

New Affordable Housing in Milpitas!

**Devries Place Senior Apartments
163 N. Main Street
Milpitas, CA 95035**



New senior rental housing now available for qualified applicants:

Rents: Studio \$557 / 1 BR \$498 - \$796 / 2 BR \$597 - \$954 / Sec. 8 vouchers accepted

(Rents are subject to change per regulatory agreement or changes in utility allowances)

Maximum Income Limits: Preference will be given in the following order:

- | | |
|----------------------|---|
| 1. 1 Person \$29,720 | 1. People who live in Milpitas (except Milpitas residents currently living in affordable housing) |
| 2. 2 People \$33,960 | 2. People who work in Milpitas |
| 3. 3 People \$38,200 | 3. All other applicants |
| 4. 4 People \$42,440 | |
| 5. 5 People \$45,840 | * At least one household member must be 62 years old or older. |

To participate in the LOTTERY, all completed applications must be received @ RIVERWOOD PLACE, 5090 Lick Mill Blvd., Santa Clara, CA by Friday, March 14th, 2008 at 4:00 pm. All applications received after this date will be accepted, but will be added to the end of the Wait List.

APPLICATIONS available at the following locations:

- | | |
|---|--|
| 1. Riverwood Place
5090 Lick Mill Blvd.
Santa Clara, CA, 95054
(Pick up & Drop off/Mail back) | 3. Milpitas Senior Center
640 S Abel St.
Milpitas, CA 95035
(Pick up only) |
| 2. Mid-Peninsula Housing Mgmt. Corp.
303 Vintage Park Drive, Suite 250
Foster City, CA 94404
(Pick up only) | 4. Milpitas City Hall
455 E. Calaveras Blvd.
Milpitas, CA 95035
(Pick up only) |

We cannot mail out applications unless required as an accommodation for a disability

Applications may be downloaded at www.midpen-housing.org.
All application questions must be directed to Mid-Peninsula Housing:
(408) 438-8947 / TDD (650) 357-9773

Managed By:

Mid-Peninsula Housing Management Corporation

"It is the mission of Mid-Peninsula Housing Coalition and its affiliates to provide decent, safe affordable shelter of high quality to those in need; to establish stability and opportunity in the lives of residents; and to foster communities that allow citizens from all ethnic, social, and economic backgrounds to live in dignity, harmony, and mutual respect."



- b. Does any member of your household currently work in the City of Milpitas? (Circle one) Yes No
 - c. If a member of your household is currently living in the City of Milpitas, is that residence in an income-restricted unit (e.g. Terrace Gardens?) (Circle one) Yes No
4. **Credit History:** The basic pattern of past and present use of credit is taken into account. Lack of credit history does not mean negative or bad credit. A clearly negative history is not allowed. Slow payments, evictions, delinquent accounts, judgments, charge-offs, repossessions or bankruptcy within the last 7 years will generally disqualify an applicant.
 5. **Rental/Eviction History:** An applicant should have a positive rental history of at least 5 years. It must be verifiable, with reference(s) that include verification(s) of timely rent payment, compliance with rules and regulations, and evidence of no evictions. *References from relatives are not acceptable.* Lack of rental history does not mean negative or bad rental history. Evictions or slow rent payments will generally disqualify an applicant.
 6. **Behavior and Conduct:** A history of behavior, which constitutes a direct threat to the health or safety of other individuals, will disqualify an applicant. Any applicant who has been convicted of drug-related crimes and/or demonstrated a history of burglary, robbery, vandalism or aggravated assault or other crimes against persons or property will not be accepted.
 7. **Stability of Residence:** If an applicant demonstrates a negative or unverifiable rental history, the applicant is subject to review and possible denial.
 8. **Housekeeping and Care of Property:** An applicant should have positive references with regard to ability and willingness to maintain the apartment in a clean and sanitary manner and refrain from damaging the unit.
 9. **All household members 18 years and older must sign the acknowledgment and return with the application.**

RESIDENT SELECTION PROCESS

1. A residential lottery will determine the applicant's place on the wait list.
2. Applicant's credit history will be reviewed. Lack of credit does not constitute negative or bad credit.
3. An applicant's rental history will be reviewed.
4. Third party verification will be obtained from all related sources to verify all aspects of the eligibility/qualification process; e.g. income, assets, landlord references, preference eligibility.
5. When an appropriately sized unit becomes available and your name is among the top five applicants on the waiting list, we will contact you to come in to the Management Office for an interview.

MAINTAINING AN UP-TO-DATE APPLICATION

It is the applicant's responsibility to inform the management in writing of any change to the information on the application (e.g. address, household size, and income level) in order to confirm your continued interest in remaining on the waiting list. The applicant must write to the management office once every six months to confirm continued interest and provide updated address, household size, and income level information.

All persons on the waiting list are required to maintain contact with the management office in order to remain active on the list. **Failure to contact the Management Office can result in your application being removed from the waiting list.**

If an application remains on a waiting list for an extended period of time (one or more years), the applicant must update the existing application at the time of interview.

APPLICANT CERTIFICATION

I HAVE READ AND AGREE TO ABIDE BY THE ABOVE CRITERIA:
(ALL adult members of the household age 18 and over must sign below)

Applicant Signature	Date	Applicant Name
Applicant Signature	Date	Applicant Name
Applicant Signature	Date	Applicant Name
Applicant Signature	Date	Applicant Name
Applicant Signature	Date	Applicant Name

Acknowledgement of Receipt by Property Representative:

Signature	Title	Date
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DEVRIES PLACE

Listed below are the Maximum Income Levels as per Tax Credit Allocation Guidelines.

	One Person	Two Persons	Three Persons	Four Persons	Five Persons
25% Income Level	\$18,575	\$21,225	\$23,875	\$26,525	\$28,650
30% Income Level	\$22,290	\$25,470	\$28,650	\$31,830	\$34,380
40% Income Level	\$29,720	\$33,960	\$38,200	\$42,440	\$45,840
100% Income Level	\$74,300	\$84,900	\$95,500	\$106,100	\$114,600

DEVRIES PLACE NET RENTS

	Studio		1BR		2BR
25% Income Level	\$464		\$498		\$597
30% Income Level	\$557		\$597		\$716
40% Income Level	\$742		\$796		\$954
100% Income Level	\$1,856		\$1,990		\$2,386

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. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed 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.
 1. **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."
 2. **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.
 1. **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.
 2. **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
 3. **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."
 4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.



INITIAL MOVE IN APPLICATION- BASIC HOUSEHOLD INFORMATION
Please Complete One for Each Household

DEVRIES PLACE

List all household members that live in this apartment with you.

Lottery/Unit Number _____

Member #	Relationship to Head of Household	Name First, Middle Initial, Last	Social Security Number	DOB (mm/dd/yyyy)	Student Y/N
Member #1					
Member #2					
Member #3					
Member #4					
Member #5					
Member #6					
Member #7					
Member #8					
Member #9					

Current Address: _____

Daytime Phone: _____ Evening Phone: _____

- YES NO
1. Does your household have or anticipate having any pets other than those used as service animals?
 Explanation: _____
- YES NO
2. Have you or any one else named on this application filed for bankruptcy?
 Explanation: _____
- YES NO
3. Have you or any one else named on this application been convicted of any felony or for dealing or manufacturing illegal drugs?
 Explanation: _____
- YES NO
4. Have you or any one else named on this application been convicted of property damage?
 Explanation: _____
- YES NO
5. Have you or any one else named on this application been evicted from a rental unit of any type including an apartment, home, mobile home or trailer?
 Explanation: _____



INITIAL MOVE IN APPLICATION- BASIC HOUSEHOLD INFORMATION

YES NO 6. Does anyone in your household need a barrier free unit?
 Household Member: _____
 Explanation: _____

YES NO 7. Does anyone in your household require any features/accommodation because of a disability?
 Household Member: _____
 Explanation: _____

Landlord History

List the past 2 years of housing references. Not Applicable at recertification (If additional space is needed use the back of this page.)

OWN <input type="checkbox"/>	RENT <input type="checkbox"/>	<u>Landlord's Name/Address/Phone</u>	<u>Your Address</u>	<u>FROM</u> <small>(Move-In date)</small>	<u>TO</u> <small>(Move-Out date)</small>
		Name: _____	_____		
		Address: _____	_____		
		Phone: _____	_____		
		AMOUNT PAID: \$ _____			
OWN <input type="checkbox"/>	RENT <input type="checkbox"/>	<u>Landlord's Name/Address/Phone</u>	<u>Your Address</u>	<u>FROM</u> <small>(Move-In Date)</small>	<u>TO</u> <small>(Move-Out Date)</small>
		Name: _____	_____		
		Address: _____	_____		
		Phone: _____	_____		
		AMOUNT PAID: \$ _____			
OWN <input type="checkbox"/>	RENT <input type="checkbox"/>	<u>Landlord's Name/Address/Phone</u>	<u>Your Address</u>	<u>FROM</u> <small>(Move-In Date)</small>	<u>TO</u> <small>(Move-Out Date)</small>
		Name: _____	_____		
		Address: _____	_____		
		Phone: _____	_____		
		AMOUNT PAID: \$ _____			



INITIAL MOVE IN APPLICATION- BASIC HOUSEHOLD INFORMATION

EMERGENCY CONTACT

List someone in the area that is not already on the application:

Name: _____ Phone Number: _____

Address: _____

Relationship: _____ Years Known: _____

VEHICLE INFORMATION

List vehicle information for all vehicles that are owned or operated by any household member:

	<u>Make/Model/Year</u>	<u>Tag/License Plate#</u>	<u>State Issued</u>
Vehicle #1	_____	_____	_____
Vehicle #2	_____	_____	_____

Signature Clause:

I understand that management is relying on this information to prove my household's eligibility for housing under their published resident selection criteria and the LIHTC and/ or HUD Housing Program. I certify that all information and answers to the above questions are true and complete to the best of my knowledge.

I consent to release the information necessary to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application. I also understand that such action may result in criminal penalties.

I authorize and consent to have management verify the information contained in this application. I will provide all necessary information including source names, addresses, phone and account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent on meeting management's resident selection criteria and the LIHTC and / or HUD requirements.

ALL ADULT household members must sign below:

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

RECEIVED BY (SIGNATURE OF OWNER/REPRESENTATIVE)

DATE AND TIME STAMP



TENANT INCOME CERTIFICATION QUESTIONNAIRE- MOVE IN and RECERTIFICATION

STUDENT STATUS

Yes No

<input type="checkbox"/> (S-01, S-02)	<input type="checkbox"/>	30. Does the household consist of persons who are all <u>full-time</u> students (Examples: College/University, trade school, etc.)?
<input type="checkbox"/> (S-01, S-02)	<input type="checkbox"/>	31. Does your household anticipate becoming a full-time student household in the next 12 months?
<input type="checkbox"/> (S-03)	<input type="checkbox"/>	<p>If you answered yes to either of the previous two questions are you:</p> <ul style="list-style-type: none"> • Receiving assistance under Title IV of the Social Security Act (AFDC/TANF) • Enrolled in a job training program receiving assistance through the Job Training Participation Act (JTPA) or other similar program • Married and filing a joint tax return • Single parent with a dependant child or children and neither you nor your child(ren) are dependent of another individual

GENERAL INFORMATION

Yes No

<input type="checkbox"/> (O-02)	<input type="checkbox"/>	32. Are any household members married to a person who will not live in the unit?
<input type="checkbox"/>	<input type="checkbox"/>	33. Do you expect any additions to the household within the next twelve months? Name and Relationship: _____ Explanation: _____
<input type="checkbox"/>	<input type="checkbox"/>	34. Do all children listed in the household live in the unit at least 50% of the time? Explanation if "no": _____
<input type="checkbox"/>	<input type="checkbox"/>	35. Are there any absent household members who under normal conditions would live with you? (For example a household member away in the military, or an adult dependant child away at school?) Explanation: _____

I understand that management is relying on this information to prove my household's eligibility for the LIHTC and/or HUD Housing Program(s).

Under penalties of perjury, I certify that the information presented on this form is true and accurate to the best of my/our knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information will result in the denial of application or termination of the lease agreement.

I authorize and consent to have management verify the information contained in this application. I will provide all necessary information including source names, addresses, phone numbers, account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent on meeting management's resident selection criteria and the Housing Program requirements.

PRINTED NAME OF APPLICANT/TENANT

SIGNATURE OF APPLICANT/TENANT

DATE

WITNESSED BY (SIGNATURE OF OWNER/REPRESENTATIVE)

DATE

