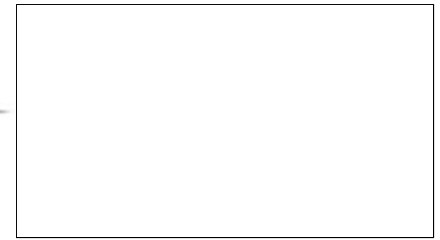




JL GRAY

COMPANY

RENTAL APPLICATION (HUD)



PROPERTY: _____ Apt Size Requested: 0 BR [] 1 BR [] 2 BR [] 3 BR [] 4 BR []

NOTICE TO APPLICANT

All blanks on this application must be completed. If any item does not apply to you, draw a dash to show that you have reviewed it. **This application is INVALID if it is incomplete, unsigned, or completed in pencil.** If additional space is needed to list household information or income, list the information on a separate sheet of paper and attach to this form.

Your Current address:

City State Zip

Your Current Mailing Address:

City State Zip

Phone Number: _____ **E-mail:** _____

HOUSEHOLD INFORMATION

Soc. Security # Name (Last, First, M.I.) Gender Date of Birth Race* Ethnicity*
Household members who do not contend eligible immigration status are not required to disclose SSN

-	-					
-	-					
-	-					
-	-					
-	-					
-	-					

Will anyone under 18 listed above live in the household less than 50% of the time in the next twelve months? Yes [] No []

Was any household member 62 or older on January 31, 2010? Yes [] No [] Name: _____

If Yes, do they have a SSN? Yes [] No []

If No, were they receiving HUD rental assistance at another location on January 31, 2010? Yes [] No []

Choices for Race above are: (1)-American Indian or Alaskan Native, (2)-Asian, (3)-Black or African American, (4)-Native Hawaiian or Pacific Islander, (5)-White

Choices for Ethnicity above are: (a)-Hispanic/Latino, (b)-Non-Hispanic/Latino

Would you or any household member benefit from a unit accessible to individuals with disabilities? Yes [] No []

RENTAL/RESIDENCE HISTORY

Name	Landlord Name	Address	Phone Number	Rent Pd	Move-In Date	Move-Out Date

List all states the applicant and each household Member has resided

Member Name	State(s) household member has resided

Are you currently illegally using or distributing a controlled substance or have you had a previous conviction for the use, manufacture, or distribution of a controlled substance? Yes [] No []

Is any member of the household subject to a lifetime sex offender registration requirement in any state? Yes [] No []



Please note, all adult members will be subject to a National Sex Offender search.

Have you ever been convicted of a crime (other than minor traffic violations)? Yes [] No []
 Have you or any household member ever moved from a rental unit while still owing rent Or been evicted from a rental unit? Yes [] No []
 Are you or any household member receiving HUD Section 8 or any other type of rental assistance? Yes [] No []

STUDENT STATUS

Are **any** members of your household **part-time students or full-time students** in an institution of higher learning? Yes [] No []

ASSETS

Asset Type	Bank or Financial Institution	Balance/Value
Checking Account(s)		\$
EBT / Direct Express		\$
Savings Account		\$
Certificates of Deposit (CD)		\$
Stocks / Bonds		\$
Cash on Hand		\$
TOTAL ASSETS		\$

Do you own a home or other property? Yes [] No []

If Yes, please list type of Property _____
 Estimated Market Value \$ _____
 Mortgage or Outstanding Loan Balance Due \$ _____
 Estimated cost of selling this property \$ _____

Have you sold or disposed of any property or assets within the last 2 years? Yes [] No []

If Yes, type of property or asset _____ Date of transaction _____
 Market Value when sold/dispensed of \$ _____
 Amount sold/dispensed of \$ _____

Do you have any other assets? (Not including personal property such as clothing, furniture, automobiles) Yes [] No []

If Yes, please list item(s) _____ Value \$ _____

HOUSEHOLD INCOME

List all sources of income. This includes, but is not limited to full or part-time wages, salaries, tips, bonuses, net income from operating a business, interest earned, dividends, social security, pensions, SSI, disability, unemployment compensation, workman's compensation, child support, alimony, family assistance, VA benefits, death benefits, retirement funds, Public Assistance, or student financial assistance excluding amount for tuition.

Household Member Name	Source of Income	Gross Income / Month
		\$
		\$
		\$
		\$
Income from Assets		\$
TOTAL Monthly income		\$

Do you anticipate any changes in this income in the next 12 months? Yes [] No []

If Yes, please explain: _____



PERSONAL REFERENCES / EMERGENCY CONTACTS (Minimum Two)

Name	Relationship (friend, relative, co-worker, etc.)	Phone Number

CREDIT HISTORY

List loans, charge accounts, etc. (IMPORTANT: It is a requirement that all Applicants have an acceptable credit report. A bad credit report is grounds for denial of occupancy.) If no credit history, write None.

Name of Credit Reference	City, State	Open/Closed

AUTOMOBILE INFORMATION

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

CERTIFICATION

I/We certify that all information in this application is true to the best of my/our knowledge and I/We understand that false statements of information are punishable by law and will lead to rejection of this application or termination of tenancy after occupancy. I/We do hereby authorize the apartments' authorized representative to contact any agencies, offices, groups, or organizations to obtain and verify any information which is deemed necessary to complete my/our application. I/We certify that if accepted this is/will be my/our permanent residence and I/We do NOT and will NOT maintain a separate subsidized rental unit in a different location.

_____ Applicant Signature	_____ Date
_____ Co-Applicant Signature	_____ Date

_____ Co-Applicant Signature	_____ Date
_____ Co-Applicant Signature	_____ Date

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 other 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).

This HUD property does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.

The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988)
J. Eric Fishburn – 1816 E. Mojave Street – Farmington, NM 87401 – (505) 325-6515 TTY: (800) 735-2988

We are pledged to the letter and spirit of the US policy for achievement of equal opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtain housing because of race, color, religion, sex, national origin, handicap or familial status.

