

OREGON—TAX CREDIT RENTAL APPLICATION

TO BE COMPLETED BY EACH ADULT APPLICANT

ALL UNITS SUBJECT TO AVAILABILITY





DUCULLU VALAME ANTIMOED SOUCHDED VINGOR	THANSFER
PROPERTY NAME / NUMBER Songbird Village UNIT NUMBER ADDRESS 215 21st Avenue SE, Al	Ihany OR 97322
DATE UNIT WANTED UNIT RENT \$ OWNER / AGENT Albany Partnership for Housing	NON-REPONDABLE SCHEENING CHARGE \$ 45.00
OWNER/AGENT ADDRESS 2078 6th Ave SE, Albany, OR 97321	PHONE (041) 924-1003
SMOKING POLICY: ALLOWED - ENTIRE PREMISES PROHIBITED - ENTIRE	PREMISES [_] ALLOWED IN LIMITED AREAS (ASK MANAGEMENT FOR DE
PLEASE DO NOT LEAVE ANYTHING BLANK. IF NOT APPLICABLE, WRITE "N/A."	
APPLICANT FULL LEGAL NAME	EMAIL .
PREVIOUS NAMES, ALIASES OR NICKNAMES USED	
DATE OF BIRTH SOC, SECURITY #	APPLICANT PHONE ()
GOVERNMENT ISSUED PHOTO I.D. TYPE#_	/ STATE EXP. DATE
CURRENT STREET ADDRESS	MM/DC/VVVV
CITY STATE ZIP	DATE YOU MOVED IN
HAVE YOU APPLIED TO ANY OTHER LOCATIONS MANAGED BY LANDLORD IN THE	WWIDDIAAAA
IF YES, WHERE?	—
CURRENT LANDLORD NAME	
	LANDLORD FAX ()
STREET ADDRESS (OR APT NAME)C	
STREET ADDRESS (OR AFT NAME)	SIAIEZIP
APPLICANT FORMER STREET ADDRESS	
CITYSTATEZIP	FROM TO
FORMER LANDLORD NAME	MM/DD/YYYY MM/DD/YYYY LANDLORD PHONE ()
LANDLORD EMAIL	
STREET ADDRESS (OR APT NAME)C	
OTHER STATES AND COUNTIES YOU HAVE LIVED IN DURING THE PAST 5 YEARS	
The state of the s	
ARE YOU SELF-EMPLOYED? YES NO ARE YOU A FULL-TIME STUI	DENT? YES NO
CURRENT EMPLOYER	PHONE ()
HR EMAIL	
STREET ADDRESSC	CITYSTATEZIP
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MAKE	MODEL	COLOR	STATE	LICENSE PLATE #	OWNER
					
☐ IF CHECKED, PETS ARE	NOT ALLOWED AT THIS PROPE	ERTY.			
	EALLOWED SUBJECT TO MANAG				
	TYPE				
	TYPE				
NAME	TYPE	BREED _		AGE	WEIGHT
EMERGENCY CONTACT				PHONE ()	
	ATH				
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DO VOLUNTEND TO USE:	☐ WATERBED ☐ AQUARIU	M □ MUSICAL INSTRUME	NT	——————————————————————————————————————	
	WITHIN THE LAST 5 YEARS OR				
IE VES IN FASE LIST COLL	INTY & STATE				
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HAVE YOU EVER HAD A HO	OME FORECLOSED ON, OR ARE R PERSON WHO WILL BE OCCUI	: YOU CURRENTLY IN THE F	ORECLOSURE PE	OCESS? LYES LNO	IF YES, DATE MM/DD/YYYY AND EEL ON
HAVE YOU OR ANY OTHER	R PERSON WHO WILL BE OCCUI TED TO THE CRIMINAL CONVIC	PYING THE UNIT EVER BEEN TION CRITERIA? TIVES T	NO IF YES WE	OR PLED GUILTT OR NO.	CONTEST TO, ANT FELONT
COUNTY & STATE	MHEN	1MH	AT		
HAVE YOU OR ANY OTHE	WHEN	UPYING THE UNIT BEEN AF	RESTED FOR A	CHARGE RELATED TO TH	E CRIMINAL CONVICTION
CRITERIA THAT HAS NOT	BEEN DISMISSED? ☐ YES ☐ N	NO IF YES, COUNTY & STATE	<u> </u>		
	YOUR PRESENT PLACE OF R				
HOW DID YOU HEAR ABO	OUT OUR PROPERTY?				
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