

HOUSEHOLD STATUS: Check all that apply:

- An Adult Member of the household is Disabled or Handicapped;
- Are you homeless or displaced due to divorce, domestic violence or having to move for any reason other than eviction.
- None of the Above

Do you anticipate any changes in household composition in the next twelve months? _____

If Yes, explain: _____

Do you rent or own? _____ Amount of current payment \$ _____

Check utilities currently paid by you: Heat _____ Electricity _____ Gas _____ Other _____

Current monthly cost of utilities paid by you (excluding phone & cable TV) \$ _____

C. INCOME

Income Criteria

All 20 units must be leased to applicants with household incomes at or below 50% of Area Medium Income (AMI). Five of these units will be reserved for applicants who are considered homeless with household incomes at or below 30% of area medium income. A resident must meet King County Annual Median Income (AMI) requirements as set forth by HUD. Income limits are updated by HUD annually (see table below).

2010 King County/Area Median Income Limits

#persons	1	2	3	4	5	6	7	8
30%	\$18,000	\$20,600	\$23,150	\$25,700	\$27,800	\$29,850	\$31,900	\$33,950
50%	\$30,000	\$34,250	\$38,550	\$42,800	\$46,250	\$49,650	\$53,100	\$56,500

List ALL sources of income on the next page. Income includes Wages , Employment or Self Employment, Social Security, SSI Benefits, Pensions, Veteran’s Benefits, Military Pay, Unemployment, Title IV/TANF, Full-Time Student Income (18 & over only), Alimony, Child Support and Other regular income. Use additional paper if needed and attach to application.

HOUSEHOLD INCOME List additional sources of income on a separate page and attach.

List ALL sources of income as requested below. If a section doesn't apply, cross out or write NA.

Household Member Name	Source of Income	Gross Monthly Amount (amount before taxes taken out)
	Social Security	\$
	Social Security	\$
	SSI Benefits (Disability)	\$
	SSI Benefits	\$
	Alimony	\$
	Child Support	\$
	Self-employment (must include latest taxes filed)	\$
	Title IV/TANF	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Unemployment Compensation Date this ends: _____	\$
	Military Pay	\$
Head of Household	Employer Name	\$
	Paid: (Circle one) wky bi-weekly every 2 wks monthly	
Member of Household	Employer Name	\$
	Paid: (Circle one) wky bi-weekly every 2 wks monthly	
Member of Household	Employer Name	\$
	Paid: (Circle one) wky bi-weekly every 2 wks monthly	
TOTAL GROSS ANNUAL INCOME (Based on the monthly amounts listed above X 12)		\$

Do you anticipate any changes in this income in the next 12 months? _____

If Yes, Please explain: _____

D. HOUSEHOLD ASSETS (List additional sources of assets on a separate page and attach)

Checking Accounts	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
Savings Accounts	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
Trust Account (s)	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
Certificates of Deposit / IRA's/ Roth's	Account #	Bank Name & City	Balance \$
	Account #	Bank Name & City	Balance \$
Credit Union	Account #	Bank Name & City	Balance \$
Savings Bonds	#	Bank Name & City	Value \$
	#	Bank Name & City	Value \$
Mutual Funds Account #	Name of bank/brokerage	Interest/Dividends \$	Value \$
	Name of bank/brokerage	Interest/Dividends \$	Value \$
Stocks	Name of bank/brokerage	Interest/Dividends \$	Value \$
	Name of bank/brokerage	Interest/Dividends \$	Value \$
Bonds	Name of bank/brokerage	Interest/Dividends \$	Value \$
	Name of bank/brokerage	Interest/Dividends \$	Value \$
Other Investments & Assets	Name of bank/brokerage	Interest/Dividends \$	Value \$
	Name of bank/brokerage	Interest/Dividends \$	Value \$
TOTAL VALUE OF ALL ASSETS			\$

Real Estate &/or Investment Property

Do you own any property? _____ Location _____

Type of Property _____ Rental Income Amount \$ _____ Appraised Market Value \$ _____

Does any member of the household have asset (s) owned jointly with a person NOT a member of the household as listed on Page 1? _____ *If Yes*, list the value and explain what the asset is:

Do they have access to the joint asset (s)? _____

Has anyone in the household sold or disposed of any property or other assets in the last 2 years (Example: Given away money to relatives; set up Irrevocable Trust Accounts; turned over property to family/friends)? _____ *If Yes*, describe the asset, date of transaction, market value (if property, stocks, etc) or amount disposed of (cash gifts, etc.): _____

E. LANDLORD REFERENCES

Current landlord _____ Phone _____

Address _____

Dates of residency _____

Previous landlord _____ Phone _____

Address _____

Dates of residency _____

F. ADDITIONAL INFORMATION

Do you currently live in subsidized housing or receive a government rent subsidy? _____

Are you currently homeless, live in a dilapidated home or live in a home without one of the following: plumbing, toilet, tub/shower, kitchen, electricity, or heat? _____

Are you currently displaced from your home by natural disaster, government action, domestic violence, or forced to move to avoid reprisal, due to hate crimes, owner action or unit inaccessibility? _____

Have you used the facilities of a Homeless Shelter or ???? Where: When: How long did/have you stayed there?

Are you or any member of your household currently using an illegal substance? _____

Have you or any member of your household ever been convicted of a felony? _____
(Answering YES will not automatically exclude you from housing. A Criminal History background check will be run on you and your adult family members.)

If Yes, describe: _____

Have you, or any member of your family ever been evicted from any housing? _____
(Answering YES will not automatically exclude you from housing. A Rental History background check will be run on you and your adult family members.)

If Yes, describe: _____

Do you or any family member require a handicapped-modified unit? (Wheelchair accessible, etc) _____

Do you or any family member require a reasonable accommodation? (live-in aide, etc) _____
If Yes, please ask for a **Reasonable Accommodation Form**, available from Vashon HouseHold.

G. VEHICLE INFORMATION (ONE PARKING SPACE PER HOUSEHOLD, ALL OTHER VEHICLES MUST PARK ON STREET)

List all drivers in your household and any cars, trucks or other vehicles owned in your household:

1) Make & model _____ Year _____ License plate # _____

Driver Name _____ Driver license # _____

2) Make & model _____ Year _____ License plate # _____

Driver Name _____ Driver license # _____

3) Make & model _____ Year _____ License plate # _____

Driver Name _____ Driver license # _____

H. CREDIT REFERENCES (Please list two – can include banks, utility companies, loans, etc.)

1. Name _____ Acct. # _____ Phone _____

Address _____

2. Name _____ Acct. # _____ Phone _____

Address _____

I. PERSONAL REFERENCES (Please list two)

1. Name _____ Relationship _____ Phone _____

Address _____

2. Name _____ Relationship _____ Phone _____

Address _____

J. EMERGENCY CONTACTS (to be notified in case of emergency) (Please list two)

1. Name _____ Relationship _____ Phone _____

Address _____

2. Name _____ Relationship _____ Phone _____

Address _____

RELEASE STATEMENT

I/we hereby authorize Mukai Commons & Vashon HouseHold, and their representatives to obtain and verify information and materials necessary to complete the processing of this application. This authorization includes bank records, credit records, employers, and information from state and federal agencies. _____

I/we certify that this will be my/our permanent residence and that I/we will not maintain a separate subsidized rental in a different location. _____

I/we understand that I/we must pay first month’s rent and a security deposit prior to occupancy.____

I/we understand that my/our eligibility for housing at Eernisse Apartments is based on income limits and other applicable selection criteria. I/we also understand I/we must report any changes in the above information to management in writing. _____

I/we understand that I/we will be required to successfully complete a criminal background check, a credit history check and verification of income and housing references. _____

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 occupation. _____

All adult applicants, 18 or older, must sign application.

Date _____ Applicant signature _____

Date _____ Other applicant (18 or over) _____

Date _____ Other applicant (18 or over) _____

Date _____ Other applicant (18 or over) _____

MINORITY STATUS

You are requested to provide the following information about your race, national origin and gender. This information is requested in order to assure the federal government, acting through HUD, that Vashon HouseHold is complying with federal laws prohibiting discrimination against applicants on the basis of race, color, national origin, religion, sex, familial status, age and handicap. You are not required to furnish this information, but are encouraged to do so. If you choose not to furnish it, the owner is required to note the race/national origin and gender of applicants on the basis of visual observation or surname. This information will not be used in evaluating your application or to discriminate against you in any way.

RACE (Mark One)

- _____ American Indian or Alaskan Native
- _____ Asian
- _____ Black or African American
- _____ Native Hawaiian or Pacific Islander
- _____ White

ETHNIC GROUP

- Hispanic _____
- Not Hispanic _____

GENDER

- _____ Male
- _____ Female

Return completed application to:

Mail to:

Mukai Commons/VHH
P.O. Box 413
Vashon, WA 98070
206-463-4880



Deliver to:

Vashon HouseHold Office
17300 96th Place SW
Vashon, WA 98070
206-463-4880

