

## SOLDOTNA AREA SENIOR CITIZENS, INC.

197 West Park Avenue Soldotna, AK 99669 (907) 262-2322



## SOLDOTNA SENIOR INDEPENDENT HOUSING RENTAL APPLICATION

In compliance with the Federal definition of "Housing for Older Persons" Sec.807.[42 U.S.C. 3607] Implemented at 24 CFR 100.300-308, the Soldotna Senior Independent Housing is intended for, and solely occupied by, persons 62 years of age or older.

I certify that I am age 62 years of age or over and making application to reside at Soldotna Senior Independent Housing at 144 N. Fireweed in Soldotna, AK, which will be my primary residence.

Incomplete or falsified information will result in the rejection of this application for housing. You must update the information if it changes and at renewal of lease. If this application is approved, tenant(s) must make the security deposit, rental payment and sign the lease before the tenancy begins.

Soldotna Area Senior Citizens, Inc., Senior Independent Housing (Landlord) complies with all Federal and State laws regarding discrimination and does not discriminate based upon age, sex, race, marital status, religion, financial status, national origin or other prohibited classifications.



Note: No pets are allowed. No smoking inside or within 20 feet of housing unit.

Unit has six 2-bedroom units and two 1-bedroom units

Rental rates are based on market value: \$750 for 1 bedroom (784 sq.ft.), \$875 for 2 bedroom (973 sq.ft.). Resident pays for electricity, phone and cable.

Security deposit is \$875 for 2-bedroom or \$750 for 1-bedroom.

Refrigerator, stove, dishwasher, clothes washer and dryer are installed

Wheelchairs and electric mobility carts can cause significant damage to housing unit, avoid contact with walls, doors and appliances. Tenant is responsible for all repairs and replacement costs..

Applicant Information (1st person to reside in housing unit):

Name:						
Last		rst			Middle	
Social Security Numb	er		Date of Birt	h		_ Sex
Current Address			_ City	5	_State	Zip
Telephone #		Emergency	/ #		_ U.S. Ci	tizen
Cell #	Fax #		_ e-mail add	lress		
Person to notify in case of emergency: Name Phone #						
Have you been convicted of a felony? Yes If yes, when? No (Also, if you answered yes, you may be asked to provide details)						

Source	Amount				
Source	Amount				
	Total				
Number of bedrooms requested	l: (1) (2)				
Does applicant(s) own a vehicle	e (limit of 2 vehicles per unit)? Yes No				
YearMake	Model License #				
State Expiration	Date Have insurance (required)				
YearMake	Model License #				
State Expiration	DateHave insurance (required)				
Personal references:					
Name	Phone #				
Name	Phone #				
Do you: own your current hor	ne rent				
Disclosure of Landlord for past	3 years:				
Current landlord	Address				
Phone #					
Prior landlordAddress					
Phone #					
Credit References (credit cards	s, businesses or utility companies):				
Name	Address				
Acct number	Phone				
Name	Address				
Acct number	Phone				
Name	Address				
Acct number	Phone				

The Department of Housing and Urb complete a housing survey annually ethnic background of all housing occ	. Part of the survey requires	
Are you: DisabledYe	esNo	
Are you: White America	an Indian or Alaska Native	Hispanic or Latino
Black or African American	Native Hawaiian or other	Pacific Islander Asia
By your signature hereon, you agree and accurate to the best of your kno you herein is material to the potentia your application to enter into a lease	owledge, and you agree that all Lessor's decision with resp	the information disclosed by
Applicant Signature		Date
Co-applicant Signature (2nd)		Date
0	WNER USE ONLY	
Date received		

Date received		
1 or 2 bedroom		
Number of occupants		
Occupancy standards met	YES	NO
Applicants 62 years of age	YES	NO
SSNs provided	YES	NO
Proof of US citizenship	YES	NO
Income limits met	YES	NO <sub>a</sub>
Signed release for criminal, credit and rental history checks	YES	NO
Interested Persons Report of Criminal History provided	YES	NO
Preliminary screening	Accepted	Rejected
Signature and date of screening Individual	Signature	Date