

# **BHC Management** Lincoln Mews I & II 4101 North Avenue Richmond, VA 23222 804-321-6225 tel. 804-321-6227 fax

Office Use	Only
Leasing Ag	ent
In house	Out house

60%

Time Date Stamp

### APPLICATION FOR RESIDENCY

#### Each Adult Household Member Must Complete a Separate Application Form.

40%

Lincoln Mews Apartments is a tax credit property; therefore, residents must meet the following qualifications:

1 Bedroom per 1-2 Persons

2 Bedrooms per 1-4 Persons **Household Limits:** 

3 Bedrooms per 3-6 Persons

4 Bedrooms per 4-8 Persons

Minimum Income: 2.5xmthly rent

**Income Qualifications:** 

	<b>40</b> /0	30 /0	00 /0
<b>Household Size</b>	<b>Maximum</b>	<b>Maximum</b>	<u>Maximum</u>
1 Person	\$21,200	\$26,500	\$31,800
2 Person	\$24,200	\$30,250	\$36,400
3 Person	\$27,240	\$34,050	\$40,860
4 Person	\$30,240	\$37,800	\$45,360
5 Person	\$32,680	\$40,850	\$49,020
6 Person	\$35,080	\$43,850	\$52,620

50%

Lincoln Mews- This community does not discriminate based on race, color, creed, religion, sex, national origin, ancestry, age, handicap, or disability of any person, familial status, the use of a guide or support animal because of the physical handicap of the user or because the user is a handler or trainer of support or guide animals or because of the handicap or disability of an individual with whom the person is known to have a relationship or association.

<u>Lincoln Mews</u> - strictly adheres to these anti-discrimination laws and the Owner agrees that this property will be listed, shown, leased and managed in accordance with these laws.

After reviewing the eligibility criteria, you should complete the application form. Please be sure to answer all questions completely in order to ensure the most prompt attention! When you are sure that you have answered all questions, return the application form to us. When your completed application form is received at our rental office, you will enter in the Initial Processing Phase. Again, thank you for your interest in our apartments. We look forward to receiving your completed application form.

## Credit Report

A credit check will be completed. The following items could cause your application to be rejected: any one judgment, other than medical, not remedied; any one credit obligation (single account) which is three (3) months or more delinquent; or any (one) repossession of material or personal property; or any one suit not remedied or pending.

#### **Landlord Reference**

A landlord check will also be completed. The following items could cause your application to be rejected: any one instance of leaving a prior residence owing a balance or without giving proper notice; any one eviction from a prior residence; any three (3) late payments of rent within a twelve (12) month period from a current or past residence; or any rental history questionnaire returned wherein the current or past landlord states that the applicant and/or his family or guests were destructive and/or disruptive to the apartment or surrounding areas.

## **Rejection Criteria**

An applicant will be rejected for occupancy if it is determined by the management that there is: substantial risk that the applicant will be unable or unwilling to maintain their apartment in the condition which would be required by the lease; substantial risk that the applicant will be unable or unwilling to meet the rental obligation on a consistent monthly basis; or substantial risk that the applicant will endanger the safety and/or well being of the apartment unit, community, or other resident.

- No pets are allowed except as outlined in our posted Pet Policy.
- No recreational or commercial vehicles allowed. 2.
- 3. Waterbeds only in ground floor apartments with proof of waterbed and/or renters insurance.
- In order to process an application, it must be fully completed and returned to the Rental Office along with a \$20 application fee. Please no cash.
- Security Deposits are non-refundable after 72 hours of making payment on approved applications. Denied applications are subject to receive security deposits back in the same manner in which payment was made. BHC Management is not responsible for any changes in application information or cancellations.

Waiting List
BHC Management maintains a waiting list for its properties. If there are no vacancies, management will inform you by phone or mail when we have a suitable unit for you. Please make sure your address and phone number is current so we can contact you. Please do not contact us for update status.

How did you hear about us?	

, in r	er to subsidize your	rent? YesNo_	
1. HOUSEHOLD MEMBERS Please list every person who will children. All members under the card to process application.			
Full Name	Age	Date of Birth	Social Security Number
a			
o. c.			
i.			
		-	
2. RENTAL HISTORY			
Present Address			
Street		City/St	tate/Zip
How Long? Yrs. Mos.	Amount of rent?	\$ Lease Ex	xpires
Telephone Number -Home ( ) Reason for Moving?			
Landlord:	Address:	Pho	ne:
Have you ever been evicted from an apar Explain:			
Previous address:			ng?
Street	City/St		-o. <u></u>
In order for you to be considered for tena			
In order for you to be considered for tenar Please fill in the following information a space.  1st Member	bout yourself. If you	are unemployed, write	e "NONE" in the employer
In order for you to be considered for tend Please fill in the following information a space.  Ist Member  Gross Annual Income \$ Employer:	bout yourself. If you	are unemployed, write  How long employed	e "NONE" in the employer
In order for you to be considered for tender Please fill in the following information a space.  Ist Member Gross Annual Income \$ Employer: Employer Address:	bout yourself. If you	are unemployed, write  How long employed	e "NONE" in the employer
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Other Men			
Gross Ann	ual Income \$		How long employed?
Employer:			
Employer .	Address:		
Employer	Phone:		Supervisor:
How long	mployer:employed?		
Tio w long	improject.		
Are you or	anyone in your household a full-	-time student?	Y Yes NoWho?
Pets are ac	cented conditionally. Do you ha	ve a net that v	ou intend on moving into the apartment with you? If so,
Please kee	p in mind that pets are not allow	ved without wr	ritten consent from Landlord and conditions must be met.
•	•		onvicted of a felony? YesNo
If yes, plea	se explain)		
Have you	or any other household member h	neen convicted	d of a misdemeanor involving violence, drug related
•	•		
	-		Yes If yes, please
explain			
5. VEH	CLE		
Make of ca	r:	Year:	Plate # and State:
Color:	nicle:		
Second ver	nicle:		
Will they b	e parked on the property?		
	m of two vehicles are allowed pe		
			d commercial vehicles will not be permitted to park on the
property.			
6. CREI	NIT		
	references (Bank loans, finance o	companies der	enartment stores etc.)
2			
4			
Name and	address of your bank		
Charlein	Name and address of honly		
Checking:	Name and address of bank		
	Account #		Interest Rate
	Estimated six -month average	<b>3</b>	
Checking:	Name and address of bank		
			Interest Rate
	Estimated six -month average	\$	
Savings:	Name and address of bank		
Savings.	Traine and address of bank		
	Account #		Interest Rate
	Actual balance \$		
Savings:	Name and address of bank	_	
			Interest Rate
	Account #		Interest Rate
	Actual balance \$		

Do you have any stocks, bonds, CD's, IRA's 401k's, money market accounts, etc? Please list:  Please answer each of the following questions:  Yes No Amount  Do you own a home or other real estate? Do you rent your home to anyone? Are you employed full-time, part-time or seasonally? Do you expect to work for any period during the next 12 months? Do you work for someone who pasy you in eash? Are you on leave of absence from work due to lay-off, medical, maternity or military leave? Do you now receive or expect to receive unemployment benefits? Does anyone in your household now receive or expect to receive child support? If yes, please state the name: Is any member of your household entitled to child support that he/she is not now receiving? If yes, please state the name: Do you now receive or expect to receive alimony payments? Are you entitle to alimony payments that you are not now receiving? Do you receive or expect to receive welfare assistance? Do you receive to receive to receive welfare assistance? Do you receive to receive for receive benefits? Do you expect to receive form from a pension or an annuity? Do you receive regular cash contributions from individuals not living in the unit or from agencies?  7. EMERGENCY CONTACTS (Must complete with full address and phone number) Name:  Relationship: Address: Phone: City: State Zip Code:  Name: Relationship: Address: Phone:	Have you disposed of any assets in the last two years? If yes, please list:				
Do you own a home or other real estate? Do you rent your home to anyone? Are you employed full-time, part-time or seasonally? Do you expect to work for any period during the next 12 months? Do you work for someone who pays you in cash? Are you on leave of absence from work due to lay-off, medical, maternity or military leave? Do you now receive or expect to receive unemployment benefits? Doses anyone in your household now receive or expect to receive child support? If yes, please state the name: Is any member of your household entitled to child support that he/she is not now receive or expect to receive alimony payments? Are you entitled to alimony payments that you are not now receiving? Do you row receive or expect to receive welfare assistance? Do you receive or expect to receive sistance? Do you receive or expect to receive soils Security benefits? Do you receive or expect to receive income from a pension or an annuity? Do you receive regular cash contributions from individuals not living in the unit or from agencies?  7. EMERGENCY CONTACTS (Must complete with full address and phone number) Name:  Relationship:  Address:  Phone:  Address:  Phone:  Address:  Phone:	Do you have any stocks, bonds, CD's, IRA's 401k's, money market accounts, etc? Please list:				
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support?  If yes, please state the name:  Is any member of your household entitled to child support that he/she is not now receiving?  If yes, please state the name:  Do you now receive or expect to receive alimony payments?  Are you entitled to alimony payments that you are not now receiving?  Do you receive or expect to receive welfare assistance?  Do you receive or expect to receive Social Security benefits?  Do you expect to receive income from a pension or an annuity?  Do you receive regular cash contributions from individuals not living in the unit or from agencies?  7. EMERGENCY CONTACTS (Must complete with full address and phone number)  Name:  Relationship:  City:  State  Zip Code:  Name:  Relationship:  Address:  Phone:			_		
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Address:       Phone:         City:       State       Zip Code:         Name:       Relationship:         Address:       Phone:			ber)		
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Name: Relationship: Address: Phone:	Address:		Phone:		
Address: Phone:	City: State	Zip	Code:		
Address: Phone:	Name:	_ Relationship:			
	Address:		Phone:		

I/We understand that our deposit will become the Security Deposit when the application is approved. (The deposit is only refunded if the application is denied.)

As required by the Virginia Residential Landlord and Tenant Act, anyone who is required to provide personal information about him/her must be legally informed whether he/she is required to provide such information or whether he/she may refuse to supply the information requested.

## **Privacy Act Statement**

The information on this form is being collected by an organization representing VHDA to determine an applicant's eligibility and the recommended unit size. It will be used to provide the basis for managing the program covered by this form, for protecting the State's financial interest, and for verifying the accuracy of the information furnished. The information may be released to appropriate Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations or prosecutions. Failure to provide any information will result in the delay or rejection of your application and approval.

## STATEMENTS BY ALL ADULT HOUSEHOLD MEMBERS

- 1. We certify that all information given in this application and any addenda thereto is true, complete and accurate. We understand that if any of this information is false, misleading or incomplete, management may decline our application or, if move-in has occurred, terminate our Rental Agreement.
- 2. We authorize **Lincoln Mews Apartments** to make any and all inquires to verify this information either directly or through information exchanged now or later with rental, credit screening services, or <u>criminal screening services</u>, and to contact previous and current landlord or other sources for credit and verification confirmation, which may be released to appropriate Federal, State, or local agencies.
- 3. If our application is approved, and move-in occurs, we certify that only those persons listed in this application will occupy the apartment, that they will maintain no other place of residence, and that there are no other persons for whom we have, or expect to have, responsibility to provide housing.
- 4. We agree to notify management in writing immediately regarding any changes in household address, telephone numbers, income, and household composition.
- 5. We have read and understand the information in this application, in particular the information contained in the Instructions for Head of Household; and we agree to comply with such information.
- 6. We have been notified that the Resident Selection Criteria which summarizes the procedures for processing applications is posted in the management office.
- 7. We understand that if this application is placed on a Waiting List, we may request sample copies of the Rental Agreement and House Rules. If this application is approved, and move-in occurs, we certify that we will accept and comply with all conditions of occupancy as set forth therein, including specifically all conditions regarding pets, damages and Security Deposits.
- 8. We authorize management to obtain one or more "consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S.C. Section 1681a(d), seeking information on our credit worthiness, credit Standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

#### FAIR CREDIT REPORTING ACT

Date Approved

Appeal Decision:

Applicant Notified in Writing on: \_

THIS IS TO INFORM YOU THAT AS PART OF OUR PROCEDURE FOR PROCESSING YOUR APPLICATION, AN INVESTIGATIVE REPORT MAY BE MADE WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH THIRD PARTIES – SUCH AS FAMILY MEMBERS, BUSINESS ASSOCIATES, FINANICAL SOURCES, FRIENDS, NEIGHBORS OR OTHERS WHO ARE ACQUAINTED WITH YOU. THIS INQUIREY INCLUDES INFORMATION AS TO YOUR CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, MODE OF LIVING, INCOME AND CREDIT BACKGROUND AND ALSO POLICE RECORDS. ALL INFORMATION YOU OR OTHERS GIVE US WILL BE HELD IN STRICT CONFIDENCE.

WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, NATIONAL ORIGIN, COLOR, CREED, AGE, SEX, HANDICAP, OR FAMILIAL STATUS.

BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL OF YOUR RESPONSES ARE TRUE AND COMPLETE AND AUTHORIZE THE OWNER/MANAGER TO VERIFY THIS INFORMATION THROUGH ANY SOURCE THAT IT DEEMS APPROPRIATE. ANY FALSE STATEMENTS ON THIS APPLICATION WILL BE GROUNDS FOR REJECTION OF YOUR APPLICATION.

I/WE HAVE READ AND UNDERSTAND THE ABOVE. Applicant's Name (PRINT) Date Applicant's Signature Applicant's Name (PRINT) Date Applicant's Signature Applicant's Name (PRINT) Applicant's Signature Date DO NOT WRITE BELOW THIS LINE - MANAGEMENT USE ONLY APPLICATION DISPOSITION: Approved Approved by: \_ Date Title Signature Disapproved \_\_\_\_\_\_\_Date Disapproved by: Title Reason(s) for Disapproval: Applicant Notified in Writing on: Applicant Appealed Decision on: \_ (Written notification attached) Applicant Appeal Reviewed by: \_\_\_ Date

Date Denied