

NAPA PARK HOMES

790 Lincoln Avenue, Napa, CA 94558

707-255-3119

Professionally Managed by Napa Valley Community Housing since 2005

Waitlist Application Checklist

Thank you for your interest in Napa Park Homes rental housing. For your convenience we've summarized below the items you must bring when you submit your waitlist application. Applications cannot be accepted until all items, applicable to your household, are present. This means that every form must be completed in full and required documents provided. Thank you!

- Completed and Signed Waitlist Application.
- Completed and signed Race and Ethnicity forms, one per household.
- Most recent Pay Check Stub for all applicants' who are working or receiving unemployment. Note: If pay amounts vary from one pay period to the next, it is advisable to provide more than one pay stub.
- State or National photo ID for each adult household member.
- Current Social Security, SDI or SSI award letter, if anyone in the household is receiving benefits
- Current EDD or other benefit letter, if anyone in the household is receiving Unemployment, Disability or Workers Compensation.
- Current Passport to Services letter, if receiving public assistance (TANF, food stamps, etc.)



EQUAL OPPORTUNITY HOUSING

Napa Valley Community Housing
5 Financial Plaza, Suite 200
Napa, CA 94558
www.nvch.org

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Manejados Profesionalmente por Napa Valley Community Housing desde el 2005

Lista de documentos para la solicitud de lista de espera

Gracias por su interés en aplicar a los departamentos Napa Park Homes. Para su comodidad enseguida hemos resumido los artículos que necesita traer cuando presente su solicitud. No se aceptaran solicitudes incompletas. Esto significa que cada uno de los formularios tienen que ser llenados completamente y todos los documentos requeridos sean proveídos a la hora de entrega. ¡Gracias!

- Solicitud para la lista de espera completada y firmada.
- Formulario completado de raza y grupo étnico, llenar un formulario por hogar.
- Ultimo talón de cheque mas reciente para todos los solicitantes con empleo o que reciben desempleo. Nota: Si el total de paga varea de fecha de pago a fecha de pago se les recomienda traer más de un talón de cheque.
- Identificación Estatal o Nacional con foto para cada uno de los adultos miembros de familia.
- Carta actual de pagos del seguro social, SDI o SSI si alguien en la familia recibe estos beneficios
- Carta del EDD actual u otra carta de beneficios si alguien in la casa recibe Desempleo, Discapacidad o Compensación de Trabajadores.
- Pasaporte o carta de servicios actual si usted recibe ayuda pública (TANF, estampillas de comida, etc.)



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NAPA PARK HOMES, INC.
790 Lincoln Avenue, Napa, CA 94558

OFFICE USE ONLY ONE / TWO / THREE

APPLICATION FOR WAITING LIST

Please complete all sections by printing in ink. DO NOT LEAVE ANY SECTION BLANK. If it does not apply, write "N/A." Extra space is provided on the back. Thank you

APPLICANT/Last Name (Head of Household)	First Name	Middle Initial	Driver's License/I.D.#
SPOUSE (CO-TENANT)/Last Name	First Name	Middle Initial	Driver's License/I.D.#
Present Address/Street No.	City, State, Zip	Length of Residence	Phone Number ()

TENANT HISTORY (Five [5] years minimum) Address City		State	Length of Stay	Landlord Name/Phone

HOUSEHOLD COMPOSITION: List all persons, including yourself, who will reside in the unit. *Note:* The number to the left indicates the "Household Member Number" and is the number requested to indicate a particular household member in the remaining sections of this application.

#	Full Name	Relationship to Head	Sex (Circle one)	Age	Birthdate	Birthplace/ (U.S. City or Foreign)	Occupation	Social Security or Alien Registration #
1		Head of Household	M F					
2			M F					
3			M F					
4			M F					
5			M F					
6			M F					
7			M F					

INCOME * EMPLOYMENT ONLY: List all full-time, part-time and/or seasonal employment for EACH household member, including self-employment earnings. Include Overtime Pay, Tips and Bonuses. (If you have income from "other" sources, see next page.)

HH Member #	Place of Employment	Employment Address (Including Zip code)	Employer Phone	Name of Supervisor	Annual Income (Yearly Total)

NAPA PARK HOMES, INC.
790 Lincoln Avenue, Napa, CA 94558

USO DE OFICINA SOLAMENTE UNA / DOS / TRES

APLICACION PARA LA LISTA DE ESPERA

Por favor complete todas las secciones con tinta. NO DEJE NINGUN ESPACIO EN BLANCO. Si alguna información no le aplica escriba "N/A". Espacio adicional proporcionado al reverso. Gracias

SOLICITANTE/Apellido (Cabeza del Hogar)	Primer Nombre	Inicial de Segundo Nombre	# de Licencia de Conducir/I.D.
ESPOSA(O)/(CO-ARRENDANTE) - Apellido	Primer Nombre	Inicial de Segundo Nombre	# de Licencia de Conducir/I.D.
Dirección actual/ No. de calle	Ciudad, Estado, Código	Duración de Arriendo	Número de Teléfono ()

HISTORIAL DE ARRENDAMIENTO (Mínimo 5 años)		Estado	Tiempo de Estancia	Nombre del Dueño/Teléfono
Dirección	Ciudad			

COMPOSICION DEL HOGAR: Escriba todas las personas, incluyéndose usted mismo, que vivirán en la unidad. Nota: El número de la izquierda indica el "Número de Miembro del Hogar" y es el número requerido para indicar miembros del Hogar en particular en las siguientes secciones de esta aplicación.

#	Nombre Completo	Relación con el Cabeza de Hogar	Sexo (Circule uno)	Edad	Fecha de Nacimiento	Lugar de Nacimiento (EE.UU., o Extranjero)	Ocupación	# Seguro Social o Registración Extranjera
1		Cabeza del Hogar	M F					
2			M F					
3			M F					
4			M F					
5			M F					
6			M F					
7			M F					

INGRESOS * EMPLEO SOLAMENTE: Escriba todos los empleos de tiempo completo, tiempo parcial y/o temporal para TODOS los miembros del hogar incluyendo ingresos de negocio propio. Incluya horas extras, propinas, y bonos. (Si tiene ingresos de "otras" fuentes, vea la página siguiente.)

# Miembro del Hogar	Lugar de Empleo	Dirección de Empleo (Incluyendo Código Postal)	Teléfono de Empleador	Nombre de Supervisor	Ingreso Anual (Total al Año)

PREFERENCES: To indicate that your household qualifies for one of the Preferences established for this property, check the applicable box below.

<input type="checkbox"/>	My household has been displaced from housing by government action.
<input type="checkbox"/>	My household has been displaced from housing due to a presidentially declared disaster.

INCOME FROM OTHER SOURCES: Please list ALL income from sources other than "employment" for ALL family members. This Includes but is not limited to, Welfare, TANF, Social Security, SSI, SDI or other Disability, Death Benefits, Unemployment, Alimony, Child Support, etc.

HH Member Income Number	Source of Income	Address of Source	Annual Income (Yearly Total)
			\$
			\$
			\$

CHECKING ACCOUNTS:

HH Member Number	Account Number	Bank Name	Complete Bank Address	Current Balance	Interest Rate
				\$	%
				\$	%
				\$	%

SAVINGS ACCOUNTS:

HH Member Number	Account Number	Bank Name	Complete Bank Address	Current Balance	Interest Rate
				\$	%
				\$	%
				\$	%

STOCKS, BONDS, CREDIT UNION SHARES, ETC.:

HH Member Number	Description of Asset	Current Value	Annual Income From this Asset
		\$	\$
		\$	\$

REAL ESTATE: DO YOU OWN REAL ESTATE? Yes ___ No ___ If Yes, are you receiving any income from this property? Yes ___ No ___

If Yes, ADDRESS OF PROPERTY: _____

Annual INCOME from this Property: \$ _____ EXPENSES (type/amount): _____

MEDICAL AND/OR CHILD CARE EXPENSES:

CHECK IF HEAD OF HOUSEHOLD OR SPOUSE IS: 1) Handicapped () 2) Disabled () 3) Age 62 or Older ()

If you checked box 1, 2, or 3 above, please list below out-of-pocket medical expenses not covered by Insurance here:

DO YOU INCUR CHILDCARE OR DISABLED ADULT CARE COST/S? Yes () No ()

ARE ALL ADULT FAMILY MEMBERS EITHER WORKING, STUDYING OR SEEKING EMPLOYMENT? Yes () No ()

If you answered "Yes" to the above two (2) questions, please list payments made to childcare provider below.

HH Member Number	Description of Expense/s	Paid To	Address	Cost per Month
				\$
				\$

PREFERENCIAS: Para indicar que su hogar califica para una de las Preferencias establecidas para esta propiedad, marque la caja correspondiente abajo.

Mi Hogar ha sido desplazado de vivienda debido a acción gubernamental.

Mi Hogar ha sido desplazado de vivienda debido a desastres declarados presidencialmente.

INGRESOS DE OTRAS FUENTES: Por favor anote TODOS los ingresos de otras fuentes aparte de "empleo" de TODOS los miembros del hogar. Esto incluye pero no está limitado a "Welfare", TANF(asistencia pública), Seguro Social, SSI, SDI o Discapacidad, Beneficios por Muerte, Desempleo, Manutención de Cónyuge, Manutención de niños, etc.

# Miembro Del Hogar	Fuente de Ingreso	Dirección	Ingreso Anual (Total al Año)
			\$
			\$
			\$

CUENTAS DE CHEQUES:

# Miembro Del Hogar	Número de Cuenta	Nombre del Banco	Dirección completa del Banco	Balance Actual	Tasa de Interés
				\$	%
				\$	%
				\$	%

CUENTAS DE AHORROS:

# Miembro Del Hogar	Número de Cuenta	Nombre del Banco	Dirección completa del Banco	Balance Actual	Tasa de Interés
				\$	%
				\$	%
				\$	%

ACCIONES, BONOS FINANCIEROS, ACCIONES DE UNION DE CREDITO, ETC.:

# Miembro Del Hogar	Descripción de los Bienes	Valor Actual	Ingreso Anual de esta Acción
		\$	\$
		\$	\$

BIENES RAICES: ES DUEÑO DE BIENES RAICES? Si ___ No ___ si contesto Sí, ¿Está recibiendo algún ingreso por esta propiedad? Si ___ No ___

Si, Sí, DIRECCION DE LA PROPIEDAD: _____

INGRESO Anual de esta Propiedad: \$ _____ GASTOS (tipo/cantidad): _____

GASTOS MEDICOS Y/O DE CUIDADO DE NIÑOS:

MARQUE SI EL CABEZA DEL HOGAR O ESPOSA(O) ES: **1)** Discapacitado() **2)** Incapacitado() **3)** Mayor de 62 años()

Si marcó opciones 1,2 ó 3 arriba, por favor escriba abajo gastos médicos no cubiertos por aseguranza y que usted paga de su bolsillo:

¿TIENE GASTOS DE CUIDADO DE NIÑOS O DE ADULTO DISCAPACITADO? Si () No ()
¿ESTAN TODOS LOS ADULTOS MIEMBROS DEL HOGAR TRABAJANDO, ESTUDIANDO, O BUSCANDO EMPLEO? Si () No ()

Si contestó "Si" a las dos preguntas de arriba, por favor escriba abajo los pagos que hace al proveedor de cuidado.

# Miembro Del Hogar	Descripción de Gasto/s	Pagado a	Dirección	Costo Por Mes
				\$
				\$

AUTOMOBILE / VEHICLE: List ALL motor vehicles owned by/registered to a family member. (Include Motorcycles)

HH Member

Number	Name of Registered Owner	Model/Make	Year	License Plate Number	State	Color

Please indicate your answers to the following questions:

1. Have you sold or given away any assets in the last two years for less than its fair market value?	[] Yes*	[] No [1]
2. Have you ever been evicted from tenancy?	[] Yes*	[] No [2]
3. Have you ever been terminated from a housing program because of fraud, non-payment of rent or failure to comply with a recertification process?	[] Yes*	[] No [3]
4. Has any adult in your household filed for bankruptcy in the last three years?	[] Yes*	[] No [4]
5. Does your household have debts of more than \$6,000 which are currently in collection?	[] Yes*	[] No [5]
6. Has any member of your household been convicted of a crime in the last five (5) years? (Including the use, manufacture or sale of illegal drugs or domestic violence)	[] Yes*	[] No [6]
7. Have you ever-applied to live at this property before?	[] Yes*	[] No [7]
8. Is at least one member of your household a U.S. citizen or qualify as a U.S. legal Non-citizen?	[] Yes*	[] No [8]
9. Does anyone in your household need a unit with special features intended for persons with disabilities? <i>(No applicant, who is otherwise qualified, will be denied housing solely by reason of his/her disability)</i>	[] Yes*	[] No [9]
Describe special features required _____		
10. Do you anticipate any changes in your household size in the next twelve months?	[] Yes*	[] No [10]
11. Are any members of this household full-time students? List HH Members #'s _____		
12. How/Where did you hear about this housing facility? _____		
*Explain any "Yes" answers here: _____		

PLEASE NOTE: THIS IS A PRELIMINARY APPLICATION AND GIVES NO LEASE OR RENTAL RIGHTS. ADDITIONAL INFORMATION WILL BE REQUIRED AT A LATER DATE TO COMPLETE PROCESSING WHEN THE WAITLIST APPLICANT IS INVITED TO APPLY FOR A VACANT UNIT. WAITLIST APPLICANTS MUST UPDATE THEIR APPLICATION BY COMPLETING AND RETURNING A WAITLIST UPDATE FORM EVERY SIX MONTHS IN ORDER TO REMAIN ON THE LIST.

GROUND FOR DENIAL: An explanation of our Grounds for Denial for Housing Applications can be found within the attached Tenant Selection Plan, pgs. 10-11. Please acknowledge here that you have received a copy of the T.S.P. and located these reason for possible rejection. _____
Initials, Head of Household

APPLICANT CERTIFICATION:

I/We certify that if I/We were selected to move into this project, the unit would be my/our only place of residence. I/We understand that the above information is being collected to make a preliminary determination of my/our eligibility for subsidized housing. I/We certify that the statements made in this application are true and correct to the best of my/our knowledge and belief. I/We understand that false statements of information are punishable under Federal Law.

_____ Head of Household	_____ Date	_____ Spouse/Co-Tenant	_____ Date
_____ Other Adult Household Member	_____ Date	_____ Other Adult Household Member	_____ Date
_____ Other Adult Household Member	_____ Date	_____ Other Adult Household Member	_____ Date

Received By: _____ Date: _____ Time: _____

Residency at Napa Park Homes is open to all eligible, qualified persons without regard to race, color, religion, national origin, age, disability, sex, familial status, ancestry, or sexual orientation.



AUTOMOVIL/VEHICULO: Anote TODOS los vehículos propios/registrados de los miembros del Hogar. (Incluya Motocicletas)

Miembro

Del Hogar	Nombre del Dueño Registrado	Modelo/Marca	Año	No. de Placa	Estado	Color

Por favor indique sus respuestas a las siguientes preguntas:

1. ¿Ha vendido o regalado alguna acción en los últimos dos años por menos del valor justo del mercado? [] Si* [] No [1]

2. ¿Ha sido desalojado de alguna vivienda? [] Si* [] No [2]

3. ¿Ha sido alguna vez terminado de algún programa de vivienda debido a fraude, incumplimiento con el pago de renta o incumplimiento con el proceso de re-certificación? [] Si* [] No [3]

4. ¿Algún adulto en el hogar se ha declarado en banca rota en los últimos 3 años? [] Si* [] No [4]

5. ¿Alguien en su hogar tiene deudas de mas de \$6,000 las cuales actualmente están en colección? [] Si* [] No [5]

6. ¿Alguien en su hogar ha sido convicto de algún crimen en los últimos cinco (5) años? (Incluyendo el uso, fabricación o venta de drogas ilegales o violencia doméstica) [] Si* [] No [6]

7. ¿Ha aplicado para vivir en esta propiedad anteriormente? [] Si* [] No [7]

8. ¿Es al menos uno de los miembros del hogar ciudadano de los EE.UU. ó califica como no-ciudadano legal de EE.UU.? [] Si* [] No [8]

9. ¿Alguien en su hogar requiere adaptaciones especiales previstas para una persona con discapacidades? [] Si* [] No [9]
(Ningún solicitante, que de cualquier otra manera califique, se le negará vivienda por el solo hecho de su discapacidad)
 Describa las adaptaciones especiales requeridas _____

10. ¿Anticipa cambios en el tamaño de su hogar en los próximos 12 meses? [] Si* [] No [10]

11. ¿Hay algunos miembros de este hogar estudiantes de tiempo completo? Escriba el # de Miembro/(s) _____

12. ¿Cómo/Dónde escuchó de esta facilidad de vivienda? _____

***Explique cualquier respuesta contestada "Si" en este espacio:**

POR FAVOR NOTE: ESTA ES UNA APLICACION PRELIMINARIA QUE NO DA DERECHOS A CONTRATO O ARRENDAMIENTO. INFORMACIÓN ADICIONAL SERÁ REQUERIDA DESPUES PARA COMPLETAR EL PROCESO CUANDO EL APLICANTE SEA INVITADO A APLICAR PARA UNA UNIDAD VACANTE. SOLICITANTES DE LA LISTA DE ESPERA DEBEN ACTUALIZAR SU APLICACIÓN AL COMPLETAR Y REGRESAR LA FORMA DE VERIFICACION DE ESTATUS DE APLICACIÓN CADA SEIS MESES EN ORDEN DE MANTENERSE EN LA LISTA DE ESPERA.

FUNDAMENTOS PARA LA DENEGACIÓN: Una explicación de nuestros fundamentos para la denegación de la solicitud de arrendamiento puede ser encontrada adjunto del "Tenant Selection Plan", páginas 10-11. Por favor indique aquí que usted ha recibido una copia del TSP y ha localizado las razones posibles de rechazo.

_____ Iniciales, Cabeza de Familia

CERTIFICACIÓN DE SOLICITANTE:

Yo/Nosotros certificamos que si somos seleccionados para movernos a esta propiedad, la unidad será mí/nuestro único lugar de residencia. Yo/Nosotros entendemos que la información arriba es colectada para hacer determinaciones preliminares de mi/nuestra elegibilidad para subvención de vivienda. Yo/nosotros certificamos que las declaraciones hechas en esta aplicación son verdaderas y correctas a lo mejor de mi/nuestro conocimiento y entendimiento. Yo/nosotros comprendemos que declaraciones falsas de información son castigadas bajo la ley Federal.

_____ Cabeza del Hogar	_____ Fecha	_____ Esposa (o)/ Co-arrendador	_____ Fecha
_____ Otro Adulto Miembro del Hogar	_____ Fecha	_____ Otro Adulto Miembro del Hogar	_____ Fecha
_____ Otro Adulto Miembro del Hogar	_____ Fecha	_____ Otro Adulto Miembro del Hogar	_____ Fecha

Recibida Por: _____ Fecha: _____ Hora: _____

Residencia en Napa Park Homes está abierta a todas las personas elegibles, calificadas, sin importar la raza, color, religión, origen nacional, edad, discapacidad, sexo, estatus familiar, ascendencia, u orientación sexual.



Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING

This form is to be provided to each applicant for federally assisted housing

Instructions: Optional Contact Person or Organization: You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

Applicant Name:	
Mailing Address:	
Telephone No:	Cell Phone No:
Name of Additional Contact Person or Organization:	
Address:	
Telephone No:	Cell Phone No:
E-Mail Address (if applicable):	
Relationship to Applicant:	
Reason for Contact: (Check all that apply)	
<input type="checkbox"/> Emergency	<input type="checkbox"/> Assist with Recertification Process
<input type="checkbox"/> Unable to contact you	<input type="checkbox"/> Change in lease terms
<input type="checkbox"/> Termination of rental assistance	<input type="checkbox"/> Change in house rules
<input type="checkbox"/> Eviction from unit	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Late payment of rent	
Commitment of Housing Authority or Owner: If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.	
Confidentiality Statement: The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.	
Legal Notification: Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant's application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.	

Check this box if you choose not to provide the contact information.

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Signature of Applicant

Date

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

Privacy Statement: Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.

Información de contacto opcional y complementaria para solicitantes de asistencia de vivienda del HUD

COMPLEMENTO PARA SOLICITUD DE VIVIENDA CON ASISTENCIA FEDERAL

Este formulario será proporcionado a cada solicitante de vivienda con asistencia federal

Instrucciones: Persona u organización de contacto opcional: Tiene derecho por ley de incluir, como parte de su solicitud de vivienda, el nombre, la dirección, el número de teléfono y otra información relevante de un familiar, amigo u organización social, médica, de defensa o de otra índole. Esta información de contacto se recopila con el objeto de identificar a una persona u organización que puede ayudar a resolver cualquier problema que podría surgir durante su alquiler o que puede ayudar a proporcionar cualquier servicio o atención especial que usted pudiera requerir. **Podrá actualizar, quitar o cambiar la información que proporcionó en este formulario en cualquier momento.** No se le exigirá que brinde la información de este contacto, pero si escoge hacerlo, incluya la información relevante en este formulario.

Nombre del solicitante:	
Dirección postal:	
N.º de teléfono:	N.º de teléfono celular:
Nombre de la persona u organización de contacto adicional:	
Dirección:	
N.º de teléfono:	N.º de teléfono celular:
Dirección de correo electrónico (si corresponde):	
Relación con el solicitante:	
Motivo del contacto: (Marcar todo lo que corresponda)	
<input type="checkbox"/> Emergencia	<input type="checkbox"/> Ayuda con el proceso de recertificación
<input type="checkbox"/> No es posible comunicarse con usted	<input type="checkbox"/> Cambio en los términos del arrendamiento
<input type="checkbox"/> Rescisión de la asistencia de alquiler	<input type="checkbox"/> Cambio en las reglas de la casa
<input type="checkbox"/> Desalojo de la unidad	<input type="checkbox"/> Otro: _____
<input type="checkbox"/> Pago atrasado de la renta	
Compromiso del propietario o de la autoridad de la vivienda: Si es aprobado para la vivienda, esta información será conservada como parte de su archivo de locatario. Si surgen problemas durante su alquiler o si requiere de algún servicio o atención especial, es posible que nos comuniquemos con la persona u organización que incluyó para que lo ayude a resolver los problemas o le proporcione algún servicio o atención especial.	
Declaración de confidencialidad: La información proporcionada en este formulario es confidencial y no será divulgada a nadie salvo según lo permitido por el solicitante o la ley vigente.	
Notificación legal: La sección 644 de la Ley de Desarrollo Comunitario y de Vivienda de 1992 (Ley Pública 102-550, aprobada el 28 de octubre de 1992) exige que a cada solicitante de vivienda con asistencia federal se le ofrezca la opción de proporcionar información relacionada con una persona u organización de contacto adicional. Al aceptar la solicitud del solicitante, el proveedor de vivienda acuerda cumplir con los requisitos de igualdad de oportunidades y no discriminación de 24 CFR sección 5.105, que incluye las prohibiciones sobre discriminación en la admisión o participación en programas de viviendas con asistencia federal debido a la raza, el color de la piel, la religión, el origen nacional, el sexo, la discapacidad y el estado familiar según la Ley de Vivienda Justa, y la prohibición sobre discriminación debido a la edad según la Ley contra la Discriminación por la Edad de 1975.	

Marque esta casilla si escoge no proporcionar la información de contacto.

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Se eliminó el cuadro de la firma

Los requisitos de recopilación de información contenidos en este formulario fueron enviados a la Oficina de Administración y Presupuesto (*Office of Management and Budget*, OMB) según la Ley de Reducción del Papeleo de 1995 (Título 44, secciones 3501-3520 del Código de los EE. UU.). Se calcula que la carga de declaración pública es de 15 minutos por respuesta e incluye el tiempo para revisar las instrucciones, buscar fuentes de datos existentes, recopilar y conservar los datos necesarios, y completar y revisar la recopilación de la información. La sección 644 de la Ley de Desarrollo Comunitario y de Vivienda de 1992 (Título 42, sección 13604 del Código de los EE. UU.) impuso al HUD la obligación de solicitar a los proveedores de viviendas que participan en programas de viviendas con asistencia del HUD que proporcionen a todas las personas o familias que soliciten la ocupación de una vivienda con asistencia del HUD la opción de incluir en la solicitud el nombre, la dirección, el número de teléfono y demás información relevante de un familiar, amigo o una persona relacionada con una organización social, médica, de defensa o similar. El objeto de proporcionar tal información es facilitar el contacto por parte del proveedor de viviendas con la persona u organización identificada por el locatario para que ayude a brindar todo servicio o atención especial al locatario y ayudarlo a resolver cualquier problema de alquiler que surgiere durante el alquiler por parte de dicho locatario. Esta información de solicitud complementaria será conservada por el proveedor de vivienda y en carácter de confidencial. Proporcionar la información es básico para las operaciones del Programa de Vivienda con Asistencia del HUD y es un acto voluntario. Respaldar los requisitos reglamentarios y los controles de administración y del programa para prevenir el fraude, el derroche y la mala administración. De conformidad con la Ley de Reducción del Papeleo, una agencia no podrá conducir ni patrocinar, y no se le solicitará a una persona que responda a una recopilación de información, salvo que en la recopilación de información aparezca un número de control de OMB válido en la actualidad.

Declaración de privacidad: La Ley Pública 102-550 autoriza al Departamento de Vivienda y Desarrollo Urbano de los EE. UU. (HUD) a que recopile toda la información (salvo el número de seguro social [SSN]), la cual será usada por el HUD para proteger los datos de desembolso de acciones fraudulentas.

TENANT SELECTION PLAN

Effective July 1, 1997

Revised December 2011

Napa Park Homes is an equal opportunity housing development, designed to provide housing to eligible families under Section 236 of the National Housing Act and the Plan of Action developed under Title VI of the Low Income Housing Preservation and Residential Home ownership Act of 1990. Of the 140 units in the complex, 116 units are subsidized by Section 8 Loan Management Set-Aside Assistance.

Residency is open to all qualified, eligible persons. This site does not discriminate against applicants or residents on the basis of race, color, creed, religion, marital status, national origin, age, disability, medical condition, source of income, sex, sexual orientation, familial status or socioeconomic class.

Language Assistance Measures: Napa Park Homes provides language assistance services to its applicants who have limited proficiency in the English language. These consist of:

- o Napa Park Homes has bilingual staff, proficient in both English and Spanish
- o All vital documents are available in the Spanish language, which is the largest group making application to the property.
- o Other larger language groups will receive written notice in their primary language of the right to receive competent oral interpretation of those written materials, free of cost. (See "If you need an interpreter" poster located in management office.)
- o The property also provides access to those with hearing impairments thru use of the following relay service: TTY/TDD 711.

Application Procedures

Taking Applications: NPH maintains a wait list of interested applicants, from which new tenants are drawn. During periods when the Wait List is open, applications will be accepted from anyone who wishes to submit one. A sign will be clearly posted near the office door, indicating whether the Wait List is currently open or closed. (*Generally the waiting list is closed when the number of households applying for any particular size unit is large enough to fill vacancies that occur during the next 12 months.*)

All Wait List applications must be filled out completely, signed, and submitted in person to the Napa Park Homes office. (Exception: out-of-state applications may be mailed to the office, as well as those from persons with disabilities who require this exception as a reasonable accommodation.) Applications submitted with information missing will not be processed until the applicant chooses to supply the remaining data. The applications of these households will not be dated or added to the Waiting List until such time as the application is complete.

Applicants who meet our Eligibility Criteria will be added to the Waiting List according to the date and time their completed application is submitted to the management office. The Certification process, which determines if a household qualifies for an apartment, is not undertaken until the time a vacancy actually occurs. When an apartment becomes available, a group of 10-15 applicants at the top of the wait list will be notified, asked to complete a full application and attend an applicant interview. All information submitted is subject to verification through a third-party source. The applicant's signature on the application indicates consent to this Certification process.

Notifying Applicants of Upcoming Vacancies: Although Wait List applications are maintained in the order in which they are received and applicants notified of an opening in the order in which their names appear on the Waiting List, there are a few special rules that influence who may be considered first for any opening. These rules appear below:

1. When filling vacancies, we consider first any current tenant who is on our *In-house Transfer List*. *These are tenants who have been asked to transfer or requested transfer for reasons that include meeting program requirements, medical needs, changes in family composition or for other approved needs.* Tenants on this list must meet the requirements of the NPH Unit & Program Transfer Policy. If there are no appropriate candidates on the transfer list, we then look to applicants on our Waiting List.
2. Families on the Wait List who have been *displaced by government action, or a presidentially declared disaster* also receive preference over other applicants on the Waiting List. This means they will be considered for a vacant apartment before others who are ahead of them on the waitlist. It should be kept in mind that being in a preference group does not guarantee acceptance, it only sets the order in which a household will be considered to fill a vacant unit. All households must qualify prior to acceptance. Napa Park Homes has no preference for elders.
3. It is important to note that, ultimately, apartments at NPH are offered on a "first qualified, first served basis." Once notices soliciting applications have been sent to a group of wait list applicants, it is each applicant's responsibility to respond by submitting application materials in a complete and timely manner, attending the applicant interview when scheduled, and cooperating completely with the Certification process. An uncooperative or unresponsive applicant, even though he/she is at the top of the waiting list, may not be the first to be offered an apartment if someone farther down on the wait list qualifies first.

Wait List Administration

Updates to the Wait List: Once each year a wait list update form will be mailed to households currently on the wait list. Those who receive these notices will have three weeks (21) days to complete and return their update to the management office.

Removal from the Wait List: Following are the primary reasons that a household may be removed from the NPH waitlist.

- 1) The applicant household fails to return a Wait list update form.
- 2) The applicant asks to be “bypassed” a second time when invited to apply for an available unit at the property.
- 3) The applicant declines the offer of an apartment after completing the application process and being found qualified.
- 4) The applicant requests that their household be removed from the Waitlist. (This may be done at any time.)
- 5) The applicant household fails to respond to a vacancy letter within the timeline specified therein.

Income Targeting Requirements

Section 8 Assisted Units: HUD properties, such as Napa Park Homes, are required to rent no less than 40 percent of the assisted units that become available for occupancy during any given year to *extremely low-income* families (incomes at or below 30 percent of the Napa County Median Income, adjusted for family size). The remaining vacancies among the property’s assisted units must be rented to *very-low income* families (income at or below 50% of the county area median).

Non-Assisted Units: Vacancies occurring among non-assisted units will be rented to households that have adjusted annual incomes at or below 80% of the Napa County Median, adjusted for family size. For the most part, these openings are filled by current residents whose income has increased and, therefore, no longer qualify for assistance.

How We Will Meet These Standards: The composition of the property’s current waiting list enables the owner to adequately meet the HUD income-targeting requirements set forth above. It is our policy, however, to review the waitlist on an annual basis to determine if it is necessary to implement additional measures to assure that we continue to meet HUD’s income targeting requirements.

If, at any point, we determine that taking applicants from the top of the waiting list does not allow us to meet HUD’s income targeting requirements (40% of units coming available during any given year must go to extremely low-income families), then we will put into play a policy that allows us to skip over higher income households on the wait list in order to consider households farther down on the list who qualify at the extreme low income level. We will return to the higher income applicants who were skipped as soon as it is practical to do so.

Eligibility Criteria

To be invited to apply for a vacant unit, applicants must,

1. **Be on the current Wait List or the In-house Transfer List.** *Note:* Transfers are subject to the guidelines established by the NPH *Unit & Program Transfer Policy*. In part, these guidelines assure that no more than one transfer will be granted per vacancy, and any unit vacated by a transfer will be filled from the applicant waiting list. (See Transfer Policy, Exhibit II, for additional requirements.)
2. **Income-qualify** under Section 8 program guidelines. (See *Income Targeting*, above)
3. **Meet Unit Occupancy Standards**
The applicant household’s size must fall within Napa Park Homes established unit occupancy standards. Minimum and maximum occupancies are as follows:

<u>Unit size</u>	<u>Minimum Persons</u>	<u>Maximum Persons</u>
1 Bedroom	1	3
2 Bedroom	2	5
3 Bedroom	3	7

In determining the bedroom size for which an applicant household qualifies, the owner will consider the following:

- A. All full-time members of the household;
- B. All anticipated children, including the following:
 - (1) Children expected to be born to a pregnant woman;
 - (2) Children in the process of being adopted by an adult family member;
 - (3) Children whose custody is being obtained by an adult family member;
 - (4) Foster children who will reside in the unit;
 - (5) Children who are temporarily in a foster home who will return to the family, and
 - (6) Children subject to joint custody arrangements who are present in the household 50% or more of the time.
 - (7) Children away at school, but living at home during school recess;
- C. Foster adults who will live in the unit;
- D. Members of the household who are *temporarily* absent from the household such as those who are hospitalized.
- E. Live-in Attendants.

NOTE: We do not count some family members, such as adult children on active military duty, permanently institutionalized family members or those who are considered visitors.

4. **Eligibility of Students for Section 8 Assistance**

- A. Management must determine a student’s eligibility for Section 8 assistance at move-in and again at annual recertification, initial certification (when an in-place tenant begins receiving Section 8), and at the time of an interim recertification if one of the family composition changes reported is that a household member is enrolled as a student.

B. Section 8 assistance shall not be provided to any individual who:

(1) Is enrolled as either a *part-time* or *full-time* student at an institution of higher education for the purpose of obtaining a degree, certificate, or other program leading to a recognized educational credential; (2) is under the age of 24; (3) Is not married; (4) is not a veteran of the United States Military; (5) does not have a dependent child; (6) is not a person with disabilities, as such term is defined in 3[b][3][E] of the United States Housing Act of 1937 (42 U.S.C. 1437a[b][3][E]) and was not receiving Section 8 assistance as of November 30, 2005); (7) is not living with his or her parents who are receiving Section 8 assistance; and (8) is not individually eligible to receive Section 8 assistance and has parents (the parents individually or jointly) who are not income eligible to receive Section 8 assistance.

C. For a student to be eligible, independent of his or her parents (where the income of the parents is not relevant), the student must demonstrate the absence of, or his or her independence from, the parent(s). Students must meet, at a minimum all of the following criteria to be eligible for Section 8 or Section 236 assistance. The student must:

(1) Be of legal contract age under state law; (2) have established a household separate from parents or legal guardians for at least one year prior to application for occupancy, (3) or meet the U.S. Department of Education's definition of an independent student. (4) He or she also must not be claimed as a dependent by parents or legal guardians pursuant to IRS regulations; and (5) must obtain a certification of the amount of financial assistance that will be provided by parents, signed by the individual providing the support. This certification is required even if no assistance will be provided.

5. **Citizenship/Disclosure of Social Security Numbers**

Households applying for the Napa Park Homes Wait List must provide the Social Security number of at least one adult household member to show **eligibility at the time of application to the Waitlist**; however it should be noted that, *before* any household can be **qualified** for a vacant unit, they must provide documentation of SSN's for all household members, except those individuals who do not contend eligible immigration status. Should an applicant for a vacant unit have a SSN, but not be able to submit it at application, he/she/they will be able to certify that they do, so that processing of their application can continue. They will have 60 days after the date of that certification to present the Social Security card. An owner may extend the time period for an additional 60 days if the applicant is at least 62 years old and unable to submit the required documentation within the first 60- day period.

Also, as part of determining whether a household qualifies and can be offered a unit at NPH (i.e., begin receiving Section 8 assistance), each household member who claims U.S. citizenship (by signing Section 214 Declaration forms) must have that status successfully authenticated (verified) by management staff.

Certification: The Process of Qualifying for an Apartment

When eligible Wait List applicants respond to an invitation to apply for an apartment opening, they will be asked to submit a full Application for Housing. This initiates the "Certification Process," or the period during which Management closely evaluates the household and determines whether it is qualified for housing at this property. As part of this process, applicants must be willing to cooperate with verification of the following information:

1. **Income and Asset Verification**

Applicants must agree to have all income and assets verified by a third-party source. Verification of income and asset information helps establish income eligibility and ability to pay rent. Permission to obtain this information is granted when the applicant signs the Release Form, HUD-9887, which is part of the property's application packet. Only the persons the applicant lists on the HUD-9887 will have access to this information.

HUD requires that NPH staff use a web-based computer system, called EIV (Enterprise Income Verification) to obtain income and asset information for its applicants. This software program gathers data from the Social Security Administration and The Department of Health and Human Services National Directory of New Hires. Using EIV gets income information to management faster than if they were to contact applicant income sources directly for verification.

If an applicant does not agree with the employment and/or income information obtained from the EIV, they must tell the property manager. Property staff will contact the income source directly to obtain verification of the employment and/or income being challenged. Once the property manager receives the information from the income source, the applicant will be notified in writing of the results.

In addition to the income and asset information obtained in the EIV system, NPH staff are required to run a report on applicants during the application process known as the,

- o **Existing Tenant Search**: This report identifies applicants applying for assisted housing that may be receiving rental assistance at the time of application processing at another location.

If the report identifies that the applicant or a member of the applicant's household is residing at another location or receiving rental assistance at another property, we will discuss it with the applicant and give the applicant the opportunity to explain any circumstances relative to his/her being assisted at another location. This may be

a case where the applicant wants to move from his/her present location or where two assisted families share custody of a minor child.

The Property Manager will retain a *Master File* that contains a copy of all reports run in connection with a tenant application and any notation made concerning those reports.

All applicants who are interviewed for an upcoming unit opening will receive a copy of the brochure, "*EIV & You*," which answers many EIV related questions, identifies responsibilities of the applicant and property owner/manager and provides additional resources meant to help the applicant understand EIV.

2. **Documentation of Social Security Numbers**

Applicants must provide documentation of Social Security numbers for each household member who seeks housing assistance. If the applicant supplies documentation other than the *original* Social Security card, he or she must also certify that the documentation provided is complete and accurate. This requirement does not apply to mixed families that contain individuals who do not wish to contend eligibility status and who are not asking to receive HUD rental assistance (see HUD Non-Citizen Rule). Only those household members who wish to receive assistance must provide documentation of Social Security numbers.

3. **Documentation of Citizenship/Immigration Status**

By law, only U.S. citizens and eligible non-citizens may benefit from federal rental assistance. These requirements apply to families making application to this property, families on the waiting list and tenants.

All family members, regardless of age, must provide verification of citizenship (citizens) or immigration status (non-citizens). Non-citizens (except those 62 years of age or older) must sign a Verification Consent Form and submit documentation of their status or sign a declaration, stating that they do not claim to have eligible status. Non-citizens, age 62 and older, must sign a declaration of eligible immigration status and provide a proof of age document. U.S. citizens must provide proof of citizenship.

Households that cannot provide documentation, showing that they contain at least one citizen or eligible non-citizen, will be considered ineligible and denied rental assistance. When eligible status is documented for *some*, but not *all* household members, the household can still be considered eligible but will be offered *prorated* assistance, based on the number of citizens and eligible non-citizens in their household.

4. **Verification of Need for a Service or Companion Animal**

If an applicant has a disability that requires the assistance of a service or companion animal, that disability and the applicant's need for the animal must be verified by a qualified third-party source. By obtaining this verification the animal may be exempted from some of the rules spelled out in the property's Pet Policy, as well as the requirement for a pet deposit. Many "pet" rules, however, will still apply, including those that insure the safety of other residents and guests to the community and those that encourage proper care of the animal and its living quarters.

Screening Criteria

We look for applicants who can demonstrate ability and willingness to pay their rent on time, to care for their unit and to abide by the Lease and House Rules. We draw this information from a number of sources:

1. **Applicant Interview**

Applicants must be willing to attend an interview with the on-site administrator. (All members of the household, 12 years of age and older, who are listed on the application must be present.) NOTE: Failure to respond to two (2) notices for an applicant interview or two (2) unexcused failures to attend an agreed upon interview will result in cancellation of the application and removal of the applicant name from the waiting list.

2. **Credit Report**

Applicants must have an acceptable credit history in order to demonstrate they will be financially responsible tenants. An unacceptable credit history would be characterized by a credit report showing any of the following:

- A single unmet credit problem* in excess of \$2,000.
- Total unmet credit problems in excess of \$6,000.
- A bankruptcy within the last three years.
- A state or federal tax lien in excess of \$2,000.
- A total of ten (ten) or more credit problems of any value.
- A prior eviction or unlawful detainer filed against the applicant household.
- A municipal/small claims court judgement against the applicant obtained by a current or previous landlord.

*A credit problem is a past due account and/or accounts placed for collection, profit & loss (accounts written off by creditors), and/or repossessions that appear on your credit report.

Extenuating Circumstances: When looking at credit reports, we exclude debt attributed to family medical emergencies, financial difficulties arising as the result of a household member being called into military service, or

debt accumulated as the direct result of acts of domestic violence against the applicant household. In addition, if the credit report contains a foreclosure, dated September 2007 or later, that bad debt can be overlooked if the applicant has an otherwise good credit history prior to and following the foreclosure. Each extenuating circumstance must be verifiable through a third-party source. Also we will look more favorably on an applicant with bad credit when a work-out agreement can be documented with their creditors showing payments have been made on the agreements for at least one year or that there are no remaining delinquent payments.

No Credit History: No applicant will be denied housing because they have no credit history, however additional letters of reference will be required.

3. **Tenant History**

We verify the last 5-7 years of an applicant's tenancies, and we look for favorable landlord references. We consider a reference favorable when a landlord is willing to report that members of the applicant household have made rental payments in a timely fashion, have maintained the premises in a clean and sanitary condition, have not violated the lease or house rules, have not invited unauthorized people to live in the unit with them, have supervised children and guests and have not used the premises for unlawful activities. A rental history showing the applicant has been evicted from housing, had an unlawful detainer filed against them, did extensive damage to a unit or had extremely bad housekeeping habits are examples of a poor tenant history.

Note: If an applicant has no prior rental history, we will request a minimum of two additional personal references from individuals such as teachers, pastors, or other individuals not related to the applicant. We would prefer that these references be in writing, however, they may also be submitted orally when obtaining a written history is not possible. Names, addresses and phone numbers of oral references must be submitted in advance so that our staff can initiate the contact.

4. **Criminal Record**

We look for applicants whose criminal records are free of serious criminal violations. By this we mean convictions for crimes that threaten real property or others and their rights to the peaceful enjoyment of the premises, crimes that involve the use, manufacture or distribution of controlled substances or abuse of alcohol; crimes related to sexual offenses, or evictions by unlawful detainer. (See "Grounds for Denial," beginning on page 10, for more detail.) We will look at applicant records as far back as ten years, but place the greatest emphasis on the last five. Note: Live-in aides must also be screened for drug abuse and other criminal activity.

5. **Violence Against Women's Act Protections**

The VAWA protections apply to families applying for or receiving rental assistance payments under the project-based Section 8 program. The law protects victims of domestic violence, dating violence or stalking, as well as their immediate family members generally, from being evicted or being denied housing assistance if an incident of violence that is reported and confirmed. The VAWA also provides that an incident of actual or threatened domestic violence, dating violence or stalking does not qualify as a serious or repeated violation of the lease nor does it constitute good cause for terminating the assistance, tenancy, or occupancy rights of the victim. Furthermore, criminal activity directly relating to domestic violence, dating violence or stalking is not grounds for terminating the victim's tenancy. Management may bifurcate a lease in order to evict, remove, or terminate the assistance of the offender while allowing the victim, who is a tenant or lawful occupant, to remain in the unit.

Applicants With Disabilities

Napa Park Homes does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in its federally assisted programs and activities.

Reasonable Accommodations: NPH is required by law to consider requests for reasonable accommodations regarding the property's rules and/or modifications to a unit, the common areas or the site's rules, that enable an applicant or resident with a disability to have an equal opportunity to use and enjoy the site, or to participate in or have access to activities conducted or sponsored by the apartment community, unless taking such action would result in a fundamental alteration in the nature of this housing program.

Regarding Medical use of Marijuana: Although medical marijuana is legal under California law, marijuana possession, use and sale (for any reason) is still a violation of federal law. As a federally assisted property, Napa Park Homes is unable to approve Reasonable Accommodations for any tenant for medical marijuana use. Please take this into consideration when you apply for residency.

How to Request a Reasonable Accommodation: Those desiring a reasonable accommodation/modification may make a request, either orally or in writing, at the Management Office. If their disability is such that they cannot complete a written request themselves, the management staff will provide assistance. Once the request has been made, verified and evaluated, management will return a prompt written response.

The Applicant Interview

Once an application for housing has been submitted for a current vacancy, the applicant household will be asked to come to the management office for an interview. All family members, age 12 and over, will be asked to attend. At that interview the management agent will:

1. Ask applicants to confirm and update all information provided on the application.
2. Explain program requirements, verification procedures and penalties for providing false information.
3. Obtain any other family income and composition information/documentation needed to determine eligibility.
4. Review the applicant's financial information.
5. Obtain a signed, *Release of Information* that allows us to verify with third-party sources the information on the application.
6. Obtain declaration of citizenship and consent forms for verification from all household members as appropriate.
7. Inform the applicant of the screening requirements used by the owner.
8. Require the head of household, spouse or co-head to give a written certification as to whether any family member did/did not dispose of any assets for less than fair market value during the two years preceding the effective date of the certification.
9. Require the head, spouse, or co-head and all family members age 6 or older to disclose and document all Social Security Numbers or execute a certification for any household member to whom a SSN has not been assigned.
10. Explain the property's Pet Policy.
11. Explain the property's policy in regard to persons with disabilities, their right to have the assistance of a Service or companion Animal and/or other reasonable accommodations or modifications to living and common areas so that they might enjoy an equal housing opportunity in this property.
12. Explain how HUD may use income and family composition information.

Grounds for Denial

An application will be disqualified for any one of the following reasons:

1. The applicant's household income does not meet income guidelines for this program.
2. The applicant has an unacceptable credit history, as reported by a credit agency. In other words, that credit history fails to meet the established "Screening Criteria" found on page 5 of this document.
3. Through rental histories obtained from current or previous landlords, it is verified that the applicant has poor or unsatisfactory housekeeping habits.
4. Falsification, misrepresentation or the intentional withholding of information when completing the application or failure to cooperate with the verification process.
5. Negative landlord references received from either present or past landlords where the applicant resided during the last five years.
6. The applicant's household size is not appropriate for the unit available.
7. Applicant's fails to sign designated or required forms and/or documents upon request.
8. The applicant household is unwilling to abide by the property's Pet Policy.
9. This will not be the applicant household's sole residence.
10. The applicant household is not capable of fulfilling the lease agreement or house rules, with or without assistance.
11. Any applicant household that contains a full or part-time student who is ineligible for assistance. (*See Eligibility Criteria*, item 4, for further information.)
12. Any member of the applicant household has been *evicted from a federally assisted site* within the past three years for drug-related criminal activity. (HUD "One Strike" Rule)
13. The applicant household has been evicted from any other housing or had an unlawful detainer filed by another housing provider during the past three years.
14. Any member of the applicant household is *currently engaged in illegal use of drugs*, or the *owner has reasonable cause to believe* that a household member's illegal use or pattern of illegal use of a drug may interfere with the health, safety and right to peaceful enjoyment of the property by other residents. (HUD "One Strike" Rule)
15. Any member of the applicant household has been *convicted* of a crime within the last five years that would be considered a threat to the health and safety of residents, owners, employees, or agents, or disrupts residents' rights to the peaceful enjoyment of the premises, including but not limited to violent criminal activity or the use, manufacture or distribution of controlled substances.
16. Any member of the applicant household is subject to a state *sex offender lifetime registration requirement*. (*HUD "One Strike" Rule*)
17. Criminal Reports or Tenant Histories indicate there is *reasonable cause to believe* that the behavior of any member of the applicant household, from abuse or pattern of abuse of alcohol, may interfere with the health, safety and right to peaceful enjoyment by other residents.
17. The applicant's *assistance or tenancy* in a subsidized housing program has been *terminated* for fraud, non-payment of rent or failure to cooperate with the recertification procedures.
18. The applicant is unable to disclose and document SSN's of all household members who are at least 6 years of age or and is unwilling to sign a certification stating that the member in question hasn't been assigned a SSN.
19. Household members do not sign and submit required verification consent forms or the Authorizations for Release of Information;
20. The household includes members who didn't declare citizenship or non-citizenship status, or sign a statement electing not to contend non-citizen status.
21. Results in three or more selection criteria areas (applicant interview, credit report, tenant history, criminal record) are at minimum acceptability levels.

Procedure for Notifying Applicants of Acceptance or Denial

Management will notify applicants via phone, once they successfully complete the application process, to offer them an apartment.

When an application is denied, the applicant will be notified in writing. The notice will be sent in a timely manner and explain the reason(s) the application was denied. It will also offer the applicant an opportunity to request a meeting with management to appeal the rejection if the applicant feels there are grounds for such a request. **(see Exhibit I)**

Grievance and Appeals Procedures

If the applicant requests a meeting to discuss the rejection of his/her application, the letter requesting that meeting must be received by the *Napa Valley Community Housing Office, 5 Financial Plaza, Suite 200, Napa, CA 94558*, within 14 days of the applicant's receipt of the rejection notice. The requested meeting will be held within a reasonable period of time (usually within one week) and management will be represented by a "disinterested" third party, that did not participate in the rejection decision. After the meeting, the applicant will be notified in writing within 5 business days whether or not the original eligibility decision has been changed. All application documents and correspondence must be kept in a confidential file for three (3) years.

If applicant denial is based on failure to meet immigration status requirements, an appeal may be filed directly with the Department of Homeland Security (DHS), within 30 days of the date the owner denies the application. The appeal should be mailed to the Immigration & Naturalization Service (a division of DHS), San Francisco District Office, 630 Sansome Street, S.F. 94111. After receiving the appeal request, the DHS will make a ruling within 30 days.

If the DHS decision will cause the applicant to be denied, or if the family chooses not to appeal to DHS, the family may request that the owner provide an informal hearing. The request for a hearing must be made either within 30 days of receiving the notice from the owner denying assistance, or within 30 days of receiving the DHS appeal decision. The owner must retain all documents submitted as part of the appeal process for a minimum of five (5) years.

Security Deposit Requirements

Security Deposits are collected at the time of the initial lease execution. The amount of the security deposit will be an amount up to, but no greater than one month's total tenant rent payment, which includes the applicable utility allowance.

The amount of the security deposit established at move-in does not change when a tenant's rent changes. If a tenant household should transfer to another unit, management will charge a new security deposit, which must be paid prior to move-in. The security deposit on the new unit will be based on the tenant rent for the new unit.

Within 21 days of the date a tenant household moves out of an apartment, whether they are transferring to another unit or moving out of the apartment community, management will either,

1. Refund the full security deposit, plus accrued interest, to tenants who do not owe any amounts under the lease; or
2. Provide the tenant with an itemized list of any unpaid rent, damages to the unit, and an estimated cost for repair, along with a statement of the tenant's rights under state and local laws. If the amount management claims is less than the security deposit plus accrued interest, management will refund the unused balance to the tenant.

House Rules

New tenants will receive a copy of Napa Park Homes' House Rules prior to move-in. This document outlines a number of common sense rules related to the safety, care and cleanliness of the property and the safety and comfort of the residents. The Rules address many topics, including guests and visitors, use of the laundry room, trash disposal, noise, fire safety, maintenance requests, drug free policy, pets, playground use, parking, emergency procedures, security deposits, move-out procedures, and the like.

Changes to the House Rules: In the event that changes are made to the House Rules, residents will be notified by written notice no less than 30 days before the changes become effective.

Unit Inspections

Move-In: Before executing a lease, the owner and tenant must jointly inspect the unit. During the inspection, management prepares an inspection form indicating the condition of the unit. The condition of the unit must be decent, safe, sanitary and in good repair. If cleaning or repair is required, the owner must specify on the inspection form the date by which the work will be completed. That date must be no more than 30 days after the effective date of the lease. The tenant will have five days to report any additional deficiencies to the owner, and these will also be noted on the move-in inspection form.

Pre-Move-Out: Once notice is given, tenants will have an opportunity to schedule a pre-move-out inspection that will provide them with a list of any cleaning or damages to the unit that may be charged against their security deposit. This inspection must take place no more than two weeks prior to move-out and the tenant may or may not be present. With the information provided, the tenant will have an opportunity to take care of the cleaning and/or repairs prior to move out and thereby avoid charges to their Security Deposit. Any repairs or cleaning must be done to a professional standard, return the unit to its move-in condition and pass the final Move-Out Inspection in order to guarantee that charges to the Deposit will be waived.

Move-Out: After a tenant has moved out, management will again inspect the unit and complete a move-out report to be compared to the original move-in inspection report. The tenant may participate in this inspection if he/she so desires. Damages beyond normal wear and tear, if any, will be noted and the cost to repair or refurbish subtracted from the tenant Security Deposit.

Periodic: At various times during a tenancy, site staff or persons representing HUD or other monitoring agencies will select units for inspection. Residents must cooperate with any inspection for which they have received proper notice (at least 24 hours).

Requirement for Recertifying Tenant Income

1. All tenants receiving assistance must undergo an ANNUAL recertification of their household income. Each year, about 120 days before the recertification due date, management will request that the tenant provide current information on their household income and composition and supply any other information required by HUD for the purposes of determining the tenant rent and assistance payment, if any. The tenant must willingly provide an accurate statement of this information and do so no less than 35 days prior to their anniversary date. If this statement of information is not submitted as requested, management may impose the following penalties:
 - a) Require the tenant to pay the higher, HUD-approved market rent for the unit.
 - b) Implement any increase in rent resulting from the recertification processing without providing the 30-day notice otherwise required.
2. If any of the following changes occur, tenants must advise Management immediately so that an INTERIM recertification of income can be performed and rent adjusted accordingly:
 - a. Any household member moves out of the unit.
 - b. When the family proposes to move a new member in.
 - c. An adult member of the household, who was reported as unemployed on the most recent recertification, obtains employment.
 - d. The household's income increases cumulatively by \$200 or more a month.

If the tenant does not advise management of these interim changes within 10 days of the date of the change, the same penalties listed in number one, above, may be imposed.

Tenants may also report any *decrease in income or any change in other factors* considered in calculating tenant rent. Unless management has confirmation that the decrease in income or change in other factors will last less than one month, management will verify the information and make the appropriate rent reduction. Management is not required to process interim recertifications if the change to income will last for a month or less.

Notification Regarding Changes To This Plan

If changes are made to this Tenant Selection Plan, Wait List applicants will be notified in writing along with their annual wait list update request.

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date

Napa Park Homes

790 Lincoln Avenue
Napa, CA 94558

Date: _____

Dear _____

We regret to inform you that your application for residency at Napa Park Homes has been rejected for the following reason(s):

_____ Your income is above the HUD approved income limits for initial occupancy in our very low income apartments, (Sec 8).

_____ Your credit record did not meet our screening criteria. We have enclosed a copy of that report and advise you that you have the right to contact one of the consumer credit reporting companies responsible for compiling the information for this report, if you have questions or wish to dispute the accuracy or completeness of any of the information contained therein. Those companies include the following:

TRANSUNION
2 Baldwin Place
P.O. Box 1000
Chester, PA 19022
(800) 888-4213

EQUIFAX CDI SERVICE CENTER
P.O. Box 740241
Atlanta, GA 30374-0241
(800) 685-1111

EXPERIAN TRW
P.O Box 2104
Allen, TX 75013-2104
(888) 397-3742

_____ No member of your household is a U.S. citizen or eligible non-citizen and therefore, by HUD regulation, you do not qualify for this federally assisted housing program.

_____ Your records of current and/or previous tenancy did not meet our screening criteria.

_____ You gave false information on your application;

_____ We have not been able to verify this information

_____ You have no rental history, no credit history and no employment history;

_____ You have been convicted of any type of crime that would be considered a real threat to the property or the ability of other residents to peaceful enjoyment of the premises, and/or including the use, manufacture or distribution of illegal drugs.

_____ Other: n/a

You may appeal the decision to reject your application by responding in writing to this letter and requesting a meeting to discuss our decision. The letter requesting that meeting must be received by the Director of Property Management, Napa Valley Community Housing, 5 Financial Plaza, Suite 200, Napa, CA 943558, within 14 days of receipt of this notice. Note: Persons with disabilities have the right to request reasonable accommodations in order to participate in any hearing that might be scheduled as a result.

If, at some future date, you feel that your situation has changed sufficiently for you to be admitted onto the Waiting List, please contact us again.

Sincerely,

Sonia Lima-Flores

Sonia Lima- Flores, Property Manager
Napa Park Homes, Inc

2012 Income Guidelines

(Effective date December 1, 2011)

- I. Applicants for Section 8 subsidy must have gross annual income at or below the *very low-income* limit for the Napa area as defined by HUD. They are as follows:

<u># Of People in Household</u>	<u>Maximum Household Income</u>
1	\$31,150
2	\$34,450
3	\$38,750
4	\$43,050
5	\$46,500
6	\$49,950
7	\$53,400

Of those qualified for Section 8 subsidy, 40% must be at incomes that are considered *extremely low*. Those income limits are as follows:

<u># Of People in Household</u>	<u>Maximum Household Income</u>
1	\$18,100
2	\$20,700
3	\$23,300
4	\$25,850
5	\$27,950
6	\$30,000
7	\$32,100

- II. Applicants for Section 236 units must have adjusted annual incomes at or below 80% of the AMI, as published by HUD. These guidelines are based on family size. They are as follows:

<u># Of People in Household</u>	<u>Maximum Household Income</u>
1	\$45,500
2	\$52,000
3	\$58,500
4	\$65,000
5	\$70,200
6	\$75,400
7	\$80,600

NOTE: THESE GUIDELINES ARE UPDATED ON AN ANNUAL BASIS, NOT NECESSARILY CONCURRENT WITH THE CALENDAR YEAR.

RACE AND ETHNICITY DATA REPORTING FORM

Napa Valley Community Housing
 5 Financial Plaza, Suite 200
 Napa, CA 94558

Name of Property & Address (if applicable) or Agency _____ Date _____

Data Collection for: Wait List Applicant Tenant Unit Applicant

Please list ALL Members of your Household with Head of Household as #1):

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |
| | 9. _____ |

Ethnic Categories*	Select One Ethnic Category For <u>Each</u> Household Member								
	HH #1	2	3	4	5	6	7	8	9
Hispanic or Latino									
Not-Hispanic or Latino									
Racial Categories*	Select All Races that Apply For <u>Each</u> Household Member								
American Indian or Alaska Native									
Asian									
Black or African American									
Native Hawaiian or Other Pacific Islander									
White									
Other (Check "other" for any racial category that is not identified in one of the five single race categories listed above.)									
Other Categories	Add Information for <u>Each</u> Household Member								
Gender ("M" or "F")									
Age									
Disability ("Yes" or "No" for all over 5 yrs. of age)									

***Definitions of these categories may be found on the reverse side.**

There is no penalty for persons who do not complete the form. Initial here if you choose not to disclose any or some of the race and/or ethnicity information for your household. If you choose not to disclose any of the info, head of household ONLY should sign and date below. Otherwise every adult must sign:

 Head of Household Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

 Adult Co-Tenant Signature

Datos de Raza y Grupo Etnico Formulario de informe

Napa Valley Community Housing
Five Financial Plaza, Suite 200
Napa, CA 94558

Nombre de la propiedad y Direccion (si aplica) o Agencia _____

Fecha _____

Información coleccionada es para: Aplicante para la lista de espera Inquilino Aplicante

Por favor de nombrar todas las personas en su familia
(la cabeza de familia como #1)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |
| | 9. _____ |

Categorías Etnicas*	Seleccione una categoría étnica para cada persona en su familia								
	#1	2	3	4	5	6	7	8	9
Hispano o Latino									
No Hispano ni Latino									
Categorías Raciales*	Seleccione <u>todas</u> las categorías raciales <u>adecuadas</u> para cada persona en su familia								
Indio Americano o Nativo de Alaska									
Asiático									
Negro o Afroamericano									
Nativo de Hawai u otra Isla del Pacífico									
Blanco									
Otro (Marque "otro" si ninguna de las categorías raciales se aplican a usted.)									
Otros Categorías	Agregue Información por Cada Persona en la Vivienda								
Género ("M"asculino o "F"emeino)									
Edad									
Incapacidad ("Si" o "No" para todos los mayores de 5 años de edad)									

***Las definiciones de estas categorías pueden encontrarse en el reverso.**

No hay penalidad para las personas que no completen el formulario. Favor de Poner sus iniciales aquí si opta por no divulgar la raza y/o información de la etnia de su hogar. Si usted opta no revelar la información, la cabeza de familia SOLO debe firmar y poner la fecha acontinuacion. De lo contrario todos los adultos deben de firmar.

Cabeza de familia

Firmade adulto

Firmade adulto

Firmade adulto

Firmade adulto

Firmade adulto

Firmade adulto

Firmade adulto

Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form.

There is no penalty for persons who do not complete the form. If you choose not to disclose race or ethnicity, initial the refusal statement on the form, then sign and date the form at the bottom. All “completed” or “refused” forms must be kept in the household’s file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.
 - a. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term “Spanish origin” can be used in addition to “Hispanic” or “Latino.”
 - b. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
2. The five racial categories to choose from are defined below: **You should check as many as apply to you.**
 - a. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
 - b. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
 - c. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black” or “African American.”
 - d. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 - e. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
3. **“Other”** – You should check “other: for any racial category that is not identified in one of the five single race categories listed in Section 2, above.

Instrucciones para informar los datos de raza y grupo étnico (Formulario HUD-27061-H)

A. Instrucciones generales:

Este formulario debe ser completado por las personas que desean arrendar (solicitantes) y las personas que ya arriendan (arrendatarios) viviendas subvencionadas por el Departamento de Viviendas y Desarrollo Urbano.

Se exige a los propietarios y corredores de bienes raíces que ofrezcan al solicitante/arrendatario la opción de completar el formulario. Se debe completar el formulario al inicio de la solicitud o al momento de firmar el arrendamiento. Los arrendatarios ya ubicados también deben recibir la oportunidad de completar el formulario como parte de la siguiente recertificación pasajera o anual. Una vez que se haya completado, no necesita completarse nuevamente a menos que cambie el jefe de familia o la composición de la familia. No existe sanción para las personas que no completen el formulario. Sin embargo, el propietario o corredor puede colocar una nota en el expediente del arrendatario manifestando que el solicitante/arrendador se rehúso a completar el formulario.

No hay castigo para las personas que no completan el formulario. Si usted opta por no revelar la raza o la etnia, inicie la declaración de rechazo en el formulario, a continuación, firmar y incluya la fecha en el formulario en la parte inferior. Todos los "completado" o "rechazado" las formas se deben mantener en el archivo de la familia.

1. Se definen debajo las dos categorías étnicas entre las que debe elegir: Debe marcar una de las dos categorías.
 1. **Hispano o latino.** Una persona que sea de Cuba, México, Puerto Rico, Sudamérica y Centroamérica, o de otra cultura u origen español, sin considerar la raza. El término “origen español” puede usarse además de “hispano” o “latino”.
 2. **No hispano ni latino.** Una persona que no sea de Cuba, México, Puerto Rico, Sudamérica y Centroamérica, ni de otra cultura u origen hispano, sin considerar la raza.
2. Se definen debajo las cinco categorías raciales entre las que debe elegir: **Debe marcar todas las opciones pertinentes.**
 1. **Indio americano o nativo de Alaska.** Una persona con orígenes en cualquiera de los pueblos oriundos de Norteamérica y Sudamérica (incluyendo Centroamérica), y que mantiene afiliación tribal o adherencia comunal.
 2. **Asiático.** Una persona con orígenes en cualquiera de los pueblos oriundos del Lejano Oriente, Sudeste de Asia o el subcontinente indio, incluyendo, por ejemplo a Camboya, China, India, Japón, Corea, Malasia, Pakistán, las Islas Filipinas, Tailandia y Vietnam.
 3. **Negro o afroamericano.** Una persona con orígenes en cualquiera de los grupos raciales negros de África. El término “haitiano” puede utilizarse además de “negro” o “africano”.
 4. **Nativo de Hawai u otra isla del Pacífico.** Una persona con orígenes en cualquiera de los pueblos oriundos de Hawai, Guam, Samoa u otras islas del Pacífico.
 5. **Blanco.** Una persona con orígenes en cualquiera de los pueblos oriundos de Europa, Medio Oriente o Norte de África.
3. **“Otro”-** Usted debe marcar "otro: para cualquier categoría racial que no se identifica en un de las cinco categorías raciales individuales que figuran en la sección 2, sobre.

Napa Valley Community Housing Adaptable Features for Handicap Accessibility

The following is a list of items that can be adapted for handicap accessibility at our properties:

- Ramps added to access a lower level unit not level with the walkway.
- Vision or peep holes can be added or lowered on the door or can be changed to a larger viewer.
- Install lever door handles to replace any round knobs.
- Door thresholds changed when higher than 1/2" may be reduced to 1/4" or be removed.
- Doors can be removed and/or changed or swing clear hinges installed to increase the width of the door opening. Clear door opening space needs to be 32" wide.
- Environmental controls (thermostats) location changed or installs wireless and/or remote controls.
- Smoke detectors changed to ones that have strobe lights.
- Change or add handles or easy grip knobs on cabinets and drawers.
- Remove cabinets close to the stove, oven and under the sink.
- Lower counter heights to no more than 34" above the finished floor.
- Install a stove with controls on the front the appliance.
- Grab bars for the shower, tub or toilet areas.
- Replace toilet with one that is 17" – 19" from floor to top of seat.
- Sliding shower doors and tracks may be removed for easier access to the tub or shower.
- Install single lever handles for the sink and shower knobs.
- Handheld shower heads mounted on a vertical bar.
- Add shower seating.
- Adjust the height of clothes rods/shelves.
- Install a door chime with flasher module.
- Remove or relocate any protruding or low hanging objects.
- Install Braille indicators or labels on fuse boxes, mailboxes, washer/dryers, etc...

* This list of adaptable items is not all inclusive; requests for any reasonable accommodation/modification will be evaluated on an individual basis.



Napa Valley Community Housing

NOTICE OF RIGHT TO REASONABLE ACCOMMODATION

If you have a disability and, as a result of your disability, you need . . .

- a change in the rules or policies or how we do things that would give you an equal chance to live here and use the facilities or take part in programs on site,
- a change or repair in your apartment or a special type of apartment that would give you an equal chance to live here and use the facilities or take part in programs on site,
- a change or repair to some other part of the housing site that would give you an equal chance to live here and use the facilities or take part in programs on site,
- a change in the way we communicate with you or give you information,

you may ask for this kind of change, which is called a REASONABLE ACCOMMODATION.

If you can show that you have a disability and if your request is reasonable (*does not pose“ an undue financial or administrative burden”), we will try to make the changes you request.

We will give you an answer within 15 working days unless there is a problem getting the information we need or unless you agree to a longer time. We will let you know if we need more information or verification from you or if we would like to talk to you about other ways to meet your needs.

If we turn down your request, we will explain the reasons and you can give us more information if you think that will help.

If you need help filling out a REASONABLE ACCOMMODATION REQUEST FORM or, if you want to give us your request in some other way, we will help you.

You can get a REASONABLE ACCOMMODATION REQUEST FORM at the Napa Valley Community Housing office located at Five Financial Plaza, Suite 200, Napa, CA 94558, or from the Property Manager's office.

NOTE: All information you provide us will be kept confidential and will be used only to help you have an equal opportunity to enjoy your housing and the common areas.

- *In simple language this legal phrase means if it is not too expensive and too difficult to arrange*

