



**OREGON—TAX CREDIT
RENTAL APPLICATION**

TO BE COMPLETED BY EACH ADULT APPLICANT

ALL UNITS
SUBJECT TO
AVAILABILITY



OFFICE USE ONLY

NEW MOVE-IN OCCUPANT TURNING 18 ADD/REMOVE ROOMMATE TRANSFER

PROPERTY NAME / NUMBER _____

UNIT NUMBER _____ ADDRESS SE Tempest Dr. Bend OR 97702

DATE UNIT WANTED _____ UNIT RENT \$ _____ NON-REFUNDABLE SCREENING CHARGE \$ 40.00

OWNER / AGENT Ariel South PHONE (541) 383-2556

OWNER / AGENT ADDRESS 1707 SE Tempest Dr. , suite Suite 100, Bend, OR 97702

SMOKING POLICY: ALLOWED - ENTIRE PREMISES PROHIBITED - ENTIRE PREMISES ALLOWED IN LIMITED AREAS (ASK MANAGEMENT FOR DETAILS)

APPLICANT

PLEASE DO NOT LEAVE ANYTHING BLANK. IF NOT APPLICABLE, WRITE "N/A."

APPLICANT FULL LEGAL NAME _____ **EMAIL** _____

PREVIOUS NAMES, ALIASES OR NICKNAMES USED _____

DATE OF BIRTH _____ SOC. SECURITY # _____ APPLICANT PHONE (_____) _____

GOVERNMENT ISSUED PHOTO I.D. TYPE _____ # _____ / STATE _____ EXP. DATE _____

CURRENT STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ DATE YOU MOVED IN _____

CURRENT LANDLORD NAME _____ **LANDLORD PHONE** (_____) _____

LANDLORD EMAIL _____ **LANDLORD FAX** (_____) _____

STREET ADDRESS (OR APT NAME) _____ **CITY** _____ **STATE** _____ **ZIP** _____

APPLICANT FORMER STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ FROM _____ TO _____

FORMER LANDLORD NAME _____ **LANDLORD PHONE** (_____) _____

LANDLORD EMAIL _____ **LANDLORD FAX** (_____) _____

STREET ADDRESS (OR APT NAME) _____ **CITY** _____ **STATE** _____ **ZIP** _____

OTHER STATES AND COUNTIES YOU HAVE LIVED IN DURING THE PAST 5 YEARS _____

INCOME

ARE YOU SELF-EMPLOYED? YES NO **ARE YOU A FULL-TIME STUDENT?** YES NO

CURRENT EMPLOYER _____ **PHONE** (_____) _____

HR EMAIL _____ **HR FAX** (_____) _____

STREET ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

POSITION _____ **DATE HIRED** _____ **GROSS MONTHLY INCOME \$** _____

ADDITIONAL CURRENT EMPLOYER _____ **PHONE** (_____) _____

HR EMAIL _____ **HR FAX** (_____) _____

STREET ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____

POSITION _____ **DATE HIRED** _____ **GROSS MONTHLY INCOME \$** _____

OTHER MONTHLY INCOME: THIS INCLUDES, BUT IS NOT LIMITED TO, WELFARE ASSISTANCE, SOCIAL SECURITY, PENSIONS, DISABILITY, MILITARY PAY/ BENEFITS, UNEMPLOYMENT, CHILD SUPPORT, ALIMONY, STUDENT GRANTS/LOANS, SELF-EMPLOYMENT, LOTTERY INCOME, INCOME FROM THE SALE OF PROPERTY, INCOME FROM TRUSTS AND ANY OTHER INCOME RECEIVED FROM PEOPLE NOT RESIDING WITH YOU.

SOURCE _____ \$ _____ **SOURCE** _____ \$ _____

ASSETS

ASSETS: THIS INCLUDES, BUT IS NOT LIMITED TO, CHECKING/SAVINGS ACCOUNTS, 401K, MONEY MARKET ACCOUNTS, IRA, STOCKS/BONDS, CD'S, TRUSTS, WHOLE OR UNIVERSAL LIFE INSURANCE POLICIES, CASH HELD IN SAFETY DEPOSIT BOXES, ITEMS HELD AS INVESTMENTS, ETC.

ASSET TYPE	FINANCIAL INSTITUTION	ASSET TYPE	FINANCIAL INSTITUTION
_____	_____	_____	_____
_____	_____	_____	_____

OTHER OCCUPANTS

NAME	DATE OF BIRTH	SOCIAL SECURITY #	FULL-TIME STUDENT?
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO

VEHICLES	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #	OWNER
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____

IF CHECKED, PETS ARE NOT ALLOWED AT THIS PROPERTY.

IF CHECKED, PETS ARE ALLOWED SUBJECT TO MANAGEMENT APPROVAL. HOW MANY PETS WILL BE RESIDING IN THIS UNIT? _____

NAME	TYPE	BREED	AGE	WEIGHT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EMERGENCY CONTACT _____ PHONE (____) _____

ADDRESS _____

CONTACT IN CASE OF DEATH _____ PHONE (____) _____

ADDRESS _____

DO YOU INTEND TO USE: WATERBED AQUARIUM MUSICAL INSTRUMENT _____

HAVE YOU EVER BEEN EVICTED, OR ARE YOU CURRENTLY IN THE EVICTION PROCESS? YES NO IF YES, DATE _____

HAVE YOU EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS? YES NO IF YES, DATE _____

HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS? YES NO IF YES, DATE _____

HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, OR PLED GUILTY OR NO CONTEST TO, ANY FELONY OR MISDEMEANOR? YES NO IF YES, WHO _____ WHERE _____ WHEN _____

WHAT _____

WHY ARE YOU VACATING YOUR PRESENT PLACE OF RESIDENCE? _____

HOW DID YOU HEAR ABOUT OUR PROPERTY? _____

Owner/Agent has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606 (b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation.

SCREENING COMPANY OR CREDIT REPORTING AGENCY

COMPANY NAME Pacific Screening, Inc. PHONE (503) 297-1941

ADDRESS P.O. Box 25582, Portland, OR 97298

EMAIL service@pacificscreening.com

If the application is approved, applicant will have 48 hours from the time of notification to either, at Owner/Agent's option, execute a rental agreement and make all deposits required thereunder or make a deposit to hold the unit and execute an agreement to execute a rental agreement which will provide for the forfeiture of the deposit if applicant fails to occupy the unit. If applicant fails to timely take the steps required above, he/she will be deemed to have refused the unit and the next application for the unit will be processed.

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF RENTAL AGREEMENT.

RENT	DEPOSITS	GOOD FAITH ESTIMATE
<p>THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.</p> <p>MAXIMUM POTENTIAL RENT \$ _____</p> <p><u>2 Bedroom Ariel Glen</u> \$ <u>803.00</u></p> <p><u>3 Bedroom</u> \$ <u>892.00</u></p> <p><u>2 Bedroom Townhous</u> \$ <u>803.00</u></p> <p><u>2 Bedroom Ariel Soutl</u> \$ <u>735.00</u></p>	<p>SECURITY DEP. MINIMUM \$ <u>400.00</u></p> <p>SECURITY DEP. MAXIMUM \$ <u>892.00</u> (DEPENDS ON SCREENING RESULTS AND UNIT SIZE)</p> <p><u>Pet Deposit per pet</u> \$ <u>300.00</u></p> <p>_____ \$ _____</p> <p>_____ \$ _____</p> <p>_____ \$ _____</p> <p>_____ \$ _____</p>	<p>Approximate number of units currently available, or which will in the foreseeable future be available, of the size and in the area requested by applicant: _____ unit(s).</p> <p>Approximate number of applications previously accepted and currently under consideration for those units: <u>1</u> application(s).</p> <p>If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.</p>

I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of this application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have received and read the Owner/Agent's rental criteria and I understand that failure to meet any of the criteria may result in denial of my application.

APPLICANT X _____ DATE _____ PHOTO I.D. VERIFIED BY _____ (INITIALS)

OWNER/AGENT X _____ DATE RECEIVED _____ TIME RECEIVED _____

OWNER/AGENT NOTES _____

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RENTAL CRITERIA FOR RESIDENCY

Property:

Program:

EPIC Property Management, LLC would like to thank you for your interest and applying at one of our communities. EPIC is an Equal Housing Opportunity provider and complies with all Fair Housing rules and regulations.

General Requirements:

1. Government issued photo identification is required for all applicants and co-signers.
2. Each applicant will be required to qualify individually.
3. If at any time it is found that false or fraudulent statements were made during the application process, it is grounds for immediate denial of the application or termination of tenancy.
4. Applications must be completed individually for all adult applicants at least 18 years of age, married, emancipated or (in Oregon) under the age of 18 and (a and/or b)
 - a) Pregnant and expecting the birth of a child who will live in the primary applicant's physical custody.
 - b) The parent of a child or unborn child living in the physical custody of the person.

Occupancy Policy

1. Occupancy is based on the number of bedrooms in a unit. (A bedroom is defined as a space within the premises that is used primarily for sleeping, with at least one window and a closet for clothing).
2. Two persons are allowed per bedroom, plus one additional occupant in the unit.

Application Process:

1. Review all sections of the Criteria for Residency.
2. Submit the Non-Refundable Application fee of \$40.00 in the form of cashier's check or money order (personal checks and cash cannot be accepted during this process).

Income Requirements:

1. Monthly income requirement is a minimum of 2 times the tenant's monthly rent portion and must be from a verifiable source. The following sources of income will be considered including but not limited to:
 - Employment, Unemployment, Child Support, Alimony, TANF, Food Stamps, Section 8 Voucher, Rental Assistance, Income from Assets and Rental Income and Periodic Monetary Assistance.
2. Voucher holders with Zero income must provide proof of the income source that will pay the Utility Allowance set for the unit size at the property.
3. Income and Assets must be reported and will be verified.
4. Third party verifications may be required based on the community that you're applying for.

Employment Criteria:

1. Twelve months of verifiable employment will be required if used as source of income.
2. Self-Employed applicants will be required to submit the previous year's tax returns

Rental Criteria:

1. Less than twelve months of verifiable contractual rental history from a current or previous third party landlord or home ownership will result in one month's deposit to be paid.
2. Three years of eviction-free history is required.
3. Five or more 72-Hour notices within one year will result in a denial of the application.
4. Three or more dishonorable checks within one year will result in a denial of the application.
5. Rental history reflecting past due and unpaid rent will result in denial of the application.
6. Negative rental references within two years will result in denial of the application.

Credit Criteria:

1. Negative or adverse debt showing on consumer credit report may require additional security deposit.
2. Ten or more unpaid collections (not related to medical, child support and student loans) will result in denial of the application.
3. Unpaid collections related to utility services will result in denial of the application.

Criminal Conviction Policy:

Upon receipt of the rental application and screening fee, Owner/Agent will conduct a search of public records to determine whether the applicant or any proposed tenant has been convicted of, or pled guilty or no contest to, any: drug-related crime; person crime; sex offense; crime involving financial fraud, including identity theft and forgery; or any other crime if the conduct for which the applicant was convicted or is charged is of a nature that would adversely affect property of the landlord or tenant or the health, safety or right of peaceful enjoyment of the premises of residents, the landlord or the landlord's agent.

A single conviction, guilty plea, no contest plea or pending charge for any of the following shall be grounds for denial of the rental application. If there are multiple convictions, guilty pleas or no contest pleas on the applicant's record, Owner/Agent may increase the number of years by adding together the years in each applicable category. Owner /Agent will not consider expunged records.

- a) Murder, manslaughter, class A felonies involving arson, rape, kidnapping, child sex crimes, where the date of disposition, release or parole has occurred in the last 20 years.
- b) Criminally negligent homicide, aggravated vehicular manslaughter and Class A felonies not included in the above for drug-related crimes, person crimes, sex offenses, financial fraud crimes, burglary, where the date of disposition, release or parole has occurred in the last 10 years.
- c) Class B felony for drug-related crimes, person crimes, sex offenses, financial fraud crimes, aggravated theft, where the date of disposition, release or parole has occurred in the last 7 years.
- d) Class C felony for drug-related crimes, person crimes, sex offenses, financial fraud crimes, burglary, theft, criminal mischief, coercion, animal abuse, where the date of disposition, release or parole has occurred in the last 5 years.
- e) Class A misdemeanor for drug-related crimes, person crimes, sex offenses, financial fraud crimes, criminal impersonation, violation of a restraining order, criminal mischief, stalking, disorderly conduct, unlawful possession of a firearm, possession of burglary tools, where the date of disposition, release or parole has occurred in the last 3 years.
- f) Class B misdemeanor for drug-related crimes, person crimes, sex offenses, financial fraud crimes, disorderly conduct, where the date of disposition, release or parole has occurred within the last 18 months.

Reasonable Accommodations/ Modifications Policy:

1. The applicant must submit a written request for any accommodation/modification request for review and approval in advance.
2. Any modifications to a home will be at the expense of the resident and the work must be completed by a licensed contractor.
3. Written documentation must be provided to management prior to work being performed to include: name of contractor, required licenses/permits and proof of insurance for approval.
4. EPIC Property Management will not approve requests for Medical Marijuana.

Rejection Policy:

If your application has been denied due to negative or adverse information being reported you may:

1. Contact the company that supplied the information to discuss your application.
2. Contact the credit reporting agency to identify who is reporting unfavorable information.
3. Correct any incorrect information through the credit reporting agent per their policy.
4. Request the credit-reporting agency to submit a corrected credit check to the screening company.
5. Ready to Rent Graduates may submit a certificate for review for a possible consideration to waive the credit, eviction and/or landlord history. The review will consist of the entire background check.
6. Upon receipt of the corrected information your application will be reevaluated for the next available unit.

Co-Signer Option- If an applicant is declined, or there is reason to believe they will be declined due to credit or income, they have the option of submitting a co-signer application. With a qualified co-signer, their application could then be accepted.

If your application was denied and you feel you qualify based on the above criteria, you have the right to submit a written request to appeal the denial, including documentation supporting the reasons for appeal, within 5 business days. Once your written appeal is received it will be sent to the corporate office and a final review will be completed within 5 business days. The available apartment will not be held during this time. If your denial is overturned you will be eligible for the next available unit. Screening results are good for 30 days following the date of completion.



Applicant's Initials _____