Residential Application



It is the policy of BCACHA to see that every individual, regardless of race, religion, color, sex, age, national origin, familial status, gender identity, sexual orientation, or disability shall have equal opportunity in accessing affordable housing. If you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please submit a request in writing or contact our office at 208-345-4907.

I am interested in the following properties (check all that apply):

Liberty Park	Vine Terra	ace Shore	line North	Hobbler F	Place Nez l	Perce		
Unit size preference (check all	that apply):	1 bedroo	m 2 bec	droom 3	3 bedroom	4 bedroom		
Applicant Information								
Applicant Name:								
Phone Number:		E	mail:					
Current Address:								
Date of Birth:	Social Securi	ty Number:						
Employer:		Occupa	tion:					
Business Address:				En	nployer Telep	hone:		
Monthly Gross Income:		Length of	femployme	nt:				
Have you ever been evicted?	Yes	No Have yo	u ever willfu	ally or intent	tionally refuse	ed to pay rent?	Yes	No
Have you ever been convicted	of a felony?	Yes	No Are	you curren	tly using illeg	al drugs?	Yes	No
Have you ever been convicted	of sale, distrib	ution, or pos	session of ill	egal drugs?	Yes	No		
Co-Applicant Name:								
Phone Number:		E	mail:					
Current Address:								
Date of Birth:	Social Securi	ty Number:						
Employer:		Occup	ation:					
Business Address:				En	nployer Telep	hone:		
Monthly Gross Income:			Length of E	mployment	:			
Have you ever been evicted?	Yes	No Have yo	ou ever willf	ully or inter	itionally refus	ed to pay rent?	Yes	No
Have you ever been convicted	of a felony?	Yes	No Are you	ມ currently ເ	ısing illegal dı	rugs? Yes	No	
Have you ever been convicted	of sale, distrib	ution, or pos	session of ill	egal drugs?				
*If there are more than two a	pplicants pleas	se use more	pages					



Household Composition

Name	Relationship	Date of Birth	Social Security #	Full-time student?

Do you own pets? Yes No

If yes, please describe:

Anticipated Income

Please detail the monthly-anticipated income for all adult household members.

Type of Income	Name	Name	Name	Name
	Age	Age	Age	Age
Wages, salaries, tips,				
commissions, bonus,				
etc.				
Net income from a				
business				
Social Security				
benefits				
Alimony or child				
support				
Unemployment				
compensation				
Income from Assets				
Other (please list)				
Other (please list				
Totals:				

Additional Documentation

In addition to this application, you will need to provide the following verifications:

- Copy of Identification for all adults in the household acceptable forms include state-issued driver's license, state-issued ID, passport, school ID (approval at BCACHA discretion)
- Verification of income for all adults 60 days of pay stubs, a current Social Security award letter, or other pertinent documentation





Automobile Information

Make:	Model:	Color:	Year:	License #:
Make:	Model:	Color:	Year:	License #:

Emergency Contact Information

Name:	Phone Number:	Relationship:
Name:	Phone Number:	Relationship:

Rental Criteria & Policies

When screening applicants for occupancy, the following factors are considered and may be cause for denial:

- An unsatisfactory credit report can disqualify an applicant from renting an apartment home. Unsatisfactory credit includes bad debts, unpaid bills, liens, judgments, evictions, or bankruptcies. The applicant will be informed of the reason for the rejection and the name, address, and telephone number of the credit-reporting agency from which the information was obtained. BC/ACHA will not discuss the contents of the credit report with the applicant. All applicants are subject to the other criteria for qualification.
- Applicants who can provide evidence of currently paying bills and the ability to pay the required rent will be regarded as having marginal credit history. A determination of marginal credit history may result in the applicant meeting credit criteria.
- Monthly rent shall not exceed 40% of the resident's gross monthly income. Section 8 Voucher Program
 participants will follow HUD guidelines for income qualifications. Self-employed applicants must provide
 written verification of at least two previous years income. Tax returns are acceptable documentation. Income
 from sources other than employment may be acceptable for qualifying purposes if documentation is provide
 indicating the amount and regularity.
- References will be required from present and previous landlords (who are not related by blood or marriage) for a minimum of three years prior to application. An applicant can be rejected if there has been a failure to make rental payments in a timely manner; a history of poor housekeeping; responsibility for disturbing the safety, security, and right to peaceful enjoyment of other residents, or lack of sufficient notice to vacate or damages.
- A background check will be obtained for all applicants. Background reports with evictions or criminal reports with felony or drug convictions (including a plea of guilty) or a history of involvement in criminal conduct may disqualify the applicant from renting an apartment home.
- Any information found to be falsified on the application will immediately disqualify any applicant from renting an apartment home.

Co-Signers: A co-signer may be permitted in those instances where the applicant cannot provide adequate rental history. The Co-signer must fill out an application and meet all income and qualifying criteria. A co-signer will be fully responsible for the lease if the occupying resident defaults.

Roommates: Each must qualify individually, each is fully responsible for the entire rental amount, and each must sign the lease and all other addenda.





Occupancy: No more than two people per bedroom plus one may occupy any apartment home. Household members under the age of two are exempt.

Pets: No pets shall be brought on the Premises or the Development without the prior written consent of Management and if such consent is granted, resident will be required to pay in advance a pet deposit and sign a Pet Addendum to the lease. If a support animal is needed, the applicant must provide third-party verification. Support animals do not require a deposit.

Security Deposit: The security deposit varies according to apartment size. The non-refundable portion of the security deposit will be applied to restoring window and floor coverings to move-in condition upon vacating the apartment home.

I/We have read and understand the above rental criteria and policies (all adults please initial):

Applicant Certification

Please note this application is a preliminary application. Additional information may be requested at a later date to complete the processing of applications. I/we understand that the above information is being collected to determine my/our eligibility. I/we authorize the Agent to verify all information provided on this application and to contact previous or current landlords, other sources for credit and verification information.

I/we certify that the statements made in this application are true and complete to the best of my/our knowledge and belief. I/we understand that false statements of information are punishable under Federal law.

All adults in the household must sign

Applicants Signature:	Date:
Co-applicants Signature:	Date:
Co-applicants Signature:	Date:
Co-applicants Signature:	Date:





Rental Verification

Applicant: The Boise City/Ada County Housing Authorities require <u>3 years</u> of landlord history – you will need to complete a verification for each landlord within that time. You may request additional forms if you need them. Please complete the top section of this form and return it to BC/ACHA. We will submit it to your previous landlord.

Landlord Name:		_	
Landlord Address:			
Phone Number:	Fax Number:		
Applicant Name:	SSN:		
Address of Rental:	City:	State:	Zip:
APPLICANT RELEASE: I hereby authorize the	release of the requested inform	ation via this fax	ed or mailed document.
Information obtained under this consent is l	imited to information that is no	older than 5 yeaı	rs.

Applicant Signature	Date	Co-Applicant Signature	Date

The above applicant has applied to our agency for housing assistance. The applicant has authorized release of their rental history to Boise City/Ada County Housing Authorities. All information provided is confidential. Please fill out and return this form. If you have no record of this tenant, please write "No Record" on this form, sign and return it.

PENALITIES 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 of the owner) may be subject o penalties for unauthorized disclosure or improper uses 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 more mot 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 of employee of HUD or the owner responsibility for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 USC 208((f) (g) and (h). Violations of these provisions are cited as violations of 42 USC 208((f) (g) and (h).

1.	Are you a relative or friend of the applicant?	Yes	No		
2.	Are you this applicant's: Current Landlord	Previc	ous Land	lord	
3.	Dates of Applicant's resident: Move In Date:		Move	Out Dat	e:
4.	Amount of Monthly Rent:				
5.	Does (did) applicant pay rent on time? Yes	Nc)		
6.	Was/Is the applicant listed on the lease for the u	nit?	Yes	No	
7.	Do you have any outstanding balances for this pe	erson?	Yes	No	If yes, balance:





- 8. Did the applicant give proper notice for termination of residency? Yes No
- 9. How was the applicant's housingkeeping during tenancy:
- 10. Has the applicant damaged the unit? Yes No
- 11. Has this applicant had disturbances and/or complaints from neighbors?
- 12. Would you rent to this applicant again? Yes No If no, why?
- 13. Comments or other pertinent information:

Information Verified by

Printed name

Title

Signature

Date

