

**Qualified Occupant  
General Rental Qualification Application**

<b>Applicant Name:</b>	Applicant's Social Security No.	Birth date	Applicant Phone Numbers	
			Work:	
			Cell:	
			Email:	
Circle One:      Unmarried	Married	Separated		
Applicant Mailing Address:	Applicant Physical Address:	Previous Address		
Applicant's Employer:	Employer's Address:	Employer's Phone Number:		
Do you own any other property? If so, please list with addresses:		Applicant's Annual Gross Income \$	Term of Employment Yrs.      Mos.	

Former/Current Landlord:

Landlord Phone Number:

Landlord Email:

<b>Co-Applicant Name:</b>	Social Security Number:	Birth date	Phone Numbers:	
			Work:	
			Home:	
			Cell:	
Circle One:      Unmarried	Married	Separated		
Co-Applicant Mailing Address:	Physical Address:	Previous Address:		
Co-Applicant Employer:	Employer Address:	Employer Phone Number:		
Do you own any other property? If so, please list with addresses:		Co-Applicant's Annual Gross Inc. \$	Term of Employment Yrs.      Mos.	
Former/Current Landlord Name & Address		Landlord's Phone #	Landlords Email:	

**OTHER INCOME**

Child Support/Alimony: \_\_\_\_\_ AFDC/TANF: \_\_\_\_\_  
 Social Security, SSDI: \_\_\_\_\_ Foster Care: \_\_\_\_\_  
 Other: \_\_\_\_\_

List other Adults in Household and their Annual Income	List Children Names and Ages
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Have you ever been in trouble with the law? \_\_\_\_yes \_\_\_\_no  
 Have you or any family member ever been arrested for illegal use of a controlled substance or activities related to an abuse of drugs and/or alcohol? \_\_\_\_yes \_\_\_\_no  
 Have you or any family member ever been convicted of an alcohol/drug –related or violent crime? \_\_\_\_yes \_\_\_\_no  
 Has any applicant/co-applicant or adult in this household ever been charged with a felony? \_\_\_\_yes \_\_\_\_no

(If the answer to any of these questions above is yes, please use a separate piece of paper to explain.)

Applicant Signature	Date	Co-Applicant Signature	Date
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**Completion and submission of this form does not guarantee approval of rental application**



Updated: 03/2014

## CERTIFICATIONS AND CONSENT

It is our policy to verify all information contained in this application. In acknowledgement of this policy, please sign your name(s) where indicated.

**I/We certify the following:**

- All the information contained and submitted in support of rental qualification for a unit at Rock Creek as a Qualified Applicant is true and complete to the best of my/our knowledge and belief.
- I/We are aware that any misrepresentation will result in the forfeiture of my/our right to participate in the any housing programs sponsored by the Gunnison Valley Regional Housing Authority.
- I/We certify that all members of the household are legal residents of the United States.

**Consent to Release Information:**

I/We authorize representatives from the Gunnison Valley Regional Housing Authority to receive information from my/our employer(s), and my/our financial institution(s), to verify the information contained in this application. This information includes, but is not limited to employment status, income, and other financial information. I also authorize representatives from the Gunnison Valley Regional Housing Authority to allow inspection and reproduction of any financial records or information in their possession. I/We understand that information in this application may be shared with funders/grantors for the purpose of funding compliance.

I/We understand that the income I/we use to qualify for a rental unit at Rock Creek is the same as the income I/we claim in this application.

I/We authorize representatives from the Gunnison Valley Regional Housing Authority to run any necessary background checks to verify the information contained in this application.

I/We release all representatives from the Gunnison Valley Regional Housing Authority from any and all liability arising from release of such information. This authorization is limited solely to information requested for the processing of my application for qualification as a Qualified Occupant to rent a unit at Rock Creek.

I/we understand that completion of this application does not guarantee that my/our rental application will be approved.

***By providing an electronic signature (typing your name in the signature box), or actual signature, on this document, you agree to all of the terms and conditions stated in this Application, and you are guaranteeing that all of the information provided on this form is true and correct .***

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Signature

Date

Signature

Date

**Equal Opportunity:** In accordance with the provisions of the Equal Opportunity Act there will be no discrimination against an applicant for these benefits on the basis of age, source of income, sex, race, marital status, sexual orientation, national origin, religion or handicap. If you or a member of your household is an individual with a disability, you have the right to request reasonable accommodation for that disability.

**Confidentiality:** In order to process an application, Gunnison Valley Regional Housing Authority may supply and receive information as detailed in the "Consent to Release" clause above. Information may also be released to comply with the auditing requirements of program funders/grantors. With these two exceptions, all personal and identifying information on an application remains fully confidential.

