

THE NORTHRIDGE GROUP, INC.
MOUNTAIN MEADOWS SENIOR APARTMENT RENTAL PROGRAM

Information provided herein shall be kept confidential and shall be used for the sole purpose of determining eligibility and collecting statistical data for the Big Bear Affordable Senior Apartment Rental Program.

SECTION 1: INCOME

A. APPLICANT'S (Head of Household)

NAME: _____ **AGE:** _____

CURRENT ADDRESS _____

CITY/STATE: _____ **ZIP:** _____

HOME PHONE: () _____ **RENT:** _____ **OWN:** _____

SOCIAL SECURITY NO: _____ **DATE OF BIRTH:** _____

DRIVER'S LICENSE OR IDENTIFICATION NO: _____

DRIVER'S LICENSE EXPIRATION DATE: _____

MARITAL STATUS: Married: _____ Divorced: _____ Widowed: _____ Single: _____

RACE: White: _____ Asian: _____ Native American: _____
Hispanic: _____ Other: _____ African-American: _____

PREVIOUS ADDRESSES DURING PAST TEN (10) YEARS:

(Please attach additional sheets if necessary)

<u>DATES</u>	<u>ADDRESS</u>
FROM : _____ TO: _____	_____ ZIP: _____

FROM : _____ TO: _____	_____ ZIP: _____
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FROM : _____ TO: _____	_____ ZIP: _____
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PLACE OF EMPLOYMENT (IF APPLICABLE): _____

ADDRESS: _____ **BUS. PHONE:** () _____

CITY/STATE: _____ **ZIP:** _____

B. CO-APPLICANT OR SPOUSE'S NAME: _____

AGE: _____

CURRENT ADDRESS _____

CITY/STATE: _____ ZIP: _____

HOME PHONE: () _____ RENT: _____ OWN: _____

SOCIAL SECURITY NO: _____ DATE OF BIRTH: _____

DRIVER'S LICENSE OR IDENTIFICATION NO: _____

DRIVER'S LICENSE EXPIRATION DATE: _____

MARITAL STATUS: Married: _____ Divorced: _____ Widowed: _____ Single: _____

RACE: White: _____ Asian: _____ Native American: _____
Hispanic: _____ Other: _____ African-American: _____

PREVIOUS ADDRESSES DURING PAST TEN (10) YEARS:

(Please attach additional sheets if necessary)

DATES ADDRESS
FROM : _____ TO: _____ ZIP: _____

FROM : _____ TO: _____ ZIP: _____

FROM : _____ TO: _____ ZIP: _____

PLACE OF EMPLOYMENT (IF APPLICABLE): _____

ADDRESS: _____ BUS. PHONE: () _____

CITY/STATE: _____ ZIP: _____

C. INCOME:

1. Your total anticipated income for the twelve (12) month period beginning the date that I/we plan to move into the apartment:

	APPLICANT	CO-APPLICANT OR SPOUSE
a. All wages and salaries, overtime pay, commissions, fees, tips, bonuses and other compensation for personal services before deductions.	\$ _____	\$ _____
b. The net income from the operation of a business or profession or from the rental of real or personal property (without deducting expenditures for business expansion or amortization of capital indebtedness or any allowance for depreciation of capital assets);	\$ _____	\$ _____

INCOME CONTINUED:

	APPLICANT	CO-APPLICANT OR SPOUSE
c. Payments in lieu of earnings, such as unemployment and disability compensation, workmen's compensation and severance pay;	\$ _____	\$ _____
d. Interest and dividends (including income from assets excluded below);	\$ _____	\$ _____
e. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, disability or death benefits and other similar types of periodic receipts, including any lump sum payment for the delayed start of a periodic payment;	\$ _____	\$ _____
f. The maximum amount of public assistance available to the above persons other than the amount of assistance specifically designated for shelter and other utilities;	\$ _____	\$ _____
g. Periodic and determinable allowance, such as alimony and child support payments and regular contributions and gifts received from persons not residing in the dwelling;	\$ _____	\$ _____
h. All regular pay, special pay and allowances of a member of the Armed Forces (whether or not living in the dwelling) who is the head of the household or spouse; and	\$ _____	\$ _____
i. Any earned income tax credit to the extent that it exceeds income tax liability.	\$ _____	\$ _____

2. Do the persons whose income or contributions included above have:

	APPLICANT	CO-APPLICANT OR SPOUSE
a. savings, stocks, bonds, equity in real property or other form of capital investment (excluding the values of necessary items of personal property such as furniture and automobiles and interests in Indian trust land?	Yes ____ No ____	Yes ____ No ____
b. disposed of any assets (other than at a foreclosure or bankruptcy sale) during the last two (2) years at less than fair market value?	Yes ____ No ____	Yes ____ No ____
c. if the answer to (a) or (b) above is yes, does the combined total value of all such assets owned or disposed of by all such persons total more than \$5,000.00?	Yes ____ No ____	Yes ____ No ____
d. if the answer to (c) is yes, state:		
(i) the amount of income expected to be derived from such assets in the twelve (12) month period beginning on the date of initial occupancy in the apartment you propose to rent.	\$ _____	\$ _____
(ii) the amount of such income, if any, that was included in Item 1 above.	\$ _____	\$ _____

SECTION 2: SPECIAL CONDITIONS

- A. Are you currently a resident of the City of Big Bear Lake which has been, or is about to be, displaced from your current residence as defined in Section A-7 of the Mountain Meadows Tenant Eligibility and priority guidelines? Yes: ____ No: ____

If yes, please explain.

- B. Are you and/or your Co-Applicant handicapped/disabled as defined in Section A-5 and A-6 of the Mountain Meadows Tenant Eligibility and Priority Guidelines? Yes: ____ No: ____

If yes, please explain.

- C. Are you and/or your Co-Applicant a veteran as defined in Section A-15 of the Mountain Meadows Tenant Eligibility and Priority Guidelines? Yes: ____ No: ____

If yes, what branch of the Arm Forces did you serve?

How long did you serve?

When were you discharged?

Did you receive a Honorable Discharge?

Yes: ____ No: ____

If no, what type of discharge did you receive?

SECTION 3: ACCOMMODATIONS

CO-APPLICANT

APPLICANT

OR SPOUSE

- A. Have you been living alone for longer than one (1) year prior to filing this application?.
- B. Have you been living alone for less than one (1) year prior to filing this application?.
- C. Are you currently sharing rental accommodations with unrelated persons for longer than one (1) year prior to filing this application?.
- D. Are you currently sharing rental accommodations with unrelated persons for less than one (1) year prior to filing this Application?
- E. Are you currently sharing accommodations but not ownership, with immediate family members, other than spouse, for longer than one (1) year prior to filing this application.
- F. Are you currently sharing accommodations but not ownership, with immediate family members, other than spouse, for less than one (1) year prior to filing this application.

Yes ____ Yes ____
No ____ No ____

Yes ____ Yes ____
No ____ No ____

Yes ____ Yes ____
No ____ No ____

Yes ____ Yes ____
No ____ No ____

Yes ____ Yes ____
No ____ No ____

Yes ____ Yes ____
No ____ No ____

If you have answered any of the above "yes", please provide the following information on the person you are currently living with:

Name:

Relationship:

Address:

City/State/Zip:

Telephone:

- E Please provide the following information if you and/or your Co-Applicant are currently residing in rental accommodations:

Street Address: _____
City/State/Zip: _____
How long have you lived there? _____
Landlord's name: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____

SECTION 4: RESIDENCY

(NOTE: IF YOU HAVE NOT PREVIOUSLY OR DO NOT CURRENTLY RESIDE WITHIN THE CITY LIMITS OF BIG BEAR LAKE, PLEASE PROCEED TO QUESTION "H" BELOW)

- A Are you currently a resident of the City of Big Bear Lake? Yes ____ No ____
- B If yes, how long have you been an resident in the City of Big Bear Lake? Yes ____ No ____
- C Do you have immediate family member(s) currently living in the City of Big Bear Lake? Yes ____ No ____
- D If yes, how long have they lived in the City of Big Bear Lake? Yes ____ No ____
- E If your answer to "C" above is "yes", please provide the following information on your immediate family member(s) currently living in the City of Big Bear Lake.

Name: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____
Rent: ____ Own: ____

- F If immediate family member(s) are currently renting a residence, please provide the following information.

Landlord's name: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____

- G Have you lived in the City of Big Bear Lake for a minimum of thirty six (36) continuous months within the last ten (10) years? Yes: ____ No: ____

If yes, please provide the following information.

1. Address of Residence: _____
2. How long did you live there? _____
3. Did you rent or own? _____
4. If you rented, please provide the following information:
Landlord's name: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____

H. **BEAR VALLEY RESIDENTS ONLY:**

(NOTE: THIS SECTION APPLIES ONLY TO RESIDENTS THAT ARE CURRENTLY OR HAVE PREVIOUSLY LIVED OUTSIDE THE CITY OF BIG BEAR LAKE CITY LIMITS)

1. Are you currently a resident of the Big Bear Valley area? Yes ____ Yes ____
No ____ No ____

2. If yes, how long have you been an resident in the Big Bear Valley? _____

3. Do you have immediate family member(s) currently living in the Big Bear Valley? Yes ____ Yes ____
No ____ No ____

4. If yes, how long have they lived in the City of Big Bear Valley? _____

5. If your answer to "C" above is "yes", please provide the following information on your immediate family member(s) currently living in the Big Bear Valley.

Name: _____
Relationship: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____
Rent: ____ Own: ____

6. If immediate family member is currently renting a residence, please provide the following information.

Landlord's name: _____
Address: _____
City/State/Zip: _____
Telephone: _____

7. Have you lived in the Big Bear Valley area for a minimum of thirty six (36) continuous months within the last ten (10) years? Yes: ____ No: ____

If yes, please provide the following information.

a. Address of Residence: _____

b. How long did you live there? _____

c. Did you rent or own? _____

d. If you rented, please provide the following information:

Landlord's name: _____
Street Address: _____
City/State/Zip: _____
Telephone: _____

APPLICANT'S CERTIFICATION:

This certificate is made with the knowledge that it will be relied upon by the Owner to determine maximum income and eligibility to occupy an apartment; and I/we declare that all information set forth herein is true, correct and complete and, based upon information I/we deem reliable and that the statement of total anticipated income contained in the Income Section is reasonable and based upon such investigation as the undersigned deemed necessary.

I/we will assist the Owner in obtaining any information or documents required to verify the statements made herein, including but not limited to either an income verification from my/our present employer(s) or copies of federal tax returns for the immediately preceding calendar year.

I/we acknowledge that I/we have been advised that the making of any misrepresentation or misstatement in this declaration will constitute a material breach of my/our agreement with the Owner to lease the apartment and will entitle the Owner to prevent or terminate my/our occupancy of the apartment by institution of an action for eviction or other appropriate proceedings.

I/we declare under penalty of perjury that the foregoing is true and correct.

Executed this _____ day of _____, 20__, in the County of San Bernardino,
State of California.

APPLICANT (HEAD OF HOUSEHOLD)

CO-APPLICANT OR SPOUSE