



CATHOLIC HOUSING SERVICES
SERVING PEOPLE OF ALL BELIEFS



Tenant Eligibility Criteria

NW Region Workforce Housing

Applicant Processing

CHS has 5 housing communities in the NW Washington area that are set aside for working individuals and families or households on fixed incomes.

Located in Bellingham are; the WA Grocery Building with 36 studio units, Kateri Court with 40 units some 1-bdrm and some studios, and the Mt Baker Apartments with 84 units also some studios and some 1-bdrm. Villa San Isidro is located in Mt Vernon with 42 3-bdrm units.

And in Everett is the Monte Cristo Apartments with 69 units; studios, 1 bdrms and a few 2-bdrm units.

Admission Criteria:

Applicants must meet the minimum and maximum income limits for the Whatcom or Skagit County. Applicants must provide all necessary documentation for verification of income and assets before move-in. Household income must be a minimum of twice the tenant portion of rent. The maximum income must meet the requirements depending on the location and the income set aside as determined by our funders. The set aside vary by property and will be one of the following depending on the specific unit that is vacant;

- Extremely Low Income: 30% of Area Median Income (AMI)
- Very Low Income: 50% of AMI
- Low Income: 60% of AMI

Please see the current income limits published by the WA State Housing Finance Commission at:

<http://www.wshfc.org/limits/map.aspx>

Special Needs Set Asides

Some units have eligibility requirements based on special needs. All applicants, whether or not they meet these requirements, must provide verification of their eligibility status for these special needs set asides prior to move in.

Homelessness- The Monte Cristo has 12 units set aside for homeless households and applicants for these units must begin an application with Catholic Community Services, see information here; <https://ccsww.org/get-help/snohomish-island-counties/>. Kateri Court has 8 units set aside for homeless families that must begin an application with the Opportunity Council, see more information here; <https://www.opcco.org/basic-needs/housing-2/>.

The qualification of homelessness must exist at the time of application and move-in; homelessness is based on current status at move-in. In order to qualify for a homeless unit, applicants must provide:

- Proof of Homelessness
-

- Verification of Citizenship or legal residency
- Verification of Social Security Number
- Photo Identification
- Verification of income and assets

Disability- Units designed specifically for individuals with a physical impairment. "Physical impairment" is defined as Mobility, Auditory, or Visual impairment, which necessitates the permanent use of the features.

For all units designed specifically for wheelchair accessibility, priority will be given to those applicant households needing such features. If households to fill all specially equipped units are not identified, preference may be given to households with members whose physical or mobility impairment would be eased by the design of the accessible unit.

If unable to fill units with disabled households after advertising and actively marketing unit for a minimum of 30 days, unit may be leased to the next person who applies. The property manager must communicate to the household without impairment that they may be asked to transfer to a non-mobility unit with 30 days' notice in order to fill the unit with a household that has need of the features.

Violence Against Women Act (VAWA)

The Violence Against Women Act requires owners to provide special consideration, protections and confidentiality during the rental application process to applicants that request and qualify for protections under the Act due to dating violence, domestic violence, stalking and sexual assault. Applicants may discuss confidentially with the owner/management of this property if you would like more information or to claim protections under this Act.

Reasonable Accommodations

If you or anyone in your household requires accommodations, additional forms will be provided, including a verification form for your medical professional to complete and sign. Upon request, Catholic Housing Services will provide reasonable accommodations to people with disabilities so they can participate in our programs.

Fair Housing

Catholic Housing Services is committed to providing equal opportunity in the provision of housing. Residency is open to all qualified eligible persons in accordance with the Fair Housing Act which prohibits discrimination in housing and housing related transactions based on race, color, religion, sex, national origin, disability, gender identity, sexual orientation regardless of actual or perceived sexual orientation, and familial status. Residency is also open in accordance with Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color or national origin in a program or activity receiving federal financial assistance from HUD.

Adverse Action

If your application is declined for any reason, you will be issued an Adverse Action Notice. If you disagree with the determination, you may appeal through the CHS grievance policy, which will be provided to you upon request.

CHS Residential Qualification Criteria-For facilities outside of Seattle city limits.

An application needs to be completed for *each* household member over the age of 18. Payment of the screening fee of \$35.00 is required to proceed. Valid photo identification will be required of all applicants. Additional requested documentation or information must be provided within 72 hours to continue the application process.

Rental History: Housing references must be provided. References for the past three years will be sought from landlords where a person was in a rental agreement. If transitional housing or shelters are currently used then references from shelter providers and/or case managers can be provided. References from family and friends are not preferred and will need to be verified by the property owner or property ownership records. Ability to pay rent, maintain housing standards and lease compliance will be evaluated.

Credit History: Credit will be reviewed on each adult household member for outstanding balances to utility companies, prior landlords, verification of provided information, unreported assets and open bankruptcy proceedings. Generally poor credit will not result in denial of application.

Income: Monthly gross verifiable income must be equal to at least 2 times the *resident portion of the rent* and not exceed the income and eligibility requirements for property funders/programs.

Occupancy: Household size must be a minimum of one person per bedroom unless a funder of the property requires other standards. Properties with a Large Household set aside will require a minimum of 4 occupants for a 3 bedroom home. Applicant head of household must be 18 years or older. A maximum of 2 people per bedroom plus 1 is allowed, except at Villa San Isidro where just 2 people per bedroom total is allowed.

Denial of Application may result from the following:

- Verified unpaid eviction appearing on credit report or confirmed with landlord within the last 3 years will require a payment plan with the landlord or may be declined.
- Unpaid rental collection verified on credit report and/or balance owing to landlord will require a payment plan or may be declined.
- Falsification of rental application or failure to provide required information
- Inappropriate conduct during the application process
- Full-time student households must qualify for one of the specific allowable exemptions
- Verification of Social Security or acceptable alternate ID form must be completed
- Delay in providing appropriate documentation as requested within 72 hours

We do not automatically deny applicants based on criminal history. Rather, criminal history is considered based on the nature of the offense and time passed since the date of final disposition (e.g. applicant was released from prison, probation or parole). We limit consideration to those convictions, the dates of final disposition of which pre-date the report by no more than seven years. Note that Felony convictions for the following offenses may result in denial:

Murder (1 st and 2 nd degree)	Kidnapping (All counts)
Manslaughter (1 st degree)	Theft (1 st & 2 nd degree)
Assault (1 st , 2 nd & 3 rd degree)	Burglary (1 st , 2 nd degree & vehicle prowling 1 st degree & Residential)
Robbery (1 st & 2 nd degree)	Malicious Mischief (1 st degree)
Any Terror Related Activity	Arson (1 st , 2 nd degree & Reckless Burning 1 st degree)

Criminal conviction which results in a registered sex offender requirement and/or any sex offender registry requirement. A criminal records search will be performed for felony offenses only.

In compliance with state and federal consumer reporting law, you are hereby advised that a screening will be conducted regarding information contained in your rental application. The report may contain information regarding your credit-worthiness, character, general reputation, personal characteristics and mode of living. Moco, Inc., whose address is PO Box 2826, Seattle, WA 98111, and whose telephone number is (800) 814-8213, will conduct the screening and to release information obtained to landlord and landlord's agents. If the application is denied or approved conditionally based upon information contained in the report, you may request and obtain a copy of the report. You have the right to dispute the accuracy of information contained in the report. You may have additional rights under both state and federal law.

Applicant(s) Information Please print clearly.

Applicant Name: _____ Date of Birth: _____

Gross Income (before taxes): _____ Source of Income: _____

Phone Number: _____ Mailing Address: _____

Have you in this calendar year or will you in next calendar year be a student? (K-12, college, online classes, etc.) If yes, full time or part time? Yes No (circle one)

Are you or a member in your household disabled? Yes No (circle one)

Is anyone in the household registered as a life time sex offender? Yes No (circle one)

Anyone in your household ever have evictions in the past 5 years? Yes No (circle one)

Drug and/or violence-related criminal convictions? Yes No (circle one)

If yes to the above question, please provide date(s) and explanation of the offense(s). You may also provide any additional information regarding circumstances surrounding the offense(s) or information related to rehabilitation, good conduct, etc since the offense(s). Attach additional pages if needed.

Name of additional applicants: _____ Date of Birth: _____

Gross Income (before taxes) of additional applicant: _____ Source of Income: _____

I understand that falsifying, manipulating, intentionally deceiving or otherwise purposefully omitting information during the application process will disqualify my application for housing. I also have read and understand the eligibility criteria. Furthermore, I understand if I decide to apply for housing I am required to submit a \$35.00 non-refundable application fee for each applicant that is 18 years of age or older. This non-refundable fee must be paid only in the form of a money order or cashier's check payable to CHS. If the database turns up a possible record outside of WA and/or OR, an additional fee may be charged.

Applicant Signature

Date

Applicant Signature

Date

In order for this application to be considered complete. All applicants must read and keep a copy of the attached applicant screening criteria (page 1 of this application).



Initial in this box if you have read the screening criteria and have kept a copy.

MANAGERS – Visual Proof of Drivers License or State I.D.:

Yes No I.D. Checked by: _____

Each adult over the age of 18 must complete a separate application.

Date/Time Received: _____

Co. ID: _____	Mgmt Company Catholic Housing Services	Apt Community	Community Contact	Community Tel #
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COMPREHENSIVE CREDIT/CRIMINAL/EVICTION SSN TRACE & CRIMINAL

APPLICATION TO RENT Apartment # _____ Move-in Date _____ Rent \$ _____ Lease _____

Applicant Co-Applicant w/ _____ Cosigner Section 8

APPLICANT INFORMATION

(LEGAL) Last Name			First	Middle	Soc. Sec. #			Date of Birth				
Other Names Used			Driver License #/State			Email Address			Contact Phone Number			
Other Persons to Occupy Rental:	1	Full Name			Relationship	DOB	3	Full Name			Relationship	DOB
	2	Full Name			Relationship	DOB		4	Full Name			Relationship
Animal(s) to occupy unit: Attach separate sheet if needed	1	Name	Type	Weight		2	Name	Type	Weight			

RESIDENCE HISTORY

Present Address				City	State	Zip	From _____ To _____		Monthly Payment	
									\$	
Landlord Name <input type="checkbox"/> Mortgage Co <input type="checkbox"/> Apartment Community <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Employer/Corp Housing <input type="checkbox"/> Independent Landlord										<input type="checkbox"/> Own <input type="checkbox"/> Rent
Landlord Daytime Phone:					Landlord Evening Phone:					
Previous Address				City	State	Zip	From _____ To _____		Monthly Payment	
									\$	
Landlord Name <input type="checkbox"/> Mortgage Co <input type="checkbox"/> Apartment Community <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Employer/Corp Housing <input type="checkbox"/> Independent Landlord										<input type="checkbox"/> Own <input type="checkbox"/> Rent
Landlord Daytime Phone:					Landlord Evening Phone:					

EMPLOYMENT/INCOME

Current Employer		Monthly Salary	Supervisor's Name		How long?
		\$			_____ Yrs _____ Mos
Address		City	State	Zip	Phone
					Occupation/Department
ADDITIONAL INCOME – Additional income such as child support, alimony or separate maintenance need not be disclosed unless such additional income is to be included for qualification hereunder:					Are you a full time or part time student?
Amount \$ _____ per _____ Sources _____					

VEHICLE INFORMATION					
Auto #1	Year	Make	Model	License State	License Number
Auto #2	Year	Make	Model	License State	License Number

EMERGENCY INFORMATION					
Nearest Relative	Relationship	Address	City	State	Zip
Emergency Contact	Relationship	Address	City	State	Zip
Personal Reference	Relationship	Address	City	State	Zip

Have you entered into a plea of guilty or no contest, or otherwise been convicted of a criminal offense, for which you were released from incarceration, probation or parole in the past seven (7) years? Yes No

IF YES, please list the date, city, state and type of all convictions: _____

Attach separate sheet if necessary.

Are you or anyone who will be residing in the rental unit required to register as a sex offender? Yes No

Have you been asked to vacate by a current/previous landlord? Yes No

IF YES, LANDLORD NAME: _____ CITY _____ STATE _____

*Please note that a criminal conviction does not necessarily disqualify you for residency. Refer to the applicable rental criteria for more information.

In compliance with state and federal consumer reporting law, you are hereby advised that a screening will be conducted regarding the information contained in this application. The report may contain information regarding your credit-worthiness, character, general reputation, personal characteristics and mode of living. By signing this application, you authorize Moco, Inc., whose address is PO Box 2826, Seattle, WA 98111, and whose telephone number is (800) 814-8213, to conduct the screening and to release information obtained to landlord and landlord's agents. If the application is denied or approved conditionally based upon information contained in the report, you may request and obtain a copy of the report. You have the right to dispute the accuracy of information contained in the report. You may have additional rights under both state and federal law.

I certify that to the best of my knowledge all statements are true and complete. False, fraudulent or misleading information may be grounds for denial of tenancy or subsequent eviction.

Non-Refundable Processing Fee \$ _____ Check/Money Order # _____

Applicant understands that he/she acquires no rights in an apartment until a holding deposit in the amount of \$ _____ has been paid. Applicant requests landlord to hold Unit _____ for applicant while the screening process is completed. If this application is not accepted, the holding deposit will be refunded. If the application is accepted and applicant chooses not to occupy the unit being held, applicant forfeits the holding deposit and no portion of it shall be refunded.

Signed _____
Applicant

Dated _____

I am aware that an incomplete application causes a delay in processing and may result in denial of tenancy.

Signed _____
Landlord

Position _____

Dated _____

