicants on the Waiting List that include a person with disabilities, large households and homeless families. This preference will apply to sixteen (16) units for Persons with Disabilities within the total project, and eight (8) units for Homeless individuals within the total project. If you meet the disability requirement, and homeless requirement, you will only be eligible for 1 set-aside unit. Once eight (8) units have been leased to eligible tenants that include a person with disabilities, the priority order described above in Section A shall apply. When eligible tenants that received a Persons with Disabilities preference vacate the property, the Persons with Disabilities preference will begin to apply again until there are again at least eight (8) units leased to eligible tenants that include Persons with Disabilities, and eight (8) units leased to eligible tenants that are Homeless. If there are no eligible tenants on the Waiting List that meet this preference, vacant apartments will be leased according to the priority order described above in Section A.

The following definition of disability shall apply to be considered for the **Persons with Disabilities** preference:

Persons with Disabilities Definition:

Disabled means a physical or mental impairment that substantially limits one or more of the major life activities of an individual, such as taking care of oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, or learning. To meet the Commitment for persons with disabilities, at least one person in the unit must be Disabled. Owners must notify all applicants that certain units are set aside for persons with disabilities and ask **every** applicant whether s/he claims Disabled status for the purpose of meeting the Disabled Commitment.

If an applicant claims “Disabled” status, s/he must provide third-party written verification from a physician, relative, social worker, caregiver or other acceptable third party that states that the applicant falls within the definition of Disabled using a Disability Verification form. (The Disability Verification form provided by the WSHFC shall be utilized.) The person completing the verification form should have personal knowledge of the applicant’s disability. The form cannot be completed by property staff. If the applicant receives Social Security or Supplemental Security Income benefits as a result of a Disability, s/he may submit a benefit letter as verification of his/her disabled status. The written verification should be kept in the Resident’s lease file.

C. When a Preference Is Denied

If it is determined that an applicant does not meet the criteria or is not receiving a preference, the applicant will promptly receive a written notice of this determination from Management. The notice will contain a brief statement of the reasons for the determination, and state that the applicant has the right to meet with Management to review this decision. If the applicant requests a meeting, it will be conducted by a person or persons designated by Management. Persons with disabilities have the right to request reasonable accommodations to participate in this meeting.

II. APPLICATION PROCESS

A. **INCOME LIMITS** - The income limits checked below are for this property and are posted in the Leasing Office (management should mark all that apply):

- ☒ Extremely Low Income - 30% AMI
☒ Very Low Income - 50% AMI
☐ Low Income - 60% AMI

B. UNIT SIZE/OCCUPANCY STANDARDS – Households will be accommodated in accordance with the following occupancy standards:

- | | <u>Minimum</u> | <u>Maximum</u> |
|--|----------------|----------------|
| 1. One-Bedroom | 1 | 3 |
| 2. All residents must be 62 years of age or older. A disabled family is the head, spouse or sole member with disabilities. | | |
| 3. A Live-In Aide is allowed to live in the apartment due to a reasonable accommodation. | | |

C. TAX CREDIT STUDENT ELIGIBILITY RULE – (We realize this is a senior property, but this language is a requirement). We cannot accept a household entirely occupied by full-time students unless one or more of the following criteria are met:

1. The students receive assistance under Title IV of the Social Security Act (Temporary Assistance to Needy Families or TANF, formerly AFDC);
2. The students are enrolled in a job training program receiving assistance under the Job Training Partnership Act or under other similar Federal, State or local laws;
3. The students are single parents with child(ren) or unborn child(ren), and such parents and the child(ren) are not dependents of another individual;
4. The students are married and file a joint tax return or are eligible to file a joint tax return.
5. At least one household member was previously (not currently) under the care and placement responsibility of the State Agency responsible for administering a plan under Part B or Part E of Title IV of the Social Security Act (Foster Care).

A full-time student is defined as:

- a. Anyone who is currently enrolled in any type of school and the school they attend defines the hours they attend as full time.
- b. Anyone who will attend full time any type of school any time in the next twelve (12) months.
- c. Anyone who has attended school full time for five (5) months of this calendar year. This does not have to be consecutive. Example 1: If an applicant attends school full time from January 20th through May 13th, this is considered five months. If they attend one day in any month, that counts as a full month. Example 2: If you attended full time one day in January, one day in February, one day in April, one in June and one in July, you are considered a full-time student until January 1st of the following year.

D. HUD STUDENT ELIGIBILITY RULE: Section 8 assistance shall not be provided to any individual who: *[HOME Program Units only]*

1. Is enrolled as either a part-time or full-time student at an institution of higher education for the purpose of obtaining a degree, certificate, or other program leading to a recognized educational credential;
2. Is under 24 years of age;
3. Is not a veteran of the United States Military;
4. Is not married;
5. Does not have a dependent child;

6. Is not a person with disabilities, as such term is defined in section 3(b)(3)(E) of the United States Housing Act of 1937 (42 U.S.C. 1437a(b)(3)(E) and was not receiving assistance under such Section 8 as of November 30, 2005; or
7. Is not living with his or her parents who are receiving Section 8 assistance; and
8. Is not individually eligible to receive Section 8 assistance **or** has parents (individually or jointly) who are not income eligible to receive Section 8 assistance.

Unless the student is determined independent from his or her parents, the eligibility of the student seeking Section 8 will be based on both the students and the parents being determined income eligible for Section 8 assistance. The parent's family income must be at or below the Low Income limit for the state/county the parents reside in. If the parents are from another county, they must qualify under the income limits of the county where the housing is located.

A student under the age of 24 may be income eligible for the Section 8 assistance in circumstances where an examination of the income of the student's parents may not be relevant or where the students can demonstrate the absence of his or her independence from their parents. These practices and criteria include, but are not limited to consideration of all the following:

1. The individual must be of legal contract age under state law.
2. The individual must have established a household separate from parents or legal guardians for a least one year prior to application for occupancy or the individual meets the U.S. Department of Education's definition of an independent student. Independent Student of Title IV aid also includes (in addition to married, veteran, have dependent children):
 - a. Be at least 24 years old by December 31 of the award year for which aid is sought;
 - b. Be an orphan or a ward of the court through age of 18 or was an orphan, in foster care, or a ward of the court at any time when the individual was 13 years of age or older;
 - c. Is, or was immediately prior to attaining the age of majority, an emancipated minor or in legal guardianship as determined by a court of competent jurisdiction in the individual's State of legal residence;
 - d. Be a veteran of the Armed Forces of the United States (as defined in subsection (c)(1) of HEA) or is currently serving on active duty in the Armed Forces for other training purposes;
 - e. Be a graduate or professional student;
 - f. Be a married individual;
 - g. Has legal dependents other than a spouse (for example, dependent children or an elderly dependent parent);
 - h. The individual has been verified during the school year in which the application is submitted as either an unaccompanied youth who is a homeless child or youth (as such terms as defined in section 725 of the McKinney-Vento Homeless Assistance Act, or as unaccompanied, at risk of homelessness, and self-supporting, by—
 - (i) a local educational agency homeless liaison, designated pursuant to section 722(g)(1)(J)(ii) of the McKinney-Vento Homeless Assistance Act;
 - (ii) the director of a program funded under the Runaway and Homeless Youth Act or a designee of the director;
 - (iii) the director of a program funded under subtitle B of title IV of the McKinney-Vento Homeless Assistance Act (relating to emergency shelter grants) or a designee of the director; or
 - (iv) a financial aid administrator; or
 - i. The individual is a student for whom a financial aid administrator

makes a documented determination of independence by reason of other unusual circumstances.

3. The individual must not be claimed as a dependent by parents or legal guardians pursuant to IRS regulations.
4. Review a student's prior year income tax returns to verify the student is independent (except if the student meets the Department of Education definition of "independent student"); and
5. The individual must obtain a certification of the amount of financial assistance that will be provided by parents, signed by the individual providing the support. In cases where there are divorced parents, a separate certification from each will need to be obtained. This certification is required even if no assistance will be provided.
6. Any financial assistance a student received (1) under the Higher Education Act of 1965, (2) from private sources, or (3) from an institution of higher education that is in excess of amounts received for tuition is included in annual income, except if the student is over the age of 23 with dependent children or if the student is living with his or her parents who are receiving Section 8 assistance.
7. If an ineligible student is a member of an applicant household or an existing household receiving Section 8 assistance, the assistance of the household will not be prorated but will be terminated in accordance with the guidance in the HUD 4350.3.

Vulnerable Youth - An individual who meets the Department of Education's definition of independent student in paragraph b, c, or h. listed above.

Income "included" – *SEC. 215(b) For purposes of determining the eligibility of a person to receive assistance under section 8 of the United States Housing Act of 1937 (42 U.S.C. 1437f), any financial assistance (in excess of amounts received for tuition and any other required fees and charges) that an individual receives under the Higher Education Act of 1965 (20 U.S.C. 1001 et seq.), from private sources, or an institution of higher education (as defined under the Higher Education Act of 1965 (20 U.S.C. 1002)), shall be considered income to that individual, except for a person over the age of 23 with dependent children. Financial assistance does not include loan proceeds.*

Amount of annual tuition: Tuition and other required fees include all fixed sum charges that are required of a large proportion of all students. Examples of required fees include, but are not limited to, writing and science lab fees and fees specific to the student's major or program. Expenses related to attending an institution of higher education must not be included as tuition. Examples of these expenses include, but are not limited to, room and board, books, supplies, meal plans, transportation and parking, and other non-fixed sum charges. Owner/agents must verify the amounts of tuition and required fees.

Income "excluded" – *Financial assistance (scholarships & grants) of students who receive Section 8 that live with their parents will not be considered income to the family household. Financial assistance that is provided by persons not living in the unit is not part of annual income if the student meets the Department of Education's definition of "vulnerable youth".*

III. MARKETING

Fair Housing Requirements

The property enforces a marketing effort that attracts a broad cross-section of the eligible population without regard to race, color, religion, sex, disability, familial status, or national origin.

Filling Vacant Units

Whenever additional applicants are needed to fill available units, advertising will be carried out in accordance with the City of Bellingham -approved AFHMP, and as indicated below.

Race and Ethnic Data Reporting

The property will offer all members of an applicant/tenant family the option of completing Form HUD-27061-H, Race and Ethnic Data Reporting Form. This form is used for gathering race and ethnic data in assisted housing programs. The form will be offered for completion at initial application or at lease signing. In-place tenants who have not completed the form will be offered the opportunity to complete the form. There is no penalty for persons who do not complete the form. The property will place a note in the file of any household member who chooses not to complete the form.

Affirmative Fair Housing Marketing Plan (AFHMP)

The property complies with the requirements of the City of Bellingham-approved AFHMP established for the property, which is designed to promote equal housing choice for all prospective residents regardless of race, color, religion, sex, disability, familial status, national origin, sexual orientation, or gender identity. The purpose of the plan is to ensure that families with similar income levels will have a similar range of housing opportunities. The plan outlines marketing strategies management will use. Special efforts will be made to attract persons who are least likely to apply due to such factors as the racial or ethnic composition of the neighborhood, or other factors the State may require. Marketing will also seek to reach potential applicants outside the immediate neighborhood if marketing only within the neighborhood would create a disparate impact against certain classes, such as the case of an entire neighborhood that includes no minorities.

Monitoring and Documenting Marketing Activities

The property will monitor marketing efforts and document the results in writing. The documentation will be made available, upon request, for all marketing activities, to show consistency with affirmative fair housing marketing requirements and the approved plan for the program. This documentation will include copies of marketing materials, records of marketing activities conducted, and documentation of any special marketing activities conducted in accordance with the property's approved AFHMP.

Review of Plan

The AFHMP will be reviewed annually to assess the effectiveness of affirmative marketing efforts. The AFHMP is updated every five years; however, if the demographics of the area have changed, the property will determine whether advertising efforts should be targeted to different groups. The AFHMP will be revised whenever a substantial change takes place, and would be submitted to the agency for approval.

Advertising

All advertising for this property includes either the City-approved Equal Housing Opportunity logo or slogan, or an equal housing statement. Visual advertising will depict members of protected classes, including individuals from both majority and minority groups. The Fair Housing Equal Housing Opportunity poster is in the leasing office or another conspicuous location in the building, and/or the Equal Housing Opportunity sign, slogan or statement can be seen from the street, so that it is readily apparent to all persons seeking housing.

IV. APPLICATION PROCESS

- A. Upon apartment turnover, apartments will be advertised according to the City of Bellingham-approved Affirmative Fair Housing Marketing Plan. Priority determines the order of processing only, and in no way changes the requirement that all potential tenants must meet the other criteria

for resident selection. Applications will be ranked for consideration (and units will be offered) according to the following descending order of priorities:

1. Date and time-stamped property received original application and reference number assigned;
2. Date of completion of verification/certification process; and
3. Date of availability for move-in.

Applications are located at the Eleanor Apartments, 1510 N Forest St, Bellingham, WA 98225, or may be mailed or emailed.

- C. ADVERTISING AND OUTREACH.** We must ensure that notices of and communications during all meetings are provided in a manner that is effective for persons with hearing, vision, and other communications-related disabilities consistent with Section 504 of the Rehabilitation Act of 1973 (24CFR 8.6), and, as applicable, the Americans with Disabilities Act.

Advertising and outreach activities must be done in accordance with the applicable fair housing marketing requirements or the City of Bellingham-approved Affirmative Fair Housing Marketing Plan (AFHMP), and it must also comply with adopting suitable means to assure that the notice reaches eligible individuals with disabilities and those with limited English proficiency. All advertising and outreach must include the City-approved Equal Housing Opportunity logo, slogan or statement. In addition, advertising depicting persons must depict members of all eligible protected classes including individuals from both majority and minority groups, including both sexes.

Advertising and outreach should be to groups other than the typical population of the neighborhood in which the property is located while reaching out to applicants who are least likely to apply because they are not the predominant racial or ethnic group in the neighborhood.

- V. TRANSFER POLICY – Transfers from one unit to another type of unit within the property will take precedence over new move-ins, and may be required by management for the following reasons only:**

1. For verifiable medical necessity, i.e. wheelchair accessible or hearing impaired unit. Transfers that are needed due to a reasonable accommodation will have priority over non-reasonable accommodation transfer;
2. When a household requests to transfer one or more lessees out of an existing household into another unit on the property, the transferring lessee will be treated as a new applicant. He/she must be 62 years of age or older, complete an application, meet eligibility and qualify as a new move-in by going through the screening process regarding verifying income, criminal and credit history, etc.;
3. For emergency temporary relocation. (If a unit becomes uninhabitable due to a catastrophe, the resident family will be given any open unit for temporary living quarters until their own unit is repaired. An “open unit” is a unit for which the keys are in the possession of the management company.)
4. If a non-physically disabled tenant is living in an accessible unit, and a disabled tenant or Transfer Waiting List applicant needs the special physical design features of that unit, the tenant must agree to move to a non-accessible unit at their own expense. Please review Accessible Unit for Disabled Lease Addendum.

Transfer list(s) will be maintained by Wheelchair Accessible Unit or Hearing Impaired Unit, etc. Transfer list(s) resident names will be maintained in a date and time order.

Depending upon the circumstances of the transfer, a tenant may be obligated to pay all costs associated with the move including damages. However, if a tenant is transferred as a reasonable accommodation to a household member's disability, the tenant may also request the owner to pay the costs associated with the transfer, unless doing so would be an undue financial and administrative burden.

VI. POLICIES TO COMPLY WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, THE FAIR HOUSING AMENDMENTS ACT OF 1988 AND TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, THE AGE DISCRIMINATION ACT OF 1975, AND EQUAL ACCESS TO HOUSING IN HUD PROGRAMS:

A. **Section 504** prohibits discrimination based upon disability in all programs or activities operated by recipients of federal financial assistance. Although Section 504 often overlaps with the disability discrimination prohibitions of the Fair Housing Act, it differs in that it also imposes broader affirmative obligations on owners to make their programs as a whole, accessible to persons with disabilities. These obligations include the following:

1. Making and paying for reasonable structural modifications to units and/or common areas that are needed by applicants and tenants with disabilities, unless these modifications would change the fundamental nature of the project or result in undue financial and administrative burdens;
2. Operating housing that is not segregated based upon disability or type of disability, unless authorized by federal statute or executive order;
3. Providing auxiliary aids and services necessary for effective communication with persons with disabilities;
4. Developing a transition plan to ensure that structural changes are properly implemented to meet program accessibility requirements (*for properties built before June 1988*); and
5. Performing a self-evaluation of the owner's program and policies to ensure that they do not discriminate based on disability;
6. Operating their programs in the most integrated setting appropriate to the needs of qualified individuals with disabilities;
7. Allowing a larger apartment to accommodate a Live-In Aide (Aides must pass the same criminal criteria as a new move-in would).

Furthermore, the Section 504 regulations establish affirmative accessibility requirements for newly constructed or rehabilitated housing, including providing a minimum percentage of accessible units. In order for a unit to be considered accessible, it must meet the requirements of the Uniform Federal Accessibility Standards (UFAS).

1. Units designed specifically for individuals with a physical impairment:
 - a. For this development, "physical impairment" is defined as mobility impairment which necessitates the permanent use of a wheelchair. For all units designed

- specifically for wheelchair accessibility, priority will be given to those applicants needing such modifications;
 - b. Priority will be given to households where a member is required to use a wheelchair;
 - c. If there are not enough such households to fill all specially equipped units, owners may give preference to households with members whose physical or mobility impairment would be eased by the design of the accessible unit.
2. Units designed for individuals with a hearing or vision impairment:
- a. For all units designed specifically with hearing and/or vision features, priority will be given to those applicants and households where a member is in need of such modifications.
- B. **The Fair Housing Act** prohibits discrimination in housing and housing-related transactions based on race, color, religion, sex, national origin, disability, or familial status. It applies to housing, regardless of the presence of federal financial assistance.
- C. **Title VI of the Civil Rights Acts of 1964** prohibits discrimination on the basis of race, color or national origin in any program or activity receiving federal financial assistance from HUD.
- D. **The Age Discrimination Act of 1975** prohibits discrimination on the basis of age in programs and activities receiving federal financial assistance. It is not a violation of the Act to use age as screening criteria in a particular program if age distinctions are permitted by statute for that program or if age distinctions are a factor necessary for the normal operation of the program or the achievement of a statutory objective of the program or activity.
- E. **Protections Provided Based on Sexual Orientation, Gender Identity or Marital Status:** *Equal Access to Housing in HUD Programs – Regardless of Sexual Orientation, Gender Identity (including Gender Expression) or Marital Status* - The Owner/Agent will comply with the requirements established in the Final Rule which ensures that HUD’s core housing programs are open to all eligible persons regardless of sexual orientation, gender identity or marital status in any phase of the occupancy process. No Owner/Agent or administrator of HUD-assisted housing may inquire about the sexual orientation or gender identity of an applicant or occupant for purposes of determining eligibility. HUD further revises generally applicable definitions as follow:
- a. The term “Family” includes, but is not limited to the following, regardless of actual or perceived sexual orientation, gender identity or marital status:
 - i. A family with or without children (a child who is temporarily away from home because of placement in foster care is considered a member of the family);
 - ii. An elderly family;
 - iii. A near-elderly family;
 - iv. A disabled family;
 - v. A displaced family; and
 - vi. The remaining member of a tenant family.
 - b. The term “gender identity” means actual or perceived gender-related characteristics.
 - c. The term “sexual orientation” means homosexuality, heterosexuality or bisexuality.

Even though HUD does not create an additional protected class under the Fair Housing Act or the Civil Rights Law, housing discrimination based on sex may still be covered by the Fair Housing Act under the Equal Access Rule.

Persons with disabilities have the right to request reasonable accommodations and to participate in the informal hearing process. To contact the 504 Coordinator for Mercy Housing: 303-830-3300; TTY - 1-800-877-8973/or 711; Fax - 1-877-245-7121; 504adacoordinator@mercyhousing.org.

VII. VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005 (VAWA), AND VAWA 2013:

- A. **VAWA** protections apply to families applying for or receiving rental assistance payments under the project-based Section 8 program, HUD programs, and other affordable programs. The law protects victims or survivors of domestic violence, dating violence, sexual assault, or stalking, as well as their immediate family members generally, from being evicted or being denied housing assistance if an incident of violence [that] is reported and confirmed. VAWA also provides that an incident of actual or threatened domestic violence, dating violence, sexual assault, or stalking, does not qualify as a serious or repeated violation of the lease nor does it constitute good cause for terminating the assistance, tenancy, or occupancy rights of the victim or survivor. Furthermore, criminal activity directly relating to domestic violence, dating violence, sexual assault, or stalking is not grounds for terminating the victim's or survivor's tenancy. The Owner/Agent (O/A) will bifurcate (divide a lease as a matter of law) in order to evict, remove, or terminate the assistance of the offender while allowing the victim or survivor, who is a tenant or lawful occupant, to remain in the unit, with RVP approval.

VAWA ensures that victims are not denied housing and housing assistance solely because the person is a victim of a VAWA crime. However, being a victim of a VAWA crime is not reason to change the eligibility or applicant screening requirements set forth in the Resident Selection Plan, unless such requirements interfere with protections provided under VAWA.

For example: Mercy Housing may waive the requirement to review landlord history if the victim has provided necessary documentation to certify their status as a victim and if contacting a previous landlord would put the applicant's location at risk of exposure to the accused perpetrator.

- B. **Definitions** – The following definitions are provided as assistance in understanding and implementing the VAWA protections. The definitions for domestic violence, dating violence, sexual assault, or stalking and affiliated individual have been incorporated into the United States Housing Act.

Domestic Violence includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Dating Violence means violence committed by a person: (A) who is or has been in a social relationship of a romantic or intimate nature with the victim, and (B) where the existence of such

a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; and (iii) the frequency of interaction between the persons involved in the relationship.

Sexual Assault means any proscribed by chapter 109A of Title 18, whether or not the conduct occurs in the special maritime and territorial jurisdiction of the United States or in a Federal prison and includes both assaults committed by offenders who are strangers to the victim and assaults committed by offenders who are known or related by blood or marriage to the victim.

Stalking means (A)(i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; or (ii) to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and (B) in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person; (ii) a member of the immediate family of that person; or (iii) the spouse or intimate partner of that person.

Affiliated Individual means, with respect to a person: (a) a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in the place of a parent to a child (for example, the affiliated person is a child in the care, custody, or control of that individual); or (B) any individual, tenant, or lawful occupant living in the household of that person.

Bifurcate means to divide a lease as a matter of law so that certain tenants can be evicted or removed while the remaining family members' lease and occupancy rights are allowed to remain intact.

C. Protections for Victims or Survivors of Domestic Violence, Dating Violence, Sexual Assault, or Stalking - The law offers the following protections against eviction or denial of housing based on domestic violence, dating violence, sexual assault, or stalking:

1. An applicant's or program participant's status as a victim or survivor of domestic violence, dating violence, sexual assault, or stalking is not a basis for denial of rental assistance or for denial of admission, if the applicant otherwise qualifies for assistance or admission.
2. An incident or incidents of actual or threatened domestic violence, dating violence, sexual assault, or stalking will not be construed as serious or repeated violations of the lease or other "good cause" for terminating the assistance, tenancy, or occupancy rights of a victim or survivor of abuse.
3. Criminal activity directly related to domestic violence, dating violence, sexual assault, or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy, or occupancy rights of the victim or survivor of the criminal acts.
4. Assistance may be terminated or a lease "bifurcated" in order to remove an offending household member from the home. Whether or not the individual is a signatory to the lease and lawful tenant, if he/she engages in a criminal act of physical violence against family members or others, he/she stands to be evicted, removed, or have his/her occupancy rights terminated. This action is taken while allowing the victim or survivor, who is a tenant or

a lawful occupant, to remain.

5. The provisions protecting victims or survivors of domestic violence, dating violence, sexual assault, or stalking engaged in by a member of the household, may not be construed to limit the O/A, when notified, from honoring various court orders issued to either protect the victim or survivor or address the distribution of property in case a family breaks up.
6. The authority to evict or terminate assistance is not limited with respect to a victim or survivor that commits unrelated criminal activity. Furthermore, if an O/A can show an actual and imminent threat to other tenants or those employed at or providing service to the property if an unlawful tenant's residency is not terminated, then evicting a victim or survivor is an option, VAWA notwithstanding. Ultimately, O/As may not subject victims or survivors to more demanding standards than other tenants.
7. VAWA protections shall not supersede any provision of any federal, state, or local law that provides greater protection for victims or survivors of domestic violence, dating violence, sexual assault, or stalking. The laws offering greater protection are applied in instances of domestic violence, dating violence, sexual assault, or stalking.

D. Confidentiality – The Notice of Occupancy Rights under the Violence Against Women Act provides notice to the resident/applicant of the confidentiality of information about a person seeking to exercise VAWA protections and the limits thereof. The identity of the victim and all information provided to the O/A relating to the incident(s) of abuse covered under 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; or
2. Required for use in an eviction proceeding or termination of assistance; or
3. Otherwise required by applicable law.

Mercy Housing will retain all documentation relating to an individual's domestic violence, dating violence, sexual assault and/or stalking in a separate file that is kept in a separate secure location from other applicant or resident files.

Certification – O/As responding to an incident of actual or threatened domestic violence, dating violence, sexual assault, or stalking that could potentially have an impact on a tenant's participation in the housing program may request in writing that an individual complete, sign, and submit within 14 business days of the request, the HUD-approved VAWA certification form.

Alternately, in lieu of the certification form or in addition to it, O/As may accept a) a federal, state, tribal, territorial, or local police record or court record or b) 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 or survivor has sought assistance in addressing domestic violence, dating violence, sexual assault, 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 or survivor of domestic violence, dating violence, sexual assault, or stalking has signed or attested to the documentation.

The victim is not required to name his/her accused perpetrator if doing so would result in imminent

threat or if the victim does not know the name of his/her accused perpetrator.

- E. **Tenants Rights and Responsibilities** – Tenants and family members of tenants who are victims or survivors of domestic violence, dating violence, sexual assault, or stalking are protected by VAWA from being evicted or from housing assistance being terminated because of the acts of violence against them.

If requested, tenants are required to submit to the O/A, a completed Certification of Domestic Violence, Dating Violence or Stalking, Form HUD-91066 (*currently, a new Certification form is in use until HUD notification*), or other supporting documentation as described in D., above, within 14 business days of the O/A's request, or any extension of that date provided by the O/A. If the certification or other supporting documentation is not provided within the specified timeframe, the landlord may begin eviction proceedings.

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

It is possible for someone lawfully occupying the unit, who is also a victim or survivor, to be evicted or removed from the home. If the victim or survivor commits separate criminal activity, a landlord may evict them for engaging in crime. Furthermore, if a victim or survivor poses "an actual and imminent threat to other tenants or those employed at or providing service to the property," they could be evicted, despite VAWA. Of paramount consideration within VAWA is that the landlord may not hold the victim or survivor to a more demanding standard than other tenants.

Victims are encouraged to seek police/legal protection from their accused perpetrator. In some cases, we may file a restraining order against the accused perpetrator to prevent the accused perpetrator from entering the property.

VIII. APPLICANT SCREENING

A. The following priority for processing will also be used:

1. Units designed specifically for individuals with a physical impairment:
 - (a) For this development, "physical impairment" is defined as mobility impairment which necessitates the permanent use of a wheelchair. For all units designed specifically for wheelchair accessibility, priority will be given to those applicants needing such modifications;
 - (b) Priority will be given to households where a member is required to use a wheelchair;
 - (c) If there are not enough such households to fill all specially equipped units, owners may give preference to households with members whose physical or mobility impairment would be eased by the design of the accessible unit.
2. Units designed for individuals with a hearing impairment:

- (a) For all units designed specifically with hearing ~~and/or~~ vision features, priority will be given to those applicants and households where a member is in need of such modifications.

B. Initial Interview – All household members must be present at the initial interview.

At the scheduled interview, all eligibility factors will be explained to the applicants, with particular emphasis on the Applicant Screening Requirements. During the interview, the staff person will do the following:

- Clarify any information provided by the applicant;
- Income qualification verification, including self-employment: soliciting third-party verification from all sources in order to determine annual household income (the maximum income levels apply to all programs, plus minimum income levels apply to the Tax Credit program), and all assets, including bank accounts;
- Make copies of photo identification, i.e. Driver's License or state I.D. card, I-94s or employment cards.
- Answer any questions the applicant may have.

C. Applicant Screening

It is the policy of Mercy Housing Management Group to deny admission to applicants whose habits and practices may reasonably be expected to have a detrimental effect on the operations of the property or on the quality of life for its residents. As a part of the final eligibility determination, Mercy Housing Management Group will screen each applicant household to assess suitability. Factors to be considered in the screening are housekeeping habits, rent paying habits and credit records, prior history as a tenant and criminal records. Following is a description of each of these factors and the method of verification to be employed:

Application Fee

An Application Fee of \$25.00, paid by money order or cashiers check, is required for all adults that will reside in the apartment and should be submitted for all applicants that are selected to go through the complete application process. The fee shall be paid at the time the application is received. (After background screening is processed, the Application Fee is non-refundable.)

A Comprehensive Reusable Tenant Screening Report may be accepted, as defined in RCW 59.18.030, in the place of the \$25.00 Application Fee, if made available to Mercy Housing Management Group by a consumer reporting Agency. If a judge signs an Order of Limited Dissemination, our screening company is limited on reporting certain eviction cases; and we have an additional 7 days to return the security deposit at the end of tenancy, which is from 14 to 21 days.

We reserve the right to screen any applicant, at the cost of the property, that presents a reusable tenant screening report and the applicant can still be denied for any reason outlined in this screening criteria due to the result of the Transunion screening.

Rent Paying Habits, Responsible Tenancy History, Behavior and Conduct

Staff will request credit histories on each adult member of each applicant household and will request phone references from the applicant's current landlord and former landlords for the past two (2) years. Based upon these verifications, the staff will determine if the applicant(s) paid rent on time, took care of the unit, and if the landlord would rent to them again. If the landlord provides a good reference, staff will move forward with the application process. If the landlord provides a negative reference, staff will request a written reference from the Landlord. **A written reference from social workers and/or others involved with the applicant in a professional capacity may be acceptable, if no landlord reference is available.**

Applicants who have failed to pay amounts due or failed to reach a satisfactory agreement to pay those amounts will also be considered ineligible.

It is the applicant's responsibility to demonstrate utilities can be put in their name. Applicants who cannot have utilities put in their name will be considered ineligible.

Management will initiate an eviction history and credit report. The applicant shall be notified of such action in advance. Applicants will be charged the actual costs of the credit and criminal records reports OR the maximum allowable fee set by statute, whichever is less. Applicants to properties with HUD rental subsidies will not be charged for the reports.

If there is a finding of any kind which would negatively impact an application, the applicant will be notified in writing. The applicant then shall have 14 calendar days in which such a finding may be appealed to staff for consideration.

Any currently open bankruptcy proceeding of any of the household members will be considered a disqualifying condition.

Applicants who have resided in homes they owned during the three (3) years or more prior to completion of the application can provide proof of timely mortgage, insurance or property tax payments in order to demonstrate their ability to meet the financial requirements of the lease.

Applicants who have been homeless or who have lived in housing for which they were not financially responsible must provide references from person(s) with whom they have had a professional relationship to demonstrate their ability to meet the financial conditions of the lease. **Letters of reference from family members will not be accepted.**

In those cases where no landlord reference is available, and a written reference from social workers and/or others involved with the applicant in a professional capacity is provided, it will be determined if the applicant has demonstrated an ability and willingness to live peacefully with neighbors and refrain from behavior that jeopardizes the safety and security of the housing community.

Rent as Percentage of Gross Income

1. To protect the project from rent loss and rent delinquency, persons spending more than 50% of the household's combined monthly income for rent may not be accepted. Those household members listed on the application must be the same as those who have contributed to a household's history of paying more than 50% of gross household income for rent.
2. Current documentation of ability to pay higher rent above 50% must be within the past

twelve months for a period of no less than eight (8) months. Suitable documentation shall include the following: cancelled checks, rent receipts or mortgage statements, lease agreement, and landlord verification.

3. All income must be verified by management.
4. For determining “Rent as Percentage of Income”, either the rent charged for a 30% of area median income unit or the rent charged for a 50% of area median income unit shall be divided by the applicant’s gross monthly income.

Criminal Records Check and Eviction Check

Staff will hire a contractor to run a credit check and criminal background check on all applicants and it will check court records for evidence of evictions or judgments against the applicant and evidence of criminal convictions. The purpose of these checks is to obtain information on the applicant’s past history of meeting financial obligations and future ability to make timely rent payments and to abide by the federal laws regarding the prohibition of admitting any applicant with specific criminal activity including drug-related activity.

(Our Consumer Reporting Agency is Credit Retriever, which can be contacted at www.creditretriever.com, and the applicant has a right to obtain a copy of the report and dispute the information in it if denied or adverse action is taken.

IX. DENIED APPLICATIONS

1. A background criminal reference check is conducted to determine that applicants and/or members of an applicant’s household have:
 - No record of felony convictions within the past three (3) years;
 - No record of misdemeanor convictions within the past one (1) year;
 - No record of non-violent convictions within the past two (2) years
 - No record of two (2) misdemeanor convictions within the past three (3) years;
 - No record of criminal sexual criminal convictions, including being subject to a nationwide sex offender lifetime registration;
 - No record of terrorist convictions;
 - No record of felony arson convictions.
2. **Applicants may be denied for any of the following:**
 - a. Failure to present all members of the household at the interview, except for hospitalization, medical reasons, emergency, etc., (or some other time acceptable to management) prior to completion of Initial Certification;
 - b. Blatant disrespect or disruptive behavior toward management, the property or other residents exhibited by an applicant or family member any time prior to move-in (or a demonstrable history of such behavior);
 - c. A negative landlord reference, encompassing failure to comply with the lease, poor payment history, poor housekeeping habits, or evictions for cause including current notices to pay or quit;
 - d. Any household member with a currently open bankruptcy proceeding;
 - e. Falsification of any information on the application;
 - f. Eligibility income exceeding the maximum allowed, or not meeting the minimum allowed;

- g. Other good cause: including, but not limited to, failure to meet any of the selection criteria in this document;
- h. Failure to meet age requirement of 62 years of age or older.
- i. Failure to provide photo identification for adults 62 years of age and older;
- j. Declines an apartment offer after being contacted three times;
- k. The Controlled Substances Act (CSA) categorizes marijuana as a Schedule 1 substance and therefore, the manufacture, distribution, or possession of marijuana is a federal criminal offense. The CSA prohibits all forms of marijuana use (medically or recreationally), even if it is permitted under state law. Marijuana is not permitted in the units, common areas, or on the property. Admission to this property will be denied if the owner has reasonable cause to believe that the illegal use may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents, and current resident households can have their tenancy or assistance terminated by the owner for illegally using a controlled substance. Illegal use, manufacture, distribution, or possession of any controlled substance is prohibited.

X. FINAL ELIGIBILITY DETERMINATION

Staff will make a final eligibility determination on each applicant only after all factors have been adequately verified including household's annual income. Eligible applicants will be notified in writing of their status and given an approximate date when they can expect to receive an offer of a unit. Ineligible applicants will be notified of their ineligibility in writing and the reason, and informed of their right to an informal review.

Once final eligibility is determined, the staff will proceed to calculate the rent, execute lease documents, and assign the next unit available for which the household has been deemed eligible.

Applicants determined ineligible for admission by staff may request an informal review of the determination. They must make the request within 14 days of the date of the notice of ineligibility. Within 5 days of receiving the request, the staff must schedule the review and notify the applicant of the place, date and time.

Informal reviews will be conducted by an impartial review officer who had no involvement in the ineligibility determination. The review officer will be selected by the Area Director of Operations. The applicant may bring to the review any documentation or evidence he/she wishes and the evidence along with the data compiled by staff will be considered by the review officer.

The review officer will make a determination based upon the merits of the evidence presented by both sides. Within 10 days of the date of the review, the review officer will mail a written decision to the applicant and place a copy of the decision in the applicant's file.

XI. ESB 6413: OMNIBUS LANDLORD-TENANT LEGISLATION/PORTABLE TENANT SCREENING

- a. We accept a reusable tenant screening report (Please review Application Fee section);
- b. If a judge signs an Order of Limited Dissemination, our screening company is limited on reporting certain eviction cases; and
- c. We have an additional 7 days to return the security deposit at the end of tenancy, which is from 14 to 21 days.

XII. OCCUPANCY PROTECTION FOR HUD-ASSISTED HOUSEHOLDS IN PROPERTIES WITH LOW-INCOME HOUSING TAX CREDITS (LIHTC)

Owner/Agents may not terminate HUD-assisted tenants who do not meet LIHTC eligibility guidelines. Owners may only terminate tenancy in limited circumstances as prescribed by HUD regulations and by the terms of the lease and must follow HUD and state/local procedures. Termination for reasons other than those permitted by HUD are prohibited. The lease agreement details the grounds for termination of tenancy which do not include failure to meet LIHTC requirements, including LIHTC-specific income and student eligibility rules.

Should an assisted household become over-income and no longer eligible to receive HUD subsidy, i.e. it is determined at annual or interim recertification that the tenant has the ability to pay the full contract rent or market rent, the owner will terminate the housing assistance. However, in accordance with the lease agreement, the tenant retains all other rights under the lease, including the right to occupy the unit.

XIII. PET POLICY

1. Pets will be permitted only in accordance with the Pet Policy established by management. Register pets with the office before moving them into the property. There is a refundable Pet Deposit in the amount of \$250.00. Management will allow the Pet Deposit to be paid within three months, with an initial \$84.00 payment when the pet is brought into the unit, and \$83.00 per month payments are allowed for the second and third months.
2. A Service or Companion Animal (Assistance Animal) is allowed with a provider's verification. Please review the Reasonable Accommodation Policy.

XIV. MODIFICATION OF THE RESIDENT SELECTION CRITERIA PLAN

This Resident Selection Criteria Plan will be reviewed annually to ensure that it reflects current operating practices, program priorities and HUD and Fair Housing requirements. If this Resident Selection Criteria Plan is substantially updated, you may be notified.

I certify that I have been given the opportunity to review the Resident Selection Criteria for housing at Eleanor Apartments.

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Applicant

Date

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Applicant

Date

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Applicant

Date

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Manager/Leasing Agent Signature

Date

