

The Affordable Application Instructions

Several documents are required to complete the application:

- Complete the application in its entirety
- Complete all included forms
- Government issued I.D. for all household members 18 years and older
- Income documentation:
 - Social Security – most recent benefit letter
 - Pensions
 - Retirement account disbursements
 - Most recent 6 consecutive pay stubs for any job
 - Statements for all assets:
 - Last 6 months for checking or direct express
 - Most recent for savings, retirement plans, money markets, mutual funds, life insurance, etc.
 - Documentation of all mortgages held on property currently owned along with rental information if renting the property
- Note: if self-employed, bring 2 years filed tax returns with Scheduled C. This is for self-employed applicants only. Tax returns are not otherwise required.
- \$22 application fee (check or money order payable to **Rainier Manor**). Cash is not accepted.

Thank you for your interest in Rainier Manor Senior Apartments. If you have any questions feel free to contact us at 301-699-9795 or rainiermanor@hrehllc.com.

APPLICATION FOR HOUSING
Affordable Communities

Date Received: _____

Time Received: _____

This is an application for housing at:	Community: Rainier Manor
	Address: 3001 Queens Chapel Rd.
	Mt. Rainier, MD 20712
	Phone: 301-699-9795

Applications are placed in order of date and time received. An applicant may be considered only after the receipt of this completed application. In the event that housing has not been provided within 120 (90 if USDA) days, this application will need to be updated.

How did you hear about us? _____

What are your three options of desired move in dates? (in order of preference)

1.) _____ 2.) _____ 3.) _____

A. GENERAL INFORMATION	
Applicant Name(s):	
Address: _____	
Street	Apt.# City State ZIP
Daytime Phone: _____ Evening Phone: _____	
Cell Phone: _____ Email Address: _____	
Amount of current monthly rental or mortgage payment: \$ _____ <input type="checkbox"/> RENT or <input type="checkbox"/> OWN	
Check utilities paid by you: <input type="checkbox"/> Heat <input type="checkbox"/> Electricity <input type="checkbox"/> Gas <input type="checkbox"/> Other (specify)	
Approximate monthly cost of utilities paid by you (excluding phone and cable TV): \$ _____	
Apartment size requested: <input type="checkbox"/> Eff <input type="checkbox"/> 1 BR <input type="checkbox"/> 2 BR <input type="checkbox"/> 3/4 BR <input type="checkbox"/> Handicap Unit	
Current Landlord (36 months)	Name: _____
	Address: _____
	Phone: _____
	How Long? _____
Prior Landlord (if less than 36 months above)	Name: _____
	Address: _____
	Phone: _____
	How Long? _____
Would any household member benefit from or require a reasonable accommodation or modification? If yes, describe:	



B. HOUSEHOLD COMPOSITION

	Name	Relationship to head	Date of Birth	Age	Marital Status	SS#	Student Y/N
Head							
Co-Head							
3.							
4.							
5.							
6.							
7.							
8.							

Yes	No	Do you anticipate any changes to your household in the next 12 months? If yes, please explain.

C. STUDENT STATUS

Yes	No	
Are you or anyone in your household:		
		Currently a full time or part time student. If yes, list all students.
		Not a full time student. Who?
		Been a full time student for any part of 5 months this calendar year? Who?
		Plan to be a full time student any time in the next 12 months? Who and when?



D. INCOME

Yes	No			
Are you or anyone in your household currently or plan to be:				
_____	_____	Employed? List information for each household member 18 or older.		
		<i>Household Member</i>	<i>Employer</i>	<i>Monthly Income</i>

_____	_____	Self-employed? List information for each household member below.		
		<i>Household Member</i>	<i>Business Name</i>	<i>Annual Income</i>

_____	_____	Receive Social Security benefits? Example: SSA, SSDI, SSI		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>

_____	_____	Veteran's benefits or other government pensions?		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>

_____	_____	Pensions or regular withdrawals from retirement account(s)?		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>



Yes	No			
		Military pay? Include all allowances.		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>
		<hr/>		
		Child Support or alimony?		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>
		<hr/>		
		Government assistance, TANF, SNAP, housing assistance, utility grants, etc?		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>
		<hr/>		
		Unemployment compensation or Workman's Comp?		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>
		<hr/>		
		Student Financial Aid? (Do not include student loans)		
		<i>Household Member</i>	<i>Source</i>	<i>Annual Income</i>
		<hr/>		
		Financial Contributions to the household? This includes payment of expenses, bills, cash contributions, etc from someone outside of the household.		
		<i>Household Member</i>	<i>Source</i>	<i>Monthly Income</i>
		<hr/>		
		<hr/>		

E. ASSETS

Yes	No					
		Do you or anyone in your household have:				
_____	_____	Checking account(s) and/or savings account(s)?				
		<i>Member</i>	<i>Institution</i>	<i>Balance</i>	<i>Interest Rate</i>	<i>Type</i>

_____	_____	CDs, Money Markets, Mutual Funds, etc?				
		<i>Member</i>	<i>Institution</i>	<i>Balance</i>	<i>Annual Income</i>	<i>Type</i>

_____	_____	Retirement accounts? IRA, 401k, 403a, 403b, TSP, etc.				
		<i>Member</i>	<i>Institution</i>	<i>Balance</i>	<i>Annual Income</i>	<i>Type</i>

_____	_____	Cash, Direct Express or other pre-paid debit cards?				
		<i>Member</i>		<i>Balance</i>		<i>Type</i>

_____	_____	Whole or universal life insurance policy?				
		<i>Member</i>	<i>Institution</i>	<i>Balance</i>	<i>Annual Income</i>	<i>Type</i>



Yes	No	Real estate, land, etc.?				
		<i>Member</i>	<i>Address</i>	<i>FMV</i>	<i>Rental Amount</i>	
		Publically traded or privately held company stocks?				
		<i>Member</i>	<i>Company</i>	<i># Shares</i>	<i>Price /Share</i>	<i>Dividends/ Share</i>
		Treasury, Municipal, Corporate, or other types of bonds?				
		<i>Member</i>	<i>Institution</i>	<i>Value</i>	<i>Interest Rate</i>	<i>Type</i>
		Revocable and Non-revocable Trusts?				
		<i>Member</i>	<i>Institution</i>	<i>Balance</i>	<i>Annual Income</i>	<i>Type</i>
		Personal property held for investment? Examples stamp or coin collections				
		<i>Member</i>		<i>Value</i>	<i>Type</i>	

Yes	No													
_____	_____	Sold any assets for less than fair market value in the last 24 months?												
		<table border="1"> <thead> <tr> <th><i>Member</i></th> <th><i>Value</i></th> <th><i>Type</i></th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	<i>Member</i>	<i>Value</i>	<i>Type</i>									
<i>Member</i>	<i>Value</i>	<i>Type</i>												
_____	_____	Given away any assets for less than fair market value in the last 24 months, including cash or donations of money to churches or charities?												
		<table border="1"> <thead> <tr> <th><i>Member</i></th> <th><i>Value</i></th> <th><i>Type</i></th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	<i>Member</i>	<i>Value</i>	<i>Type</i>									
<i>Member</i>	<i>Value</i>	<i>Type</i>												

In case of emergency notify:	
Address:	
Relationship:	Phone #:

F. VEHICLE AND PET INFORMATION			
List any cars, trucks, or other vehicles owned.			
Type of Vehicle:	License Plate #:		
Year/Make:	Color:		
Type of Vehicle:	License Plate #:		
Year/Make:	Color:		
Do you own any pets?	Yes	No	
<i>If yes, describe:</i>			



Are you or any member of the household subject to a Lifetime Sex Offender Registration in any state?

Yes

No

Please list all states where you or any members of the household have resided:

CERTIFICATION

I/We hereby certify that I/We Do/Will Not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that my eligibility for housing will be based on applicable income limits and by management's selection criteria. 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 or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older, must sign application.

(Signature of Tenant)

Date

(Signature of Co-Tenant)

Date

(Signature of Co-Tenant)

Date

(Signature of Co-Tenant)

Date

(Management Agent)

Date

REV: 7/2015





Rainier Manor Senior Apartments
3001 Queens Chapel Rd., Mt. Rainier, MD 20904
T 301-699-9795 F 301-699-1320

HAI MANAGEMENT, INC.

As provided by the Privacy Protection Act of 1976, anyone who is requested to provide personal information about himself/herself must be informed whether he is legally required to provide such information, or whether he may refuse to supply the information requested. As an applicant for housing financed either under the Low Income Housing Tax Credit Program, RD and/or HUD, you are requested to provide information that will enable us to complete the necessary verification to determine eligibility.

The information requested will be used to determine the adjusted annual income which you and your family receive from all income sources. This is necessary because the Rules and Regulations adopted by the IRS Tax Credit Act and/or RD, limit eligibility for initial occupancy to families whose adjusted income does not exceed certain established limits. In addition, it is necessary to know the composition of your family (number of dependents) so that the proper size of dwelling unit may be authorized for you and your family.

Although you are not legally required to provide the information requested, your failure to do so will result in our inability to determine your eligibility for housing in this development.

Copies of the completed "Tenant Certification", may be sent by this management agent/owner to; HUD, RD, IRS and the State Housing Agency where applicable. It is possible that information provided by you will be revealed to others for the purpose of confirmation, but any information so supplied is subject to the safeguards of the Privacy Protection Act.

Sincerely,

Applicant Signature Date

Resident Manager

Date _____

Co-Applicant Signature Date



HOUSEHOLD STUDENT STATUS VERIFICATION
(LIHTC or Tax Exempt Bond Compliance Period)

Applicant/Tenant Name: _____

Address: _____

Completed For: (check one)

- Move-in; effective date: _____
- Annual recertification; effective date: _____

Will all of the persons in your household be or have been full-time students during five calendar months of the certification year? Yes No

If YES, then is anyone in your household:

- A student and receiving AFDC/TANF? Yes No
- A student who was previously in a foster care program under Part B or Part E of title IV of the Social Security Act? Yes No
- A student enrolled in a job training program under the Job Training Partnership Act (federal, state or local)? Yes No
- A single parent living with his/her minor children and such parent is not a dependent (as defined in Section 152) and whose children are not dependants of another individual other than a parent? Yes No
- Married and file a joint return Yes No

I agree to notify management immediately if my student status changes. I understand that changes in student status may affect my eligibility to participate in this Program.

I hereby certify that the information provided above is accurate and complete to the best of my knowledge. I consent to release such information in order to comply with Program regulations. I understand that providing false or misleading information may subject me to criminal penalties.

(Signature of Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date



Rainier Manor Senior Apartments
3001 Queens Chapel Rd., Mt. Rainier, MD 20712
T 301-699-9795 F 301-699-1320

UNEMPLOYED STATEMENT

Property Name: Rainier Manor Senior Apartments

Unit # TBD

I do hereby certify that on this ___ day of _____, 2017, that the information completed below is true and correct:

1. Check (a) or (b) as applicable:

_____ (a) I am not presently employed, but anticipate becoming employed within the next twelve months.

_____ (b) I am not presently employed and do not anticipate becoming employed within the next twelve months.

If (a) is the answer checked please complete the following:

2. Based on my past work experience, skills, and income history as reflected in my income tax return for the most recent tax year (copy attached), and with adjustments to reflect circumstances anticipated within the next 12 months, I expect to earn \$_____ per year when I become employed.

Applicant / Resident Signature

Printed Name

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 the owner 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).**



Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The 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 the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.

1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. The five racial categories to choose from are defined below: You should check as many as apply to you.

1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

LANDLORD REFERENCE CHECK FORM

Applicant's Name: _____
Landlord's Name: _____ Development Name: _____
Phone #: _____

Address (if mailing): _____

I authorize _____ its subsidiaries, or its managing agents to investigate my rental history. The investigation may include, but is not limited to, the questions listed below.

Signature _____ Date _____

Signature _____ Date _____

To be completed by landlord

Dates of residency: From: _____ To: _____ Total # of months: _____
of Household Members: _____

1. Did the resident pay their rent on time: _____
If the resident was late on the rent, how late? _____
How often? _____ Comments: _____
Will the resident owe any late rent, fees, etc. at the time of vacating? _____

2. How much rent was paid each month by this resident: _____

3. Did the resident, their guests, or their family damage the apartment or the property? _____
Did they pay for the damage? _____ Amount of damages? _____

4. Did the resident give you proper notice for vacating? _____
Reasoning for leaving? _____

5. Would you re-rent to this resident? _____

6. What previous address do your records indicate? _____

7. Was the resident ever sited for Lease Non-Compliance? _____

Comments: _____

Signature: _____ Date: _____

Title: _____ Company: _____

