



Jewel Lake Villa Apartments  
 8980 Blackberry St.  
 Anchorage, AK 99502  
 (907) 243-0718 fax (907) 243-7605

**For JLV Use Only**

Date \_\_\_\_\_

Time \_\_\_\_\_

Program \_\_\_\_\_

**APARTMENT RENTAL APPLICATION**

Bedroom Size Wanted \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Message Phone \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

**INCLUDING YOURSELF, LIST ALL PEOPLE WHO WILL BE LIVING WITH YOU**

<u>Name</u>	<u>SSN</u>	<u>Relationship</u>	<u>DOB</u>	<u>Place of Birth</u>
1) _____	_____	SELF/HEAD	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____

Do you anticipate adding to your household in the next twelve months? \_\_\_\_ Yes \_\_\_\_ No

How did you hear about Jewel Lake Villa Apartments? \_\_\_\_\_

**RESIDENTIAL HISTORY FOR EACH HOUSEHOLD MEMBER 18 YEARS OR OLDER**

◆ Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Move- out date \_\_\_\_\_ Is this subsidized housing?  Yes  No Landlord's Phone \_\_\_\_\_  
 Move-in date \_\_\_\_\_ Landlord's Name \_\_\_\_\_  
 Reason for moving \_\_\_\_\_ Rent amount \$ \_\_\_\_\_ per month

◆ Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Move- in date \_\_\_\_\_ Move- out date \_\_\_\_\_ Was this subsidized housing?  Yes  No  
 Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_  
 Reason for moving \_\_\_\_\_ Rent amount \$ \_\_\_\_\_ per month

◆ Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Move- in date \_\_\_\_\_ Move- out date \_\_\_\_\_ Was this subsidized housing?  Yes  No  
 Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_  
 Reason for moving \_\_\_\_\_ Rent amount \$ \_\_\_\_\_ per month

◆ Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Move- in date \_\_\_\_\_ Move- out date \_\_\_\_\_ Was this subsidized housing?  Yes  No  
 Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_  
 Reason for moving \_\_\_\_\_ Rent amount \$ \_\_\_\_\_ per month

## EMPLOYMENT

Present Employer \_\_\_\_\_ Address \_\_\_\_\_  
Date Hired \_\_\_\_\_ Monthly Income \_\_\_\_\_  
Supervisor \_\_\_\_\_ Supervisor Phone \_\_\_\_\_  
Previous Employer \_\_\_\_\_ Address \_\_\_\_\_  
Date Hired \_\_\_\_\_ Ending Date \_\_\_\_\_  
Monthly Income \_\_\_\_\_ Reason for leaving \_\_\_\_\_

## OTHER INCOME

List sources of income received by all members of household. This includes **Wages, Social Security, ATAP, APA, Child Support, Alimony, Alaska Permanent Fund Dividend and any other** monthly income you may receive.

<u>Who Receives Income</u>	<u>Source of Income</u>	<u>Annual Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## NET FAMILY ASSETS

List **all** assets held by all family members of household such as cash held in savings & checking accounts, safety deposit boxes, trusts, equity in rental property or other capital investments, stocks, bonds, treasury bills, certificate of deposits, money market funds, individual retirement & Keogh accounts, retirement & pension funds, lump sum payments, personal property held as an investment, real estate holdings and any other asset held. Also include any of the aforementioned assets that have been disposed of within past **TWO YEARS**.

<u>Type</u>	<u>Name</u>	<u>Account Number</u>	<u>Cash Value</u>	<u>Annual Income</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## PERSONAL REFERENCES and/ or NEAREST RELATIVE

1) \_\_\_\_\_  
Name & Address Relationship Phone #

2) \_\_\_\_\_  
Name & Address Relationship Phone #

3) \_\_\_\_\_  
Name & Address Relationship Phone #

**Has anyone in your household been convicted of a felony?**  Yes  No

If yes, Please explain \_\_\_\_\_

**Has anyone in your household been charged with a misdemeanor?**  Yes  No

If yes, please explain \_\_\_\_\_

**Does anyone in your household have any criminal charges pending?**  Yes  No

If yes, please explain \_\_\_\_\_

**Is anyone in your household required to register as a sex offender?**  Yes  No

If yes, who? \_\_\_\_\_

**Does anyone in your household owe Jewel Lake Villa or any subsidized housing program money?**  Yes  No

If yes, what housing program and how much is owed? \_\_\_\_\_

**SIGNATURES**

Applicant certifies that the information contained in this application is correct. False statements and/ or omissions may be cause for application denial or lease termination.

<b>Warning: Title 18, Section 1001 of the United States Code States that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements in this application. Such false or fraudulent statements are punishable as crimes under Title 11 and 12 of the Alaska Statutes.</b>	
▷Signature of Head of Household: _____	Date _____
▷Signature of Spouse/ Co-tenant _____	Date _____
▷Signature of Adult Household Member: _____	Date _____
▷Signature of Adult Household Member _____	Date _____
▷Signature of JLV Representative, Title _____	Date _____

"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).\*\*"

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**Notice of the Availability of Reasonable Accommodation**

If you need:

1. A change in our policies or procedures.
2. A repair or change in your apartment.
3. A repair or change to come other part of the property.
4. A change in the way we communicate with you

Because of a disability, you may request this change, which is called a "reasonable accommodation". If your request is reasonable and if it is not a financial hardship for the property owner, we will attempt to make the changes you need. We will make a decision as soon as possible, at least within ten (10) days unless you agree to an extension of time. We will let you know if we need more information or verification from you or if we would like to discuss other ways of meeting your needs. If we reject your request, we will explain our decision, and you may provide us additional information. If you require assistance in using the form, or if you want to give us your request in another way, we will gladly help you

**Notice to All Tenants & Applicants**

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Please note the attached procedure for auxiliary aids and reasonable accommodation request:

**Notice of Auxiliary Aids**

Jewel Lake Villa Apartments has on-site a TTY device for the hearing impaired that works with the current telephone system in the office for communicating with the applicants and beneficiaries by telephone and current tenants.

Jewel Lake Villa Apartments will meet any request for auxiliary aids by tenants and applicant(s) that might require a need for any large print documents, tape recording, Braille documents, flash cards, and use of readers and interpreters.

Jewel Lake Villa Apartments does not discriminate on the basis of race color, national origin, religion, sex familial status, physical or mental disability.

**Request for a Reasonable Accommodation**

The following member(s) of my household has a disability: \_\_\_\_\_

The requested accommodation is: \_\_\_\_\_

This accommodation is needed because: \_\_\_\_\_

Is this request required by a doctor/physician? \_\_\_\_\_

If the answer is yes please include the name, address, and phone number of the physician:

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

As a recipient of federal money, Jewel Lake Villa Apartments is required to provide the following information to the United States Department of Housing and Urban Development (HUD) on the clients that we serve. Your response is voluntary. This information will not be used to determine your eligibility for housing.

The racial and ethnic categories for Federal statistics and administrative reporting are defined as follows:

**ETHNICITY**

**Hispanic:** A person of Mexican, Puerto Rican, Cuban, Central or South American or Spanish culture or origin, regardless of race.

**RACE**

**American Indian or Alaskan Native:** A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

**Asian of Pacific Islander:** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example China, India, Japan, Korea, the Philippine Islands, and Samoa.

**Black:** A person having origins in any of the black racial groups of Africa.

**White:** A person having origins in any of the origins of Europe, North Africa, or the Middle East.

**Please categorize yourself in terms of the race and ethnic categories below.**

\_\_\_\_\_ White

\_\_\_\_\_ Black

\_\_\_\_\_ American Indian or Alaskan Native

\_\_\_\_\_ Asian or Pacific Islander

\_\_\_\_\_ Hispanic

\_\_\_\_\_ Other

Do you have a disability?

\_\_\_\_\_ Yes      If yes, please indicate the type of disability \_\_\_\_\_

\_\_\_\_\_ No

Name \_\_\_\_\_

Date \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

To Whom It May Concern:

The person named below is a Tenant/Applicant for dwelling unit and rent assistance in this housing project. One of the requirements of the Federal law, which provides rent assistance, is that family incomes must be within the limits set by HUD. The information requested below be for the purpose of determining eligibility and will be kept in STRICT CONFIDENCE.

**I/We authorize and direct any Federal, State or local agency organization, business, or individual to release to Jewel Lake Villa Apartments, any information or materials needed to complete and verify my application for participation and/or to maintain my continued eligibility under HUD.**

I/We understand that depending on program policies and requirements, previous/current information regarding my household as needed. Verifications and inquires that may be requested include but are not limited to:

Credit Providers/Credit Bureau  
Personal References  
Current/Prior Landlords  
Courts and Post Offices  
Schools and Colleges  
Law Enforcement Agencies  
Support/Alimony  
Past/Present Employers  
Veterans Administration  
Retirement Systems

Welfare Agencies/Support Enforcement  
Housing Agencies  
Military Pay  
State Employment Agencies  
Social Security Administrations  
Medical/Health Care Providers  
Banks/Other Financial Institutions  
Utility Companies  
Child Care Providers  
Public Records

\_\_\_\_\_  
▷Signature: Head-of-household  
\_\_\_\_\_  
Printed name: Head-of-household  
\_\_\_\_\_  
Street Address  
\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
▷Signature: Co- applicant  
\_\_\_\_\_  
Printed name: Co- applicant  
\_\_\_\_\_  
Street Address  
\_\_\_\_\_  
Social Security Number

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