GUNNISON VALLEY REGIONAL HOUSING AUTHORITY

RENTAL APPLICATION

Applicant Name (as it will appear on title):	Co-Applicant Name (as it will appear on title):
Social Security Number: Date of Birth:	Social Security Number: Date of Birth:
Phone:	Phone:
Email:	Email:
Marital Status: Married Separated	Marital Status: Married Separated
Unmarried (single, divorced, widowed)	Unmarried (single, divorced, widowed)
Dependents: #: Ages:	Dependents: #: Ages:
Present Physical Address:OwnRent	Present Physical Address:Own Rent
Yrs Mos	Yrs Mos
Total House Payment/Rent: \$ Mailing Address:	Total House Payment/Rent: \$ Mailing Address:
Former Physical Address:OwnRent # yrs	Former Physical Address:OwnRent # yrs
PART II—FMPI	OYMENT INFORMATION
Applicant Employer, Address, Phone #:	OYMENT INFORMATION Co-Applicant Employer, Address, Phone #: Self Employed
Applicant Employer, Address, Phone #:	Co-Applicant Employer, Address, Phone #:
Applicant Employer, Address, Phone #: Self Employed # Yrs	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs
Applicant Employer, Address, Phone #: Self Employed # Yrs Position # hours/week AND # weeks/year	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs Position # weeks/year AND # weeks/year
Applicant Employer, Address, Phone #: Self Employed # Yrs Position AND # weeks/year If employed in current position less than 2 years, or if more than or	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs Position AND # weeks/year
Applicant Employer, Address, Phone #: Self Employed # Yrs Position # hours/week AND # weeks/year If employed in current position less than 2 years, or if more than or Applicant Employer, Address, Phone #: Self Employed	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs # yrs AND # weeks/year and current position, complete the following (attach separate sheet if necessary): Co-Applicant Employer, Address, Phone #: Self Employed
Applicant Employer, Address, Phone #: Self Employed # Yrs Position AND # weeks/year If employed in current position less than 2 years, or if more than or Applicant Employer, Address, Phone #: Self Employed	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs # weeks/year AND # weeks/year the current position, complete the following (attach separate sheet if necessary): Co-Applicant Employer, Address, Phone #: Self Employed
Applicant Employer, Address, Phone #: Self Employed # Yrs Position # hours/week AND # weeks/year If employed in current position less than 2 years, or if more than or Applicant Employer, Address, Phone #: Self Employed	Co-Applicant Employer, Address, Phone #: Self Employed # Yrs # yrs AND # weeks/year and current position, complete the following (attach separate sheet if necessary): Co-Applicant Employer, Address, Phone #: Self Employed

PART III—INCOME INFORMATION

Gross Monthly Income	Applicant	Co-Applicant	Total
Primary Job Income	\$	\$	\$
Overtime			
Bonuses			
Commissions			
Dividents/Interest			
Retirement			
Net Rental Income			
Additional Jobs - total			
Other*			
Total	\$	\$	\$





*Other income: describe all other income below (alimony, child support, pensions, annuities, retirement benefits, public assistance, unemployment, veterans benefits, trusts, lottery winnings, etc)

A / Co-A	Description of Income Source	Monthly Gross Income
		\$
		\$
		\$
		\$
		\$
TOTAL		\$

Description of Asset	A/Co-A	Ins	titution Wh	ere Held			Cash	Value
Checking							\$	
Checking							\$	
Savings							\$	
Savings							\$	
Certificates of Deposit		- 8					\$	
Stocks/Mutual Funds							\$	
Assessed Value of RE Owned	Owned \$							
OTAL							\$	
IRA/401k/Retirement Net Value of Business Owner	d					-	\$ \$	
100		-			-		-	
Property Address		nding le/Rental	Type of Property	Assessor's Total Value	Gross Monthly Rental Income	Mortgage Payments	Taxes, Ins., HOA Expenses	Net Rental Income
				\$	\$	\$	\$	\$
				\$	\$	\$	\$	\$

CERTIFICATION AND CONSENT

I/We the undersigned, hereby certify that:

- All information contained in this Application is true and correct and complete.
- I/We are aware that any misrepresentation may result in me/us being ineligible to rent deed-restricted housing.
- I/We certify that all members of the household are legal residents of the United States.

I/We the undersigned, hereby certify that my/our answers to the following questions are true:

(For any "Yes" answers please identify if it is applic	able to the	e Applicant or Co-Applicant) Yes	No			
Are there any outstanding judgments against you?	•			::			
Are you a party to a lawsuit?			-	· · · · · · · · · · · · · · · · · · ·			
Have you ever been evicted from a property you re	ented?						
Do you intend to occupy the property as your prim	ary reside	nce?	1				
Consent to Release Information							
I/We authorize representatives from the Gunnison Valley Regional Housing Authority (GVRHA) to receive information from employers and financial institutions listed in this application. I authorize representatives from the GVRHA to inspect and reproduce documentation provided with this application for purposes of determining my/our eligibility to purchase or occupy deed-restricted properties within the GVRHA jurisdiction.							
I/We release all representatives of the GVRHA from any and all liability arising from an employer's or financial institution's release of my information requested for this purpose. This authorization is limited solely to the processing of my/our application to purchase or occupy deed-restricted housing in Gunnison County.							
I/We understand that completion of this appli approved.	cation do	es not guarantee that m	y/our applicatio	n will be			
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 race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age (18 or older), disability or genetic information.							
Confidentiality: To process an application the GVRHA may supply and receive information as detailed in the "Consent to Release Information" clause above. Information may also be released to comply with the auditing requirements of program funders or grantors. With these two exceptions, all personal and identifying information contained within an application remains fully confidential.							



Below is a list of all of the supporting documents we will need with your application:

- Most recent 2 years federal tax returns
- Most recent 2 years W-2s and/or 1099s
- 2 most recent consecutive paystubs
- Proof of 12 months residency within Gunnison County
- Copy of State issued photo ID
- Most recent 3 months bank statements for all accounts
- Completed Lender Review Letter

