

STATEMENT OF QUALIFICATIONS Brisas Del Este Apartments May 2023

When you meet the application standards you will have the peace of mind of knowing that you will be joining other residents who have also met strict standards.

If your application meets all the following criteria, you will be approved. If it does not, you may be approved with conditions, which may require you to pay an additional security deposit, or obtain a guarantor (in communities where permitted). If you do not meet the requirements set forth, your application will be denied.

NOTE: We do business in accordance with the Fair Housing Act. It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin, and any other characteristic protect by federal, state, or local law.

APPLICATION SCREENING REQUIREMENTS

<u>A complete application</u>: All lines must be filled in and questions answered for the application to be processed. All applicants over the age of 18 must complete an application, and all occupants over the age of 18 must sign the lease along with the lease holder(s). Any person under the age of 18 must be listed as an occupant on the lease.

<u>Two (2) forms of identification:</u> We require at least one valid government-issued photo identification document (ID) for all applicants over the age of 18. If your social security card is marked **VALID FOR WORK ONLY WITH DHS AUTHORIZATION** and you report income, you must provide the authorization card as well. Social Security cards are required for all HOME Assisted units.

Verifiable rental history: The standard approval process requires verifiable rental history for the last four (4) years. It is your responsibility to provide necessary information that allows us to contact your past landlord(s) for this information. You must have a history of paying your rent on time, have given proper notice, have no dispossessory warrant(s) filed, and must not owe any money to your landlord. If we are unable to verify your previous landlord(s) and/or references, or if you have no rental history, we reserve the right to charge additional security deposit and/or deny your application if the other criteria set forth are not met. Verifiable for these purposes means THIRD PARTY verification from someone other than a relative. We will consider a mortgage as rental history, if it has been active within the past two (2) years. However, if the mortgage is late or in default, you will be asked to give the reason why, show documentation to support the reason, and may be required to pay additional security deposit providing the other criteria set forth are met.

Income eligibility: To become eligible for approval you must meet the monthly requirement set forth by this community which is 3.0 times the tenant paid rent per month. Income will be verified by THIRD PARTY. Some examples include employment verification, the collection of six (6) to 10 consecutive paystubs depending on program requirements, the collection of SSI, SSD, SSA confirmation letters, the collection of legal settlement and divorce agreements, any other legal paperwork reflecting income (i.e. Child Support documentation, the



collection of bank statements (when applicable), and the collection of IRA, 401K, or other asset statements). A complete list of income documentation will be provided to you by the property staff once the initial interview for application is complete.

For applicants that are reporting income from a contributor (a person who makes regular monthly contributions to the applicant), the following applies:

- 50% of income or less from contribution A notarized affidavit from the contributor (form to be provided by office) AND six (6) months bank statements showing the amount of the contribution as a deposit. If the applicant cannot provide bank statements proving the contribution, then the contributor must be added as a GUARANTOR for the leaseholder.
- More than 50% of income from a contribution Supply the above documentation, PLUS the contributor must become a GUARANTOR for the leaseholder and earn at least FOUR (4) times the monthly rent, have verifiable impeccable credit, and score automatic approval (no conditions). Criminal history of guarantors will be considered. Guarantors must complete a *Guarantor Pre-Leasing Application* and pay the applicable application fee. Guarantors must also sign a *Lease Contract Guaranty* which must be signed in person at our office and notarized. Guarantors must sign a new *Lease Contract Guaranty* with each renewal.

<u>Credit History:</u> Credit accounts should have satisfactory ratings and all utility accounts must be current with no balance owing. If credit has been slow but all other qualifications for residency have been met, the application may be conditionally approved with payment of an additional security deposit.

If the bankruptcy has been dismissed or discharged, we may require further information for review but may still approve your application and/or may require additional security deposit.

<u>Criminal background:</u> Criminal background will be reviewed for all adult members of the household who have satisfactorily met all above income, credit, and rental history criteria.

- A history of any criminal conviction is not a denial of a rental application in all cases; criminal history is evaluated based on the nature and time of the conviction, as well as any relevant mitigating information provided by the applicant. Criminal history screening will not consider arrests, charges, expunged convictions, convictions reversed on appeal,offenses where adjudications was withheld or deferred, pardoned convictions, vacated convictions, and sealed juvenile records.
- Felony conviction for 1) the manufacture, sale, or distribution of a controlled substance; 2) arson; or 3) homicide will result in a denial of the application. Current registration as a sexual offender will result in automatic denial of the application.
- If the criminal history screening produces any relevant conviction, you will be given notice of the specific information from the screening that creates the concern and will have an opportunity to provide any additional information for us to consider in the evaluation of your application.

PROPERTY SPECIFIC INFORMATION:

<u>Maximum Occupants:</u> One Bedroom – Two (2) Persons, Two Bedroom – Four (4) Persons.



Pet Policy: We allow up to two (2) pets per apartment. Dogs must be 50 lbs. or less. We do not allow breeds that are classified as aggressive, as pets including but not limited to: American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, Bull Terrier, Rottweiler, Chow Chow, Great Dane, Doberman Pincher, German Shepherd, Caucasian Ovcharka, Dogo Argentino, Saint Bernard, Fila Brasileiro, Perro De Presa Canario, Akita Inu, Husky, Bull Mastiff. All pets must be listed on your application and registered with the office. We also require that immunizations are up to date and a photo of your pet for the file. Additional information and requirements are available on the Animal Addendum and may be reviewed prior to moving in by request. We comply with all fair housing laws regarding Assistance Animals. No animal is permitted on the premises without prior written authorization from management.

Please refer to this community's Statement of Qualifications addendum for additional qualifying standards and fees/deposits.

I acknowledge the receipt of this screening/application criteria document:

Applicant Signature

Print Name

Date



TRG Affordable Qualifying Criteria pg. 3



STATEMENT OF QUALIFICATIONS ADDENDUM Brisas Del Este Apartments, LLC May, 2023

Fees/Deposits

- Application Fee \$85 per adult over the age of 18
- Application Deposit equal to one month's full rent (may or may not be refundable)

 Applications approved with conditions will be subject to an additional security deposit.
- Pet fee \$350 per pet (no-refundable)
- Pet Rent \$35 per month per pet

Rent Range (subject to change)

- 1 Bedroom 50% Rent starting from: \$875.
- 2 Bedrooms 50% Rent starting from: \$1,046.
- 1 Bedroom 60% Rent starting from: \$1,122.
- 2 Bedrooms 60% Rent starting from: \$1,342.
- 1 Bedroom 80% Rent starting from: \$1,510.
- 2 Bedrooms 80% Rent starting from: \$1,807.

MINIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

1 Bedroom 50%: \$31,500	1 Bedroom 60%: \$30,392	1 Bedroom 80%: \$54,360
2 Bedrooms 50%: \$37,656	2 bedrooms 60%: \$48,312	2 Bedrooms 80%: \$65,052

MAXIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

1 Person 50%: \$36,150	1 Person 60%: \$43,380	1 Person 80%: \$57,840
2 Persons 50%: \$41,300	2 Persons 60%: \$49,560	2 Persons 80%: \$66,080
3 Persons 50%: \$46,450	3 Persons 60%: \$55,740	3 Persons 80%: \$74,320
4 Persons 50%: \$51,600	4 Persons 60%: \$61,920	4 Persons 80%: \$82,560

NOTE: Rent and Income levels are based on the 2023 Area Median Incomes published by HUD on 5/15/2023. The rental rates will be officially published by FHFC at a later date and may differ slightly from our projected rates.

I acknowledge the receipt of this document:

Applicant Signature:

Print Applicant Name: _____

Today's Date: _____





Required Documentation

Please bring the following documents upon returning application:

- Identification card and or driver license.
- Social Security card.
- Marriage certificate in English (If applicable).
- Proof if income last 6 consecutive paystubs (If applicable).
- Recent Social Security letter, Disability letter, or pension letter required. (Only English)
- If self-employed; notarized letter required along with 2 years of income taxes (If applicable).
- Last 6 months checking account bank statements.
- Last savings account bank statements.

Por favor traiga los siguientes documentos al devolver la solicitud:

- Tarjeta identificación o licencia de conducir.
- Tarjeta de seguro social.
- Certificado de matrimonio (En inglés) si aplica.
- Comprobante de ingresos últimos 6 recibos de sueldo (Si aplica)
- Carta reciente de la seguridad social o pensión. (En inglés)
- Si trabaja por cuenta propia, requiere una carta notarizada y dos anos de impuestos.
- Últimos 6 estados de cuenta bancarios, cuenta de cheques.
- Ultimo estado de cuenta de ahorros.





RENTAL APPLICATION FOR RESIDENTS AND OCCUPANTS

(Each co-applicant and each occupant 18 years old and over must submit a separate application.)



Date when filled out:

All applicants who indicate that they are not U.S. citizens will be asked to complete the supplemental questions in this Rental Application, unless otherwise noted. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap or familial status. The purpose of the supplemental questions is:

- 1. to give you the option to furnish information about an emergency contact person for you in your home country;
- 2. to verify that you are lawfully in the United States;
- 3. to determine whether your right to be in the U.S. expires during your Lease Contract term; and
- 4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing your responses to the supplemental questions with anyone except government officials who might inquire about you.

APPLICANT INFORMATION	
Full Name (Exactly as it appears on Driver's License or Govt. ID card	d)
Former Name (if applicable)	Gender (Optional)
Birthdate Social Security #	Driver's License # State
Government Photo ID card #	Туре
Home Phone Number Cell Phone Numb	ber Work Phone Number
Email Address	
•• – • – •	l (If the "Required" box is checked, please answer the following ed, the following questions are not required and are optional.)
Have you ever been asked or ordered by a representative of any	r government to leave the U.S. or any other country? 🗋 yes 🔲 no
If yes, please state when and what country or countries (list all):	
Are you a U.S. citizen? 🗋 yes 🛛 no	
Approximately how long have you been in the United States?	
Place of Birth Country or co	
Please check the U.S. Citizenship and Immigration Services (US	
	Card] (form includes photo and fingerprint). Card Number:
	o and fingerprint). Expiration Date: Card Number:
	erprint). Expiration Date: Form Number:
USCIS receipt for replacement of one of the above documents, with	
If you are relying on Form I-94, we will ask to see your passport	
	Your Passport Number:
Expiration Date:	
	work visitor other (specify):
Visa Expiration Date:	
We may ask to make a photocopy of any of the USCIS document	ts checked above and, if needed, your passport and visa.
Marital Status: 🗋 single 🗋 married 🗋 widowed 🗋 separated	Do you or any occupant smoke? 🔲 yes 🔲 no
I am applying for the apartment located at:	
Is there another co-applicant? Uses Ino	
Co-applicant Name	
Email	
Co-applicant Name	
Email	
Co-applicant Name	
Email	
Co-applicant Name	
Email	
Co-applicant Name	
Email	

OTHER OCCUPANTS			
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		e "Required" box is checked, please answer the follow ked, the following questions are not required and are	
•	l or ordered by a representative of an buntry or countries (list all):	ny government to leave the U.S. or any other country? 🗋 yes	s 🗋 no
Is this occupant a U.S. citizen? 🗋 y			
Place of Birth	Country or countries	of which occupant is a citizen (list all):	
Please check the U.S. Citizenship a	and Immigration Services (USCIS) do	ocument that entitles the occupant to be in the United States	:
		form includes photo and fingerprint). Card Number:	
		ngerprint). Expiration Date: Card Number: Expiration Date: Form Number:	
		cation by USCIS of your entitlement above.	
		, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date:			
Visa Expiration Date:		work visitor other (specify):	
•		ked above and, if needed, occupant's passport and visa.	
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		• "Required" box is checked, please answer the follow ked, the following questions are not required and are	
Has this occupant ever been asked If yes, please state when and what co Is this occupant a U.S. citizen?	I or ordered by a representative of an ountry or countries (list all):	ny government to leave the U.S. or any other country? Q yes	
Place of Birth	Country or countries	of which occupant is a citizen (list all):	
Please check the U.S. Citizenship a	and Immigration Services (USCIS) do	ocument that entitles the occupant to be in the United States	:
Given Form I-551 Permanent Resident C	ard [Alien Registration Receipt Card] (f	form includes photo and fingerprint). Card Number:	
		ngerprint). Expiration Date: Card Number:	
		Expiration Date: Form Number: cation by USCIS of your entitlement above.	
		and you will need to answer the questions below.	
		Passport Number:	
Expiration Date:			
Does occupant have a visa? yes Visa Expiration Date:		work visitor other (specify):	
We may ask to make a photocopy	of any of the USCIS documents chec	ked above and, if needed, occupant's passport and visa.	
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		e "Required" box is checked, please answer the follow ked, the following questions are not required and are	
		ny government to leave the U.S. or any other country? 🗋 yes	s 🗋 no
Is this occupant a U.S. citizen?		Voars Months	
		of which occupant is a citizen (list all):	
	-	ocument that entitles the occupant to be in the United States	:
		form includes photo and fingerprint). Card Number:	
		ngerprint). Expiration Date: Card Number:	
Global Entry Form (form	does not include photo or fingerprint).	Expiration Date: Form Number:	
USCIS receipt for replacement of one of the above documents, with verification by USCIS of your entitlement above.			
If relying on Form I-94, we will ask to see occupant's passport and visa, and you will need to answer the questions below. Country issuing passport: Passport Number:			
Expiration Date:			
Does occupant have a visa? yes Visa Expiration Date:	no If yes, what type? I student	work visitor other (specify):	
•	 of any of the USCIS documents chec	ked above and, if needed, occupant's passport and visa.	

OTHER OCCUPANTS (conti	nued)		
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		If the "Required" box is checked, please answer the fol checked, the following questions are not required and a	
Has this occupant ever been asked If yes, please state when and what c Is this occupant a U.S. citizen?	d or ordered by a representative ountry or countries (list all): yes 🔲 no	tes? Years Months	
		ntries of which occupant is a citizen (list all):	
	-	S) document that entitles the occupant to be in the United Sta	
 Form I-551 Permanent Resident C Form I-766 Employment Authorizati Form I-94 Global Entry Form (form 	Card [Alien Registration Receipt Ca on Document (form includes photo a n does not include photo or fingerp	ard] (form includes photo and fingerprint). Card Number: and fingerprint). Expiration Date: Card Number: print). Expiration Date: Form Number: verification by USCIS of your entitlement above.	
If relying on Form I-94, we will ask	to see occupant's passport and	l visa, and you will need to answer the questions below.	
		Passport Number:	
		lent 🔲 work 🔲 visitor 🛄 other (specify):	
Visa Expiration Date:		checked chave and if peopled conversion account and vice	
we may ask to make a photocopy	of any of the USCIS documents	checked above and, if needed, occupant's passport and visa	
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		If the "Required" box is checked, please answer the fol checked, the following questions are not required and a	
If yes, please state when and what constrained by the state of the sta	ountry or countries (list all): yes 🔲 no	e of any government to leave the U.S. or any other country?	yes 🗋 no
		ntries of which occupant is a citizen (list all):	
	-	S) document that entitles the occupant to be in the United Sta	ates:
Form I-551 Permanent Resident C	Card [Alien Registration Receipt Ca	ard] (form includes photo and fingerprint). Card Number:	
Form I-766 Employment Authorizati	on Document (form includes photo a	and fingerprint). Expiration Date: Card Number:	
		print). Expiration Date: Form Number:	
		verification by USCIS of your entitlement above.	
		I visa, and you will need to answer the questions below.	
Expiration Date:		Passport Number:	
·	s 🗋 no If yes, what type? 🗋 stude	lent 🗋 work 🗋 visitor 🗋 other (specify):	
•		checked above and, if needed, occupant's passport and visa	
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		If the "Required" box is checked, please answer the fol checked, the following questions are not required and a	
Has this occupant ever been asked If yes, please state when and what co Is this occupant a U.S. citizen?	ountry or countries (list all):	e of any government to leave the U.S. or any other country? 🗌	yes 🗋 no
		tes? Years Months	
	-	ntries of which occupant is a citizen (list all):	
		IS) document that entitles the occupant to be in the United State ard] (form includes photo and fingerprint). Card Number:	
		and fingerprint). Expiration Date: Card Number:	
Global Entry Form (form	n does not include photo or fingerp	print). Expiration Date: Form Number:	
— · ·		verification by USCIS of your entitlement above.	
Country issuing passport:		I visa, and you will need to answer the questions below Passport Number:	
Expiration Date:	D no. If you what type? Detuid	lent 🔲 work 🔲 visitor 🔲 other (specify):	
Visa Expiration Date:			
we may ask to make a photocopy	or any or the USCIS documents	checked above and, if needed, occupant's passport and visa	

RESIDENCY INFORMATION					
Current Home Address (where you live now)					Do you 🗋 rent or
City		State	Zip C	Sode	own?
Dates: From	То		·	<u>\$</u> Monthly Payment	
Apartment Name					
Landlord/Lender Name				Phone	
Reason for Leaving					
(The following is only applicable if at current addr	ress for less than 6 months.)				
Previous Home Address					Do you 🖵 rent or
City		State	Zip C	Code	own?
Dates: From				<u>\$</u> Monthly Payment	
Apartment Name					
Landlord/Lender Name					
				Phone	
Reason for Leaving					
EMPLOYMENT INFORMATION					
Present Employer		Address			
City		State	Zip Code	Work	<pre>< Phone</pre>
Dates:				\$	
From	То			Gross Monthly Income	
Position					
Supervisor Name				Phone	
(The following is only applicable if at current emp	loyer for less than 6 months.)				
Previous Employer		Address			
City		State	Zip Code		<pre>< Phone</pre>
Dates: From	То			<u>\$</u> Gross Monthly Income	
Position					
Supervisor Name				Phone	
ADDITIONAL INCOME					
(Income must be verified to be considered)			<u></u>		
Туре	Source		\$ Gros	ss Monthly Amount	
Туре	Source		\$ Gros	ss Monthly Amount	
CREDIT HISTORY (if applicable)					
If applicable, please explain any past credit probl	em:				
RENTAL/CRIMINAL HISTORY					
(Check only if applicable) Have you or any occupant listed in this Applicatio	n ever:				
been evicted or asked to move out?moved out of a dwelling before the end of the	e lease term without the owner	r's consent?			
declared bankruptcy?		3 consent:			
 been sued for rent? been sued for property damage? 					
been convicted (or received an alternative for violence to another person or destruction of		to conviction)	of a felony,	misdemeanor involving a	controlled substance,
Please indicate the year, location and type of ea property, or sex crime other than those resolved to					
answer is "no" to any item not checked above.					·

REFERRAL INFORMATION			
How did you find us?			
Online search. Website address:			
 Referral from a person. Name: Social Media. Which one? 			
Other			
EMERGENCY CONTACT			
Emergency contact person over 18, who will not l	be living with you:		
	to ming manyou.		
Name		Relationship	
Address		City	
State Zip Code	Home Phone #		Cell Phone #
State Zip Code	Home Phone #		Cell Phone #
Work Phone #	Email Address		
VEHICLE INFORMATION (if applicable)		
List all vehicles owned or operated by you or any oc	,	motorcycles trailers etc.)	
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
PET INFORMATION (<i>if applicable</i>)			
			your requested animal, you must sign a separate
animal addendum, which may require additional of	deposits, rents, lees of other c	inarges.	
Name	Туре		Breed
	Туре		
Gender	Weight		Color
Age	Assistance Animal Status:) yes 🔲 no	
	-		
Name	Туре		Breed
Gender	Weight		Color
<u>Ago</u>	Assistance Animal Status:) yes 🔲 no	
Age			
APPLICATION AGREEMENT			
	ere are some provisions that	t may become applicable	Lease Contract. While some of the information e prior to signing a Lease Contract. In order to
	ntract contemplated by the particular	-	ease Contract. Special information and conditions
2. Approval When Lease Contract Is Signed in Application, our representative will notify you	in Advance. If you and all co (or one of you if there are co	o-applicants) of our appro-	signed the Lease Contract when we approve the val, sign the Lease Contract, and then credit the the Lease Contract when the Lease Contract has
3. Approval When Lease Contract Isn't Yet Sig our representative will notify you (or one of you	u if there are co-applicants) of	the approval, sign the Lea	Lease Contract when we approve the Application, ase Contract when you and all co-applicants have or other amounts owed under the Lease Contract

- 4. If you Fail to Sign Lease Contract After Approval. Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
- 5. If You Withdraw Before Approval. If you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.
- 6. Approval/Non-Approval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail, or by e-mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.

APPLICATION AGREEMENT (continued)

- 7. Refund after Non-Approval. If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
- 8. Extension of Deadlines. If the deadline for signing, approving, or refunding under paragraphs 4, 6, or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
- 9. Keys or Access Devices. We'll furnish keys and/or access devices only after: (1) all parties have signed the Lease Contract and other rental documents; and (2) all applicable rents and security deposits have been paid in full
- 10. Application Submission. Submission of a rental application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease Contract.

DISCLOSURES

- 1. Application Fee (Non-Refundable). You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph 3. Payment of the application fee does not guarantee that your application will be accepted. The application fee partially defrays the cost of administrative paperwork. It is non-refundable.
- 2. Application Deposit (may or may not be refundable). In addition to any application fee(s), you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed; OR, it will be refunded under paragraph 7 of the Application Agreement if your application is not approved; OR, it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraphs 4 or 5 of the Application Agreement.
- 3. Fees Due. Your Rental Application will not be processed until we receive your completed Rental Application (and the completed Rental Application of all co-applicants, if applicable) and the following fees:
 - 1. Application fee (non-refundable): \$ 85.00
 - 2. Application deposit (may or may not be refundable): \$_ 250.00
- 4. Completed Application. Your Rental Application for Residents and Occupants will not be considered "completed" and will not be processed until we receive the following documentation and fees:
 - 1. Your completed Rental Application:
 - 2. Completed Rental Applications for each co-applicant (if applicable);
 - 3. Application fees for all applicants;
 - 4. Application deposit for the Unit.
- 5. Notice to or from Co-Applicants. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
- 6. SHIP Disclosure Statement. If this property or you are a tenant who may be receiving funds from the Florida State Housing Initiatives Partnership program (SHIP), then this application is subject to the Florida's public records laws, Chapter 119, Florida Statutes. Most of the information that you provide may be required to be released if there is a public records request. If you believe that you qualify to have your information protected, you must notify us in writing of the specific law or statute that protects your information. All non-exempt information will be released in response to a public records request.

AUTHORIZATION AND ACKNOWLEDGMENT

AUTHORIZATION

lauthorize Brisas Del Este Apartments LLC

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

Payment Authorization

lauthorize Brisas Del Este Apartments LLC

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

Non-Sufficient Funds and Dishonored Payments.

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

- Applicant shall pay to us the NSF Charge; and (i) (ii)
 - We reserve the right to refer the matter for criminal prosecution

ACKNOWLEDGMENT

You declare that all your statements in this Application are true and complete. You authorize us to verify the same through any means. If you fail to answer any question(s) or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease Contract, the rules, and financial obligations.

Date

Unit # or type

Phone

Applicant's Signature

FOR OFFICE USE ONLY

Apt. name or dwelling address (street, city)

Person accepting application

Phone Person processing application Applicant or Co-applicant was notified by 🗋 telephone 🗋 letter 🗋 email, or 🗋 in person of 🗋 acceptance or 🗋 non-acceptance on

(Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.)
Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):

Name(s)

Name of owner's representative who notified above person(s)

ADDITIONAL COMMENTS



MARITAL & ESTRANGEMENT DECLARATION

Sworn Declaration of Marital Status and Declaration of Estrangement Addendum to the Application

One form per adult, minimum is required. One form per Marriage / Divorce must be completed. Property: ______Paseo Del Rio, LLC.

Please complete either "A", "B", "C", "D" or "E" below as appropriate with regard to your marital status:

PART A:

I, _____, duly state that I am currently legally separated from my spouse and have attached a copy of my divorce decree, current legal separation agreement, or letter from my attorney.

PART B:

I, _____, duly state that I am currently separated from my spouse, but have NOT taken any legal action with regard to my marital status. I hereby state that the following conditions apply:

MY REASONS FOR NOT PURSUING LEGAL ACTION ARE AS FOLLOWS:

For example: restraining order, fear of retaliation, incarceration, religious beliefs, or other reason explained.

If separated but not divorced, for the above reason, please read and complete the estrangement section below:

1. I am separated and estranged from my spouse

Full Name of Estranged Spouse:

I further certify that I do not intend to reconcile with my spouse.

- 2. If reconciliation occurs, my spouse will not be permitted to reside with me in the above referenced development, unless at lease twelve months have elapsed since the beginning of the initial lease term.
- 3. If reconciliation occurs prior to expiration of the twelve months time frame cited above, and my spouse wishes to reside with me in the above referenced development, our entire household must re qualify as a new household.

Please select one of the options below to address potential child support for the next 12 months:

 I have children with my separated spouse and <u>I do not</u> anticipate filing for or receiving child support
in the next 12 months.
 I have children with my separated spouse and <u>I do</u> anticipate filing for or receiving child support in the
next 12 months and I have attached verification of the anticipated child support.
 I do not have children with my separated spouse and will not be receiving any child support.

PART C:

I, _

_____, duly state that I am widow/widower

PART D:

I, _____, have never been married.

PART E:

I, ____

_____, and my spouse, ______ will both reside in the above referenced development.

REPORTING AND LEASE REQUIREMENTS:

I will report any and all changes to my living situation. This includes, but is not limited to, changes in my income, asset sources, household composition and marital status. I will not allow my spouse or any other individual to move into my residence, without PRIOR approval with management.

Under penalty of perjury, I certify that the information presented in this declaration is true and accurate to the best of my knowledge. The undersigned further understands that providing false representations herein constitutes and act of fraud. False, misleading or incomplete information may result in termination of a lease agreement.

Signature of Applicant/Tenant	Printed Name of Applicant/Tenant	Date
Signature of Applicant/Tenant	Printed Name of Applicant/Tenant	Date

Revised 9-10

General Instructions:

This form is to be complete by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing & Urban Development. Owner & agents are required to offer the applicant/tenant the option to complete this form. This form is to be completed at initial application or at lease signing. In-Place tenants must also be offered the opportunity to complete the form as part of their next interim or annual recertification. Once the form is completed it need not be completed again unless the Head of House hold or household composition changes. There is no penalty for persons who do not complete the form. However, the owner/agent may place a note in the file stating that the applicant/tenant refused to complete the form. **Parent/Guardians are to complete the form for children under the age of 18.**

The Office of Housing as been issued permission to use this form to gather race & ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together & placed in the Household's file.

	PART XI - STATISTICAL	DATA		
For Office Use: Hou	isehold elected not to participate.			
New Households				
Prior Housing Information (Answer for household head)				
Monthly rent payment				
Monthly house payment				
ZIP Code				
All Households			Household Information	
Current Employment (Answer for household head)	Primary Transportation Mode (Answer for household head)	A member of (Check all that	f the household: <i>t Apply)</i>	
Occupation	Motor vehicle	Receives Me	dicare benefits	
ZIP Code	Public transportation	Receives Me	dicaid benefits	
		Is a Person V	Vith a Disability	
	Other			
Racial Categories* (Select All That A		Total Number of Household Members Per Category	Total Number of Hispanic or Latino Household Members	
American Indian or Alaska Native				
Asian				
Black or African American				
Native Hawaiian or Other Pacific Isla	ander			
White				
American Indian or Alaska Native a	nd White			
Asian and White				
Black or African American and White	e			
American Indian or Alaska Native an	nd Black or African American			
Asian and Black or African American	n			
Other mutiple race combination				
	TOTALS			
* Definitions				
Person With a Disability Lit	person who has a mental or physical impairmed fe Activities; has a record of such impairment; unctions such as caring for one's self, performiting, standing, lifting, reaching, thinking, conce	or is regarded as having manual tasks, walk	ng such an impairment. ing, seeing, hearing, speaking	, breathing,
Major Life Activities we	orking.			
Hispanic or Latino re	person of Cuban, Mexican, Puerto Rican, Sou gardless of race. The term "Spanish origin" ca person not of Cuban, Mexican, Puerto Rican	an be used in addition	to "Hispanic" or "Latino."	0
Not-Hispanic or Latino re	A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.			
	person having origins in any of the original per ho maintains tribal affiliation or community atta		th America (including Central	America), and
А	person having origins in any of the original per	oples of the Far East,		
	r example, Cambodia, China, India, Japan, Ko etnam.	rea, Malaysia, Pakista	n, the Philippine Islands, Thail	land, and
А	person having origins in any of the black racia	I groups of Africa. Ter	ms such as "Haitian" or "Negr	o" can be used
	addition to "Black" or "African American." person having origins in any of the original per	oples of Hawaii. Guam	. Samoa. or other	
or Other Pacific Islander Pa	acific Islands.	•	, ,	
	person having origins in any of the original per orth Africa.	oples of Europe, the M	iddle East or	
`				

Public reporting burden for this collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data resources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits and voluntary. HUD may not collect this information, and you are to required to complete this form, unless it displays a currently valid OMB control number. This information is authorized by the U.S. Housing Act of 1937 as amended, the Housing and Urban Rural Recovery Act of 1983 and housing and Community Development Technical Amendments of 1984. This information is needed to be incompliance with OMB-mandated changes to Ethnicity and Race categories for recording the 50059 Data Requirements to HUD. Owners/agents must offer the opportunity to the head and co-head of each household to "self certify" during the application interview or lease signing. In-place tenants must complete the format as part of their next interim or annual recertification. This process will allow the owner/agent to collect the needed information on all members of the household. Completed documents should be stapled together for each household and place in the household's file. Parents or guardians are to complete the self-certification for children under the age of 18. Once system development funds are provided and appropriate system upgrades have been implemented, owners/agents will be required to report the race and ethnicity data electronically to the TRACS (Tenant Relations Assistance Certification System). This information is considered non-sensitive and does not require any specific protection.

I/We, _

, by signing below certify that I/We

\Box Have provided the information listed above

 \Box Elected not to provide the information listed above

I certify all information is true and accurate to the best of my knowledge.

Applicant Addendum Questionnaire Applicant Name: _____

<u>YES</u>	<u>NO</u>	
0	0	1. Do you have full custody of your child(ren)? (If no, obtain proof of amount of time child{ren} will be living in unit.)
		Explanation:
ο	o	 Are there any absent household members who under normal conditions would live with you? (For example, a spouse away in the military or child away in school.) Explanation:
0	0	3. Do you expect any changes to your household composition in the next 12 months? Explanation:

Income Information

Income is counted for anyone 18 or older (unless legally emancipated). However, if the income is unearned income such as a grant or benefit, it is counted for all household members including minors.

Include all income anticipated for the next 12 months. Do YOU receive OR expect to receive income from any of the following sources?

<u>YES</u> o	<u>NO</u> 0	4.	Employment wages or salaries? (In		
			<u>Company Name:</u>	<u>Address:</u>	Monthly Gross Amount
			Telephone Number	Fax Number	HR Contact Name
0	o	5.	Self-employment? (Include overtime, tip Type of Business	os, bonuses, commissions and payments of <u>NET Income</u>	received in cash.)
0	o	6.	Regular pay as a member of the As Base Name & Branch	rmed Forces/Military? <u>Gross Amount</u>	
0	o	7.	Unemployment benefits? Or work <u>Unemployment Amount</u>	aman's compensation? <u>Workman's Compensation</u>	
0	o	8.	Public Assistance, General Relief, (TANF)? Type of Assistance	AFDC or Temporary Assistan <u>Amount</u>	ce for Needy Families
o	o	9.		whether is received or not unless legal o court-ordered rather received directly f <u>Payor</u>	
0	0		(b) Alimony? If yes, Name of Payor as	nd Amount	
o (If yes, ob	o otain court oers)			but not actually received, are you taki	
0	0	10.	Social Security, SSI or any other p <u>Type of Payment</u>	ayments from the Social Secur <u>Monthly Amount</u>	ity Administration?

Yes	<u>NO</u>			
0	ο	11.	Regular payments from a Veteran's benefit, pension, retiremen	t benefit or annuities?
			Type of Payment Source of Benefit	Monthly Amount
0	0	12.	Toganar paginonio non a severance paenager	
			Source of Payment Amount	
0	0	13.	Regular payments from any type of settlement? (For example, insure Source of Payment Amount	unce settlements.)
0	0	14.	Source of Payment Monthly Amount	!?
0	0	15.	Source of Payment Amount	
ο	0	16.	Regular payments from rental property or other types of Real I	Estate transactions?
			Source of Payment <u>Amount</u>	
0	0	17.	Any other income sources or types not listed? (Please include below) Source of Payment Amount	
		18.		~9
0	0	10.	Do you expect any changes to your income in the next 12 month Explanation:	8.

If you DO NOT receive any income from any of the sources listed above and you are a Zero Income applicant/resident, please add your initials here _____

1

Asset Information					
Include all assets held and the income derived from the asset. INCLUDE ALL ASSETS HELD BY ALL HOUSEHOLD MEMBERS INCLUDING MINORS.					
			Do YOU	hold:	
<u>YES</u>	<u>NO</u>				
0	O	19.	Checking or savings account? (C <u>Type of Account</u>	Checking must have last 6 months ave <u>Financial Institute</u>	rage balance, saving current) <u>Amount AND Interest Rate</u>
o	o	20.	CDs, money market accounts or <u>Type of Account</u>	r treasury bills? <u>Financial Institute</u>	Amount
o	o	21.	Stocks, bonds or securities? <u>Type of Account</u>	<u>Company or Broker</u>	Amount
o	o	22.	Trust Funds? <u>Type of Account</u>	Financial Institute	Amount
		-			

Yes	<u>No</u>				
o	o	23.	Pensions, IRAs, Keogh or other <u>Type of Account</u>	retirement accounts? <u>Financial Institute</u>	<u>Amount</u>
o	o	24.	Whole life insurance policy? <u>Insurance Carrier</u>	<u>Telephone Number</u>	<u>Amount</u>
o	o	25.	Real estate, rental property, land holdings? (This includes your personal residence, mo <u>Address of Property</u>		
0	0	26.	Personal property held as an inv (This includes paintings, coin or stamp col- include your personal belongings such as y <u>Item</u>	lections, artwork, collector or show cars	, and antiques. This does not
o	o	27.	A safe deposit boxes? <u>Financial Institute</u>	Amount	
0	0	28.	Do you have any cash on hand?	If yes, how much?	
ο	ο	29.	Do you have any cash on hand? If yes, how much? Have you or any other household members disposed of or given away any asset(s) for LESS than fair market value within the past 2 years?		
			Household Member:	Amount:	
			Student Status	Information:	
0	0	30.	Are you or anyone in your house recent class schedule including the words <u>Household Member</u>		please provide a copy of the most
0	0	31.	Are you or anyone in your house recent class schedule including the words <u>Household Member</u>	ehold a part time student? (if yes "Part Time") <u>Financial Institute</u>	s, please provide a copy of the most

Signature Clause

I understand that management is relying on this information to prove my household's eligibility for the Housing Credit Program. I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application. I also understand that such action may result in criminal penalties.

I authorize my consent to have management verify the information contained in this application addendum for purposes of proving my eligibility for occupancy. I will provide all necessary information including source names, addresses, phone numbers, account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent on meeting management's resident selection criteria and the Housing Credit Program requirements.

Please sign and date below:

Printed Name

Date

Signature