



APPLICATION FOR HOUSING

Application # _____
Date Received _____
Time Received _____
Processed By _____

504 COORDINATOR
Karina Barragan

TELACU Residential Mgmt.
1248 Goodrich Blvd.
Los Angeles, CA 90022
Ph: (323) 838.8556
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NAME OF FACILITY

TELACU RESIDENTIAL MANAGEMENT

Subsidiary of TELACU

Instructions for Head of Household:

Answer all questions on this application. Enter "None" or N/A for those questions which do not apply to you or which you choose not to answer. Applications will not be considered unless they are fully completed.

WE WILL NOT ACCEPT COPIES OF APPLICATIONS

PLEASE PRINT OR TYPE

Form with fields: LAST NAME, FIRST NAME, M.I., TELEPHONE NUMBER, CURRENT ADDRESS, APT. #, CITY, STATE, ZIP CODE, VOLUNTARY INFO.: RACE/ETHNICITY

1. List yourself and all other applicants (if any) who will reside in the unit and their relationship to you.

Table with 6 columns: Applicant, Relationship, Date of Birth, Social Security, Age, GENDER (Voluntary)

Indicate the bedroom(s) size you are interested in applying for: ___ 0 ___ 1

2. Please answer each of the following questions: YES NO ANNUAL AMOUNT. Questions about education, employment, income, and expenses.



YES NO

3. Does any member of your household have a physical impairment that: (a) is expected to be of long-continued and indefinite duration; (b) substantially impedes one's ability to live independently; and (c) is of such a nature that the ability to live independently could be improved by more suitable housing conditions?.....

___ ___

4. Do you or a member of your household need a unit with accessibility features?.....
If yes, please explain _____

___ ___

5. How many vehicles do the family own? _____ List make, color, year, license plate number and state for each:

6. If a live-in-aid attendant is required for an elderly, handicapped, or disabled member, please enter the name of the attendant and the name and address of a doctor who can verify the need for the attendant:

Name of attendant: _____

Name and Address of Doctor: _____

7. If you are now renting, who is your landlord?

Name _____ Phone: (____) _____

Current Rent: \$ _____ Address _____

Security Deposit: \$ _____

If you are not renting, please explain your current living arrangements: _____

8. If you have moved within the past five years, give the name, address, and phone number of your previous landlords and the date you lived there. (Use an additional sheet if you need more space)

Address of last location	Name of Landlord	Telephone	Lived-from (MM/DD/YY)	To (MM/DD/YY)

YES NO

9. Have you or spouse/co-applicant ever used different names from the names given in this application?.....
If yes, please explain: _____

___ ___

10. Have you or any members of your household ever used social security numbers different from those listed in this Application?
If yes, please explain: _____

___ ___

11. Have you, or spouse/co-applicant, ever been evicted or otherwise involuntarily removed from rental housing due to fraud, non-payment of rent, failure to cooperate with recertification procedures, or for any other reasons?
If yes, please explain: _____

___ ___

12. Do you live or have ever lived in subsidized housing?.....
If Yes, where? _____
When? From: _____ To: _____ Were you evicted?.....

___ ___

___ ___

If yes, did you owe rent? Yes ___ NO ___ If yes, how much did you owe? \$ _____

13. Do you as an individual or your family have either a Section 8 Certificate or Voucher?.....

___ ___

14. How did you hear about this housing facility? _____



FINANCIAL INFORMATION - Complete this page for each member who will live in the unit who has any income or assets.

You do not need to complete this page for a live-in-attendant. For financial information, please write the names addresses of people who can verify the information you provide. (For example: income, write your employer's address; for a pension write the name and address of the agency). Please use an additional sheet of paper to record additional information if there isn't enough room for entry.

INCOME: List all employment and non-employment income for all household members. Include Recurring Gifts (cash contributions), Social Security, Salary, Wages, SSI, IRA, Keoghs, V.A. Pension, annuities, general assistance, and any other source of income.

Member Name (Last, First, Initial)	Type of Income And who pays it?	Estimated Total Income (Circle week or month)	Address of Income Source	Contact Person Name and Telephone
		\$ week or month		
		\$ week or month		
		\$ week or month		
		\$ week or month		
		\$ week or month		

ASSETS: List assets of all household members; include savings, checking accounts, certificates of deposit, IRA, stocks, mutual funds, credit union shares, land real estate (including your home, if you own it) and any other assets.

Member Name (Last, First, Initial)	Account Number	Description of Asset	Current Value of Asset	Interest Rate Annual income	Bank/Credit Union Address

List any assets that YOU have disposed of, transferred, given away, or sold for less than the market value during the last 2 years. (e.g., a house, car or cash)

Description of Asset	Date Disposed of	Fair Market Value	Divesture Cost (e.g., Realtor, CD penalty)	Amount Received	Name & Address of Bank Institution, Real estate Appraiser who can verify

List family members and address for emergency purpose only.

Name	Address	Phone Number	Relationship



Applicant Signature and Certification

I/We request, authorize and consent to TELACU Residential Management (TRM) to conduct a thorough investigation of whether I/we have a record of criminal convictions, and if so, the nature of such criminal convictions and all surrounding circumstances available through lawful means. TPM has advised me that its criminal background check will focus on conviction and that a criminal record will disqualify me from renting.

Initials: Head of Household

Spouse/Co-Applicant

Co-Applicant

I/We understand the information in this application will be used to determine eligibility for a unit and that this information will be checked. I/We understand that any false information may make us ineligible for a unit.

I/We certify that all information given in this application and in the attachments: member's information, income, assets and the citizenship declaration are true, complete and accurate. I/We understand that if any of this information is false, misleading or incomplete, management may decline our application or, if move-in has occurred, terminate our Rental Agreement.

I/We freely and voluntarily authorize the investigation of all statements contained in this questionnaire. I/We understand that the company may request an investigative consumer report from a consumer reporting agency. I/We understand that the investigative consumer report may involve personal interviews with my neighbors, friends, relatives, former employers, schools and others. I/We also understand that under the Federal Fair Credit Reporting Act, I/We have the right to make a written request to the company, within a reasonable time, for the disclosure of the name and address of the consumer reporting agency and the third party reporting agency, so that I/we may obtain a complete disclosure of the nature and scope of the investigation.

This authorization is limited to use regarding this facility.

I/We have been made aware of the provisions of Section 1001 of Title 18 of the U.S. code. I/We understand that any person, who knowingly or willingly requests, obtains or discloses any information under false pretenses may be subject to a misdemeanor and fined more than \$5,000.

If this application is for a household of more than one person, I/we consider ourselves a stable household, and all of our income is available to the household for its needs.

For HUD Subsidized Facilities: I/We also understand that all adult members of the household must sign the HUD required Consent Form ("Authorization for Release of Information") before I/we can be offered a unit.

SIGNATURE OF HEAD OF HOUSEHOLD

DATE

SPOUSE

DATE

CO-APPLICANT

DATE

CO-APPLICANT

DATE

PLEASE RETURN ORIGINAL APPLICATION TO:

**TELACU RESIDENTIAL MANAGEMENT
1248 Goodrich Blvd.
Los Angeles, CA 90022**

