

Our Application Process

We are working with neighbors and other property owners in this area to maintain the quality of our neighborhoods. We want to assure that people do not use rental units for illegal activity. To that end, we have a very thorough screening process.

We will accept the first qualified applicant. If we do not process your application due to accepting an earlier applicant, your fee will be refunded. If you meet the application criteria and are accepted, you will have the peace of mind of knowing other renters in this area (the apartment complex) are being screened with equal care and that the risk of illegal activity occurring in the area is reduced.

Please review our list of criteria. If you feel you meet the criteria, please apply, because we would be happy to rent to you. Also, if you have any questions or concerns, feel free to ask.

APPLICANT SCREENING CRITERIA

There is a \$20.00 credit check fee payable when we do the credit check when your name comes to the top of the waiting list and we have a unit available. There is a \$17.50 credit check fee to process a credit check for co-signers, if you need a co-signer. These fees are non-refundable unless we do not do the credit check due to the acceptance of an earlier applicant. We will do credit checks on applications in the order they are received at the time your name comes to the top of the waiting list and we have an apartment come available.

Two pieces of I.D. must be shown. We require a photo I.D. (a driver's license if possible) and either a valid social security card or a non-resident alien card. Present these with your completed application. Note: If your social security number and date of birth are not on your application, it cannot be processed.

The application must be completed in its entirety. Separate applications must be completed for each person not related by marriage. If a line isn't filled in (or the omission explained is unsatisfactory), we will return it to you.

We will accept the first qualified applicant.

Rental history verifiable from unbiased sources: If you are related by blood or marriage to one of the previous landlords listed on your application, or your rental history does not include at least two previous owners, we require a qualified co-signer on your lease (*qualified co-signers must meet all applicant screening criteria, must own property in Cowlitz County and be currently employed in the state of Washington.*)

It is your responsibility to provide us with the information necessary to allow us to contact your past landlords. We reserve the right to deny your application if, after making a good faith effort, we are unable to verify your rental history.

You must have sufficient income/resources: If the combination of your monthly personal debt, utility costs, and rent payments will exceed 30% of your monthly income, before taxes, we will require a qualified co-signer on your rental agreement. If the combination exceeds 30% of your monthly income, your application will be denied unless a rent subsidy is available.

Income must be verifiable through pay stubs, employer contact, or tax records.

YOU WILL BE DENIED RENTAL IF:

You misrepresent any information on the application. If misrepresentations are found after a rental agreement is signed, your rental agreement will be terminated.

You have ever been convicted/arrested for the manufacture, distribution, possession or use of a controlled substance or are a felon.

You have a conviction or any type of crime that would be considered a threat to real property or the ability of other residents to peacefully enjoy the premises.

Your credit check shows any accounts that are not current. Occasional credit records showing payments within 30 to 59 days past due will be acceptable, provided you can justify the circumstances. Records showing payments past 60 days are not acceptable.

In the last five years you have had unpaid collections, and unlawful detainer or any judgment against you for financial delinquency.

Previous landlords report significant complaint levels of noncompliance activity including but not limited to:

- Repeated disturbance of neighbors' peaceful enjoyment of the area.
- Reports of drug dealing, or drug manufacturing.
- Damage to the property beyond normal wear.
- Reports of violence or threats to property owners or neighbors.
- Allowing persons not on the lease to reside on the premises.
- Failure to give proper notice when vacating the property.
- Repeated late rent.

Previous property owners would be disinclined to rent to you again for any other reason pertaining to the behavior of yourself, your pets, or others allowed on the property during your residency.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Rev: 12/2006



COLUMBIA VIEW HARBOR APARTMENTS

Longview Housing Authority



116 S. 1st Street
Kalama, WA 98625
Phone: 360-274-8285 or 877-885-5473 Fax: 360-274-5229
TDD: 1-800-833-6388

APPLICATION FOR: **COLUMBIA VIEW HARBOR APARTMENTS**

HAVE YOU, OR SPOUSE, EVER APPLIED TO RENT, OR LIVED IN, OUR COMPLEX'S BEFORE?
YES _____ NO _____

PLEASE PRINT

IF YES, UNDER WHAT NAME(S) _____ WHEN? _____

Residential Rental Application

TO THE APPLICANT: We sincerely thank you for your application. Please help us promptly process this application by clearly completing all of the required information on this application. With the exception of related dependents and married couples, **ALL** persons, 18 or older, planning to occupy this unit, must fill out a separate Residential Rental Application.

Date of Application _____ Desired Move-In Date _____

Total Family Size _____ Unit Size Applied For _____

HEAD OF HOUSEHOLD

SPOUSE-(if unmarried, complete separate application)

Full Name _____	Full Name _____
Marital Status _____	Marital Status _____
Drivers Lic/ID # _____	Drivers Lic/ID # _____

Please list below ALL members of the household that will be living in the rental unit.

First & Last names of All members of the household	Relationship to Head of Household	Social Security Number	Date of Birth	Sex
	Head of Household			

RESIDENTIAL HISTORY

***PRESENT ADDRESS:** _____ City _____ State _____ Zip _____
Present Telephone or Msg # _____ Length of time at present address _____
Present Landlord or Mortgage Holder _____ Phone # _____
Amount of rent _____ Reason for wanting to move _____

***PREVIOUS ADDRESS:** _____ City _____ State _____ Zip _____
Previous Landlord or Mortgage Holder _____ Phone # _____
Amount of rent _____ Length of time at previous address _____

Reason for moving _____

Are any of above Landlord's or Mortgage Holders RELATIVES? Yes No If Yes, please explain: _____

Have you or your spouse ever been evicted or asked to move? Yes No If Yes, please explain: _____

Do you have any pets? Yes No If Yes, what type? _____

HEAD OF HOUSEHOLD SOURCE OF INCOME

Employed - Full-Time Part-Time Unemployed Retired Student DSHS

If employed, Name of employer: _____

Employer's Address: _____ City _____ State _____

Employer's Phone #: _____ Position held _____

Supervisor's name: _____ GROSS MONTHLY **WAGE** INCOME: \$ _____

GROSS MONTHLY INCOME FROM ANY OTHER INCOME: \$ _____ TYPE: _____

If Student, List School: _____

Address of school _____ City _____ State _____ Zip _____

Present grade level _____ Expected date of graduation _____

SPOUSE SOURCE OF INCOME

Employed - Full-Time Part-Time Unemployed Retired Student DSHS

If employed, Name of employer: _____

Employer's Address: _____ City _____ State _____

Employer's Phone #: _____ Position held _____

Supervisor's name: _____ GROSS MONTHLY **WAGE** INCOME: \$ _____

GROSS MONTHLY INCOME FROM ANY OTHER INCOME: \$ _____ TYPE: _____

If Student, List School: _____

Address of school _____ City _____ State _____ Zip _____

Present grade level _____ Expected date of graduation _____

BANKING AND CREDIT REFERENCES

Bank Name _____ Checking _____ Savings _____ Loan _____

Credit References	Location	Account Type Charge/Financed	Status (paid in full/Current)

VEHICLES

List ALL vehicles that you own or are purchasing

Year	Make	Model	Color	License Number	State

PERSONAL REFERENCES

First/Last Name	Address	Phone #	Relationship to you	How long known

In case of emergency, notify _____ Phone # _____

Have you, your spouse, or any person residing with you ever been convicted of a Felony?

Yes No If Yes, please explain fully: _____

Please tell us any other information about yourself that might help us evaluate your application:

As the applicant, do you request either a handicap/disability adjustment to income or a special handicapped accessible unit or both? Yes No If Yes, please explain: _____

Are you or your spouse receiving rental assistance or living in an assisted housing project/unit?

Yes No If Yes, please list your address/landlord name & phone number where we can verify your Rental Assistance: _____

AUTHORIZATION

Please read next page very carefully before signing:

The Longview Housing Authority does not discriminate on the basis of race, color, national origin, religion, sex, physical or mental disability, or familial status.

We will make every effort to contact you when a unit becomes available, however, it is your responsibility to keep us informed of your current mailing address and telephone number.

Pets are not allowed in any units without prior written management approval.

I certify that the unit applied for will be my/our household's permanent residence. I/we will not maintain a separate subsidized rental unit in a different location. The foregoing information is true to the best of my/our knowledge. With your signature below you, applicant(s), authorize Longview Housing Authority to obtain credit reports, character reports, criminal records check, rental history and income/employment verification as necessary. It is understood that if this application is accepted, it shall become a part of the Rental/Lease agreement. I/We acknowledge with my/our signature(s) that at any time Longview Housing Authority may release any obtained information to other companies, agencies or landlords regarding income/employment, rental history, household composition, etc.

I have read the above information and disclaimer and understand it.

Head of Household Signature _____ Date _____

Spouse Signature _____ Date _____

<p>The information requested below regarding race/ethnicity is requested in order to assure the Federal government that federal laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age, and handicap are complied with. 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. However, if you choose not to furnish it, the owner is required to note the race/national origin and sex of the individual applicants on the basis of visual observation or surname.</p> <p>Household member name</p>	<p>Race/National origin</p> <p>1 American India or Alaskan Native 2 Asian 3 Black or African American 4 Native Hawaiian or Pacific Islander 5 White</p> <p>Ethnicity = a-Hispanic/Latino or b-Non-Hispanic/Latino</p>

Space below for Office Use Only DO NOT WRITE IN

REFERENCE VERIFICATION	REMARKS	BY
<input type="checkbox"/> Credit Service		
<input type="checkbox"/> Landlord References		
<input type="checkbox"/> Criminal History		
<input type="checkbox"/> Employment		

DISPOSITION OF APPLICATION

APPROVED NOT APPROVED By: _____ Date: _____ **IF NOT APPROVED**, indicate the reasons:

MOVE-IN INFORMATION

Unit Address & Apt # _____

Move in date: _____

Rental Rate \$ _____ Deposit Amount \$ _____ Notes: _____