



**Sterling Asset Management Company (SAMC)**

You must fax, mail or drop off the attached application and the documents listed below at the property you are interested in.

Please, visit our website for the contact information for each property.

<http://www.chohousing.net/properties/apartments-for-rent>

## **Applicant's Checklist**

Please, be aware that **INCOMPLETE** applications (i.e., missing required forms, information, signatures or documentation) will **NOT** be approved.

Please, provide the following forms and documentation:

1. Complete application, one for each household member 18 years and older.
  2. Authorization form signed by all household members 18 years and older.
  3. Driver's Licenses or photo I.D. cards of all household members 16 years and older.
  4. Social Security cards of all household members.
  5. Birth Certificates of all household members 17 years and younger.
  6. Court orders showing children's legal physical custody if household has non-resident parents.
  7. Paystubs for the last 3 months of all household members employed.
  8. Unemployment benefits last -month payment receipt.
  9. Self-Employment form and last year's Federal Tax Return.
  10. Court-ordered and/or private child support questionnaire and payment receipt.
  11. Social Security, SSI and/or Disability benefit statements or award letters.
  12. Pension, retirement, annuity and/or military reserve benefit statements or award letters.
  13. Federal, state, county and/or private benefit, grant and/or financial aid statements or award letters.
  14. Section 8 voucher.
  15. Investment account last-month statements of all household members.
  16. Other forms/documentation: \_\_\_\_\_
-



**Sterling Asset  
Management Co.  
(SAMCO)**

## **Application Criteria**

Thank you for choosing our Community as your potential new home. We look forward to serving you. Below is a list of our rental qualifications. Please supply us with all the information listed below. Before any final approval, all information must be received in order to process and qualify your application for rental at our Community. In addition, we ask that you complete the rental application honestly and accurately in its entirety.

### **All Applications must follow the itemized criteria below:**

- A. All Applicants must fill out their application legibly and accurately. Incomplete or falsified applications will be denied.
- B. Roommates/Co-Residents: In the event there are multiple applications to reside in the same apartment, the information on all applicants will be combined during the verification process. A rental application must be completed for each person age eighteen (18) or older.
- C. All applicants must show proof of state or federal issued photo ID to be verified to the application.
- D. All requested information or documentation must be supplied within seventy-two (72) hours. Failure to supply the requested information is grounds for rejection.
- E. Credit history should not include derogatory credit. A copy of the credit history will be obtained through an outside agency. Applicants should have at least two (2) positive accounts and there should be more positive accounts than negative accounts. Lack of credit history may result in an increased deposit.
- F. All applicants must have verifiable income of at least two (2) times the rent. All income will be verified by a third party. Written verification or proof of ALL income such as paycheck stubs, income from child support, disability, or retirement may be requested. Applicant must provide proof of all income sources. If you are self-employed, tax returns may be requested as proof of income.
- G. All applicants should have two (2) years good rental history, and/or have good mortgage payment history; written verification from the landlord and/or previous landlord is required. If renting for the first time, an additional deposit may be required depending on your particular situation.
- H. Any applicant with an eviction on their credit, owing community money, have negative previous or current rental history on your application may be denied upon further review.
- I. The following occupancy guidelines will be applied:

One Bedroom: <b>3</b> Person Maximum	Three Bedrooms: <b>7</b> Person Maximum
Two Bedrooms: <b>5</b> Person Maximum	Four Bedrooms: <b>9</b> Person Maximum
Efficiency: <b>2</b> Person Maximum	



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- J. Bankruptcies: There can be no new negative credit and the bankruptcy cannot have affected the previous landlords. Following the discharge the applicant must have positive independent rental history. The applicant will be considered under these conditions.
- K. Applicants may be rejected for conviction of fraud, theft, drugs, assault and battery, or a violent crime, misdemeanor, or for other convictions of illegal activity. Management does not accept any felony violations and all misdemeanors should be more than two (2) years old.
- L. Applicants may be rejected for behavior displayed during tour or application process that would constitute a violation of lease policies. Applicant must display the ability to comply with lease policies.
- M. All applicants will be processed and reviewed. Depending on each individual situation, credit will be taken into consideration with all of the rental qualifications listed above. Additional deposits may be required depending on your particular situation. Unfortunately, we cannot guarantee that your application will be approved. The application may take up to fourteen (14) days to process.
- N. Denied applicants or conditional approvals will be notified in writing of the reason for denial or conditional approval.
- O. All applicants will be reviewed on a case by case basis and a consumer credit report, public search and criminal background check will be obtained. An additional deposit may be required based the information obtained in any of these reports.

Please sign below acknowledging that you have read the above application criteria.

Apt. # of interest: \_\_\_\_\_

\_\_\_\_\_  
**Applicant Signature**

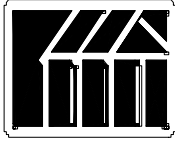
\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**



**Sterling Asset Management Company**  
**1490 Drew Ave., Suite 160**  
**Davis, CA 95618**  
**(530) 757-4444 ext. 237**

**AUTHORIZATION FOR RELEASE OF INFORMATION**

**Consent**

I authorize and direct any Federal, State or local agency, organization, business or individual to release to Sterling Asset Management Company any information or materials needed for my application to rent, and/or to maintain my current rental with Sterling Asset Management Company.

**Federal law provides penalties of \$5,000 for giving false information to a federally subsidized program.**

**Information Covered**

I understand that program policies require previous or current information regarding me or my household. Verifications and inquiries that may be requested include but are not limited to:

- \* Identity, Marital Status                      \* Employment, Income and Assets                      \* Residences and Rental Activity
- \* Social Security Numbers                      \* Credit and Criminal Activity                      \* Medical or Child Care Costs

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation in a housing assistance program.

**Groups or Individuals That May Be Asked**

The groups or individuals that may be asked to release the above information (depending on program requirements) include but are not limited to:

- \* Past and Present Employers                      \* Veterann’s Administration                      \* Retirement Systems Provider
- \* Post Offices                      \* Schools and Colleges                      \* Support and Alimony Providers
- \* Medical and Child Care                      \* Utility Companies                      \* Credit Providers and Bureaus
- \* Banks/Financial Institutions                      \* State Unemployment Agencies                      \* Child Support Enforcement
- \* Welfare Agencies                      \* Previous Landlords (including Public Housing Agencies)

This authorization form may not be used to request a copy of a Tax Return. If a copy of a Tax Return is needed. The Applicant must sign IRS FORM 8821, “ TAX INFORMATION AUTHORIZATION”.

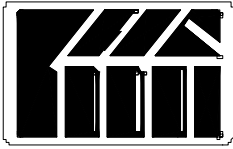
This authorization form may not be used to request verification of SSA/SSI benefits. If this verification is needed, applicant must sign the form “Consent for Release of Information: Social Security Administration.”

**Conditions**

I agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file with the management office.

<b><u>Signatures</u></b>	Signature	Print Name	Date
Head of Household			
Adult Member			
Adult Member			
Adult Member			
Adult Member			

***Return this signed authorization with your completed Application.***



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<b>RENTAL APPLICATION</b>			
APPLICANT MUST FILL ALL BLANKS COMPLETELY - PLEASE TYPE OR PRINT CLEARLY Every person over age 17 must fill out a separate application.			
LAST NAME:	FIRST NAME:	ARE YOU A FULL TIME STUDENT?	
MAILING ADDRESS:	APT:	NO ___ YES ___	
CITY:	STATE:	ZIP:	IF YES, WHERE?
HOME PHONE: (     )	WORK PHONE: (     )		
DATE OF BIRTH:	SOCIAL SECURITY NUMBER:		
DRIVERS LICENSE OR STATE ID NUMBER:			STATE:
DO YOU REQUIRE SPECIAL ACCOMMODATIONS? NO ___ YES ___ EXPLAIN:			
HAVE YOU EVER APPLIED WITH US BEFORE? NO ___ YES ___ IF YES, WHEN?                      UNDER WHAT NAME?			

<b>RESIDENTIAL HISTORY</b>			
Applicant must provide a <b>5-year</b> address history. Attach a separate sheet if necessary.			
	PRESENT ADDRESS	PREVIOUS ADDRESS	PAST ADDRESS
STREET			
CITY			
STATE, ZIP			
MONTHLY RENT?	\$	\$	\$
SECTION 8?	NO      YES	NO      YES	NO      YES
HOW MANY BEDROOMS?			
DATE MOVED IN?			
DATE MOVED OUT?			
REASON FOR LEAVING?			
RENT FROM FRIEND/RELATIVE?			
MANAGEMENT CO.			
COMPLEX NAME			
OWNER NAME			
MANAGER NAME			
ADDRESS			
PHONE NO.	(     )	(     )	(     )
FAX NO.	(     )	(     )	(     )

### OCCUPANTS

Applicant must list all persons who will live with him/her in a CHOC property.

NAME	DATE OF BIRTH	AGE	SEX	GRADE	RELATIONSHIP
Yourself:					<i>SELF</i>
Co-Applicant:					

### NON-RESIDENT PARENTS

If children will reside in the apartment with only one biological parent, applicant must complete this section for parent(s) not residing with him/her.

Name(s) of Non-Resident Parent(s)	Address(es) of Non-Resident Parent(s)	Court-Ordered Child Support

### EMPLOYMENT HISTORY

Applicant must list a 5-year employment history. If unemployed, applicant must show his/her status (i.e., student, TANF, SSI, etc.).

	Current Job or Status	Previous	Next Previous
Occupation			
Date hired			
Date ended			
Employer			
Supervisor			
Address			
Phone No.	(    )	(    )	(    )
Fax No.	(    )	(    )	(    )
Reason for Leaving:			

### REFERENCES

Applicant must list 3 references; no relatives or people listed elsewhere on this application as a reference.

Reference Name	Address	Relationship	Phone

### INCOME SOURCES - YEARLY GROSS INCOME (Y.G.I.)

Applicant has to list all sources of income. List complete names and addresses for all sources. If applicant has no income, write "NONE" and "0" in Applicant's Total Yearly Gross Income (Y.G.I.).

Income Type	Name of Income Source	Address of Income Source	Y. G. I.
Employment Job #1			\$
Employment Job #2			\$
Employment Job #3			\$
Self-Employment			\$
Unemployment			\$
AFDC / TANF			\$
Disability			\$
Scholarship/Grant/Fin Aid			\$
Scholarship/Grant/Fin Aid			\$
Social Security / SSI			\$
Alimony			\$
Child Support			\$
Child Support			\$
Family Support			\$
Military Reserves			\$
Bank Account Interest			\$
Annuity			\$
Dividends			\$
Real Estate Income			\$
Retirement Plan			\$
Pension Plan			\$
Monetary Gifts			\$
Other			\$
<b>Applicant's Total Y. G. I.</b>			\$

List income from ***Minor Children's employment*** on one application only.

Minor Child's Name	Name of Income Source	Address of Income Source	Y. G. I.
			\$
			\$
<b>Children's Total Y. G. I.</b>			\$

	Self	Co-Applicant	Minor Children	Household's Total Y. G. I.
<b>Total Yearly Gross Income</b>	\$	\$	\$	\$

**PERSONAL PROPERTY / ASSETS**

Applicant must list all personal property and assets owned.

Type of Asset	Name of Bank / Institution	Address of Bank / Institution	Value
Cash in Banks			\$
Pension			\$
Retirement			\$
Stocks / Bonds			\$
Real Estate			\$
Other Assets			\$
<b>TOTAL VALUE OF PERSONAL PROPERTY AND ASSETS</b>			\$

**AUTOMOBILES**

Make	Model	Year	License Plate

**CREDIT HISTORY**

Applicant must name all creditors to whom him/her owe money (i.e., credit cards, business lines of credit, personal loans, collection accounts, PGE, etc.). If creditor list is different to that in the credit report, applicant may be disqualified.

Name of Creditor	Telephone Number	Monthly Payment
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
<b>TOTAL AMOUNT OF ESTIMATED MONTHLY EXPENSES</b>		\$

**BANK REFERENCES**

Name of Bank	Address	Account Number	Balance
			\$
			\$
			\$
			\$
			\$
<b>TOTAL AMOUNT OF CASH IN BANKS</b>			\$

**Please Answer the Following Questions.**

Do you know any of our residents?

Name	Complex

How did you hear about our subsidized housing program?

	NO	YES	If YES, please explain.
Has anyone in your household been convicted of a crime? List all convictions with dates.			
Do you have pets?			
Does anyone outside of your household pay your bills?			
Does anyone outside of your household give you money?			
Have you/your household ever been evicted?			
Have you/your household ever received a 3Day Notice to Pay Rent or Quit or a Notice to Terminate Tenancy?			
Do you have credit problems?			
Does anyone have landlord problems?			
Name(s) used other than current name(s).			
Social Security numbers used other than current numbers.			

Your signature means that you certify, agree, and understand the following:

1. All statements are true and correct.
2. All statements are complete.
3. You authorize us to verify your statements.
4. We will obtain your credit report.
5. We will keep these statements confidential.
6. You will give us more information if we request it.
7. You will tell us immediately if any statement has changed, such as, but not limited to changes in household size, income, address or phone numbers.
8. You will be disqualified if any statement is false, incorrect or incomplete.
9. If you give false information to an agency which receives Federal funds, you may be subject to a fine of up to \$5000, imprisonment or both.

Tell us what we need to know to understand your housing needs:

Date:

Signature:



**\*SAMC IS THE PROPERTY MANAGEMENT SUBSIDIARY OF COMMUNITY HOUSING OPPORTUNITIES CORPORATION (CHOC), A PRIVATE, PUBLIC-BENEFIT, NON-PROFIT HOUSING DEVELOPER AND ADMINISTRATOR COMMITTED TO PROVIDING EQUAL HOUSING OPPORTUNITIES THROUGH LEADERSHIP, EXAMPLE, EDUCATION, AND COOPERATION. IN THIS SPIRIT, WE OFFER ALL HOUSING OPPORTUNITIES TO ALL PEOPLE, WITHOUT REGARD TO COLOR, RACE, RELIGION, SEX, SEXUAL ORIENTATION, MARITAL STATUS, AGE, HANDICAP, DISABILITY, NATIONAL ORIGIN AND SOURCES OF INCOME.**