For Office Use Only	Date Rec'd	Time Rec'd	OP 20
		y Rental Application nent Financed Properties	
Please note that this is a prelim	inary application and gi	ives no lease or rent rights.	
Community Maplewood Ma	nor	Office Phone989-826-6124	Date
Unit Size 🗌 1	2 3 4	Unit Type: 🗌 Apartment 🗌] Studio 🛛 Townhouse
Nould you or a member of you	r household benefit fron	n the design features of a barrier free	e unit? 🗌 Yes 🗌 No
Applicant:		EmailF	Phone (
		EmailF	
Current Marital Status: 🔲 Unr	narried 🗌 Married 🗌] Widowed 🛛 Separated 🗌 Di	vorced
Do you have any pets: 🔲 Ye	s 🗌 No. If yes, please	e list type of pet:	
How were you referred to our c	ommunity?		
5	·		
	An	blicant's History	
f you have resided at additio		the past five (5) years, please attac	ch Previous Address
Information on a separate sh	eet.		
Applic	ant:	Co-A	pplicant
Current Address:		Current Address:	
Date: From	Rent: \$	Date: From	Rent: \$
То:		То:	
Reason for Moving: Current Landlord:		Reason for Moving: Current Landlord:	
Addross:		Addross	
Phono		Dhana	
Previous Address:		Previous Address:	
Date: From	Rent: \$	 Date: From	Rent: \$
To:		То:	
Reason for Moving:		Reason for Moving:	
S		Previous Landlord:	
Previous Landlord: Address: Phone		Address: Phone	
		Address:	

Reason for Moving: _ Previous Landlord:		Reason for Moving Previous Landlord	
Address:		Address	:
Phone _		Phone	e
_			



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Please list all persons that will occupy the residence.

Name	Maiden Name		Relationship of Head	Social Security
(First, Middle Initial, Last)	(If Applicable)	Date of Birth	Of Household	Number
1.			Head of Household	
2.				
3.				
4.				
5.				
6.				

	Employment							
<u>Applicant</u>			<u>Co-Applicant</u>					
Employer:	yer: Employer:							
Address:			Address:					
Phone:			Phone:					
Length of Emplo	oym <u>ent:</u>		Length of Empl	oyment:				
Position Held:			Position Held:					
Salary/Wage:		Per:	Salary/Wage:		Per:			
Supervisor:			Supervisor:					
Status:	Full-Time:	Part-Time	Status:	Full-Time:	Part-Time:			
List average ho	urs per week worked	:	List average ho	ours per week worke	ed:			

Total household income from all other sources (i.e. social security pension, child support, Section 8 Voucher, etc):

Source:	Amount: \$	Frequency:
Source:	Amount: \$	Frequency:
Source:	Amount: \$	Frequency:
Do you or any member of your household engage in c have you previously been convicted of the same?		egal distribution of a controlled substance or
If you answered "yes" to the above question, have you are you presently enrolled in such a program? Yes If "yes", please explain:	□ No	
Have you or any member of your household ever been If "yes", please explain including charges and dates:		
Are you, or any member of your household subject to Yes No. . If "yes", please explain:		
Have you ever received an eviction notice from your cu If "yes", please explain:		
Have you ever had a Landlord / Tenant Judgment / Ord regard to your previous residency? Yes No If "yes", please explain:	Ũ	
Do you, or anyone in your household, or guests, smoke	or intend to smoke?	□Yes □ No





<u>Provide asset information below:</u> (Including but not limited to: Checking, Savings, Debit Card, Real Estate, 401k, IRA, Stocks, Bonds, etc)

Type of <u>Assets</u>	Name of Bank,		Balance/	Rate of			
	Stock or Bond	Account Number	Current Value	Interest	<u>Dividend</u>	Real Estate	
1.							
2.							
3.							
4.							
5.							
Have you disposed of any assets in the last two years? Yes No If "yes", please list asset and value received: Are you a student? Yes No. If yes: Part-time student Full-time student Are any members of your household full-time students? Yes No							
	Have you or any member of your household lived in subsidized housing? Yes No If "yes", when and where?						
misrepresenting info	Have you ever committed fraud in a subsidized housing program or been requested to repay money for knowingly misrepresenting information for such housing programs? Yes No If "yes", please explain:						

ADJUSTMENTS FOR INCOME:

Some applicants may qualify for a medical adjustment or other income adjustment. Do you qualify for any of the following:

Are you disabled or over the age of 62 years? If yes, do you have medical expenses that are not covered by insurance?	☐ Yes ☐ Yes	=
Do you pay childcare expenses that allow you to work or attend school?	🗌 Yes	🗌 No
Do you pay expenses for care of an individual with disabilities that allow you to work?	🗌 Yes	🗌 No



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PERSONAL REFERENCES:	List 3 people (not related to you) that we can call for a personal reference:					
Name	Address/City/Zip	Relationship	Telephone Number			
1.						
2.						
3.						

Applicant's certification that the unit applied for will be the applicant household's primary residence and it does/will not maintain a separate subsidized rental unit in a different location.

I fully understand that 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 to any department or agency of the United States. I therefore, certify that the foregoing information is true and complete to the best of my knowledge. I authorize inquiries to be made to verify the statements above. Falsified statements shall be grounds for eviction.

I/We certify that the rental unit which I/We will occupy will be my/our primary residence and further certify that I/We do not and will not maintain a separate subsidized rental unit in a different location. I acknowledge that I am responsible to inform the office of any changes to any part of this application (i.e. address, phone, income).

Additional information will be required at a later date to complete the processing for residency.

The information contained in this application is treated confidentially. No information will be revealed to anyone without the express written consent of the applicant.

Head of Household

Date

Co-Applicant, Spouse/Co-Head

Date





RACE AND ETHNIC DATA REPORTING Rural Development Financed Properties

The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.

<u>APP</u>	PLICANT	<u>-00</u>	APPLICANT
<u>ETH</u>	NICITY:	<u>ETH</u>	NICITY:
	Hispanic or Latino		Hispanic or Latino
	Not Hispanic or Latino		Not Hispanic or Latino
RAC	E (Mark one or more):	RAC	E (Mark one or more):
	(1) American Indian/Alaska Native		(1) American Indian/Alaska Native
	(2) Asian		(2) Asian
	(3) Black or African American		(3) Black or African American
	(4) Native Hawaiian or Other Pacific Islander		(4) Native Hawaiian or Other Pacific Islander
	(5) White		(5) White
<u>GEN</u>	IDER:	<u>GEN</u>	IDER:
	Male		Male
	Female		Female





DISCLOSURE UNDER FAIR HOUSING REPORTING ACT AND AUTHORIZATION

KMG Prestige, Inc., Affinity Property Management, LLC. and/or <u>Maplewood Manor</u> Apartments is requesting a copy of your Consumer Report or Credit Report to assist it in its consideration for:

Employment purposes, or

x Housing at <u>Maplewood Manor</u> Apartments

We are required as part of our screening process to secure a Consumer Report on you to assist us in our determination. Under the Fair Credit Reporting Act, 15 U.S.C.A. 1681 et seq. we must first seek your written consent to obtain your consumer or credit report. The information obtained will not be used in violation of any applicable Federal or State law.

Pursuant to the Fair Credit Reporting Act, 15 U.S.C.A. 1681a the following definitions are provided to you:

"Consumer" means an individual.

"Consumer Report" means any written, oral, or other communication of any information by a consumer reporting agency bearing on a consumer's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing the consumer's eligibility for a) credit or insurance to be used primarily for personal, family, or household purposes; b) employment purposes; or c) any other purpose authorized in the act.

"Investigative Consumer Report" means a consumer report or portion thereof in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the consumer reported on or with others with whom he is acquainted or who may have knowledge concerning any such items of information.

"Employment Purposes" means a report for the purpose of evaluating a consumer for employment, promotion, reassignment or retention as an employee.

"Adverse Action" means (i) a denial of employment or any other decision for employment purposes that adversely affects any current or prospective employee; (ii) a denial or cancellation of, an increase in any charge for, or any other adverse or unfavorable change in the terms of credit or any license or other reasons described in section 168b(a)(3)(D) of the Act; or (iii) an action or determination that is made in connection with an application that was made by, or a transaction that was initialed by, any consumer, or in connection with a review of an account under the act and adverse to the interests of the consumer.

In accordance with the company policy we must obtain your consent in writing authorizing us to obtain a "Consumer Report" and/or Investigative Report on you for **employment** purposes. Upon receipt of your written authorization, we will obtain the written report. If we consider any information in that report which directly and adversely affects you in our employment related decision, you will be provided with a copy of the Consumer Report and a summary of your rights under the FCRA before a decision is final. Alternatively, you may contact the Federal Trade Commission about your rights under the Fair Credit Reporting Act.





If we are obtaining a "Credit Report" with respect to your application for housing, and should your application be rejected due to information contained on your credit report you will be provided with the name and address of the local credit bureau where within sixty (60) days of rejection, you can obtain a free copy of your credit report, dispute it's accuracy, and provide a consumer statement describing your position if you dispute the credit report. Pursuant to the Fair Debt Credit Reporting Act you will have the right to put into your report a statement explaining your position on the item under dispute. For further information, contact your State or Local consumer protection agency or your State Attorney General's office.

I have read the foregoing information referred to as a Fair Credit Reporting Disclosure and now hereby authorize KMG Prestige, Inc., Affinity Property Management, LLC., and/or Maplewood Manor Apartments to obtain a Consumer Report, Credit Report or Investigative Report on me from a consumer reporting agency or company for:

- **Employment purposes**
- Housing purposes Х
- \square Both

I understand that KMG Prestige, Inc., Affinity Property Management, LLC., and/or the Apartment Community referenced above will rely upon the information contained in the report. I further understand that I have rights to dispute any adverse decision which may be made against me by KMG Prestige, Inc., Affinity Property Management, LLC., and/or the Apartment Community. As set forth in the disclosure, I may seek additional advice or assistance from my local consumer protection agency or Attorney General's office.

I acknowledge that I have received a copy of this document for my records.

Applicant	Date
Applicant	Date
Witness	Date



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AUTHORIZATION FOR CRIMINAL HISTORY CHECK

NOTICE TO APPLICANTS: The information requested below is for the sole purpose of conducting a background investigation, which includes, among other things, a criminal conviction check. The existence of a prior criminal conviction will not necessarily make you ineligible for housing with KMG Prestige. It is KMG Prestige's policy to evaluate any adverse information obtained in the background investigation based on a range of factors including, but not limited to rental history. Information regarding age, sex and race will not be a factor in any housing decision.

Full Name (no nicknames) Maiden Names(s), Nickname(s), Other	☐ Male	Eremale			
Social Security Number			Date	of Birth	
Driver's License Number				State	
Is Your Driver's License Valid?	🗌 Yes	🗌 No	⇔	Please give details	
All addresses for the last 7 years: (Stree In the event you do not remember the eresidence. Street Addres 1	exact street address ss // // // //	s, please includ	de a d	city, state and the a	approximate dates of Years From-To /
6		/ 		/	_/

I expressly authorize all personnel, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any and all information concerning my qualifications for employment positions applied for and the information given by me herein. In consideration for being considered for housing, I release KMG Prestige, related entities, as well as any individual or entity providing information, from any and all liability in connection with any inquiries and investigations made, information they give and any decisions made or action taken concerning my employment based on such information. I also do not require a copy of any disclosure of the nature and scope of the investigation. I understand that any offer of apartment rental from KMG Prestige is based upon my successful completion of the background screening. I also understand that I have a right to review all disputed information and to follow up with the law enforcement agency to clear up any discrepancies. This authorization is good for one year from the date of signing.

Χ			
	Signature	Date	



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Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <u>http://www.ascr.usda.gov/complaint_filing_cust.html</u> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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Rural Housing and Community Programs

Things You Should Know About USDA Rural Rental Housing

Don't risk losing your chances for federally assisted housing by providing false, incomplete, or inaccurate information on your application or recertification

Penalties for Committing Fraud

You must provide information about your household status and income when you apply for assisted housing in apartments financed by the U.S. Department of Agriculture (USDA). USDA places a high priority on preventing fraud. If you deliberately omit information or give false information to the management company on your application or recertification forms, you may be:

•Evicted from your apartment; •Required to pay all the extra eental assistance you received based on faulty information; •Fined:

•Put in prison and/or barred from receiving future assistance.

Your State and local governments also may have laws that allow them to impose other penalties for fraud in addition to the ones listed here.

How To Complete Your Application

When you meet with the landlord to complete your application, you must provide information about:

- All Household Income. List all sources of money that you receive. If any other adults will be living with you in the apartment, you must also list all of their income. Sources of money include:
 - -Wages, unemployment and disability compensation, welfare payments, alimony, Social Security benefits, pensions, etc.;
 - -Any money you receive on behalf of your children, such as child support, children's Social Security, etc.;
 - Income from assets such as interest from a savings account, credit union, certificate of deposit, stock dividends, etc.;
 - -Any income you expect to receive, such as a pay raise or bonus.

•All Household Assets. List all assets that you have. If any other adults will be living with you, you must also list all of their assets. Assets include:

- -Bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.;
- -Any business or asset you sold in the last 2 years for less than its full value, such as selling your home to your children.

•All Household Members. List the names of all the people, including adults and children, who will actually

live with you in the apartment, whether or not they are related to you.

Ask for Help if You Need It

If you are having problems understanding any part of the application, let the landlord know and ask for help with any questions you may have. The landlord is trained to help you with the application process.

Before You Sign the Application

- Make sure that you read the entire application and understand everything it says;
- Check it carefully to ensure that all the questions have been answered completely and accurately;
- Don't sign it unless you are sure that there aren't any errors or missing information.

By signing the application and certification forms, you are stating that they are complete to the best of your knowledge and belief. Signing a form when you know it contains misinformation is considered fraud.

- The management company will verify your information. USDA may conduct computer matches with other Federal, State or private agencies to verify that the income you reported is correct;
- Ask for a copy of your signed application and keep a copy of it for your records.

Tenant Recertification

Residents in USDA-financed assisted housing must provide updated information to the management company at least once a year. Ask your landlord when you must recertify your income.

You must immediately report:

- •Any changes in income of \$100 or more per month;
- •Any changes in the number of household members.

For your annual recertification, you must report:

- •All income changes, such as increases in pay or benefits, job change or job loss, loss of benefits, etc., for any adult household member;
- •Any household member who has moved in or out;
- All assets that you or your adult housemates own, or any assets that were sold in the last 2 years for less than their full value.

Avoid Fraud, Report Abuse

Prevent fraudulent schemes through these steps:

- Don't pay any money to file your application;
- •Don't pay any money to move up on the waiting list;
- •Don't pay for anything not covered by your lease;
- Get receipts for any money you do pay;
- •Get a written explanation for any money you are required to pay besides rent, such as maintenance charges.

Report Abuse: If you know anyone who has falsified an application, or who tries to persuade you to make false statements, report him or her to the manager. If you cannot report to your manager, call your local or state USDA office at 1 (800) 670-6553, or write: USDA, STOP 0782, 1400 Independence Ave., SW, Washington, DC 20250.

If You Disagree With a Decision

Tenants may file a grievance in writing with the complex owner in response to the owner's actions, or failure to act, that result in a denial, significant reduction, or termination of benefits. Grievances may also be filed when a tenant disputes the owner's notice of proposed adverse action.

Notice of Adverse Action

The complex owner must notify tenants in writing about any proposed actions that may have adverse consequences, such as denial of occupancy and changes in the occupancy rules or lease. The written notice must give specific reasons for the proposed action, and must also advise tenants of the "right to respond to the notice within 10 calendar days after the date of the notice" and of "the right to a hearing." Housing complexes in areas with a concentration of non-English-speaking people must send notices in English and in the majority non-English language.

Grievance Process Overview

USDA believes that the best way to resolve grievances is through an informal meeting between tenants and the landlord or owner. Once the owner learns about a tenant grievance, the process should begin with an informal meeting between the two parties. Owners must offer to meet with tenants to discuss the grievance within 10 calendar days of receipt of the complaint. USDA encourages owners and tenants to try to reach a mutually satisfactory resolution to the problem at the meeting.

Resident/Applicant Signature

Resident/Applicant Signature

Date

Date

If the grievance is not resolved, the tenant must request a hearing within 10 days of receipt of the meeting findings. The parties will then select a hearing panel or hearing officer to govern the hearing. All parties are notified of the decision 10 days after the hearing.

When a Grievance Is Legitimate

The landlord must determine if a grievance is within the established rules for the program. For example, "I want to file a complaint because the manager doesn't speak to me" is not a legitimate complaint. However, "I want to file a complaint because the manager isn't maintaining the property according to USDA guidelines" is a legitimate complaint. Below are examples of cases in which tenants may and may not file a complaint.

A complaint may not be filed with the owner/management if:	A complaint may be filed with the owner/management if:
USDA has authorized a pro- posed rent change.	There is a modification of the lease, or changes in the rules or rent that are not authorized by USDA.
A tenant believes that he/she has been discriminated against because of race, color, religion, national origin, sex, age, familial status, or disability. Discrim- ination complaints should be filed with USDA and/or the Department of U.S. Housing and Urban Development (HUD), not with the owner/manage- ment.	The owner or management fails to maintain the property in a decent, safe, and sanitary man- ner.
The complex has formed a ten- ant's association and all parties have agreed to use the associa- tion to settle grievances.	The owner violates a lease pro- vision or occupancy rule.
USDA has required a change in the rules and proper notices have been given.	A tenant is denied admission to the complex.
The tenant is in violation of the lease and the result is termina- tion of tenancy.	
There are disputes between tenants that do not involve the owner/management.	
Tenants are displaced or other adverse effects occur as a result of loan prepayment.	

PA 1998 December 2008