



RENTAL HOUSING WAITING LIST APPLICATION

Vista del Valle

Property Applying for

Applicant's name _____

Residence address _____

Mailing address _____

Telephone Numbers Daytime: () Evening: ()
 Cell : () Work: ()

OFFICE USE ONLY:

The household size qualifies for the following size unit: (See Household Size Guidelines Noted In Resident Selection Criteria)

- SRO (1 person) Studio (1-2 persons) 1BR (1-3 persons)
 2BR (2-5 persons) 3BR (4-7 persons) 4BR (6-9 persons)

HOUSEHOLD COMPOSITION (Please attach a separate sheet for additional household members.)

List yourself as the applicant and first household member. Use a separate line for each member.

	Name	Relationship	Social Security # (Optional)	Birth Date
1				
2				
3				
4				
5				
6				
7				

Please check the following statement if it applies to your household:

One or more household members listed above has been evicted within the past 5 years. If so, list household member name: _____.

SECTION 8

Do you possess a current Section 8 voucher or certificate? Yes or No (circle one)



If hearing impaired call 800-735-2929.
 Napa Valley Community Housing does not discriminate against any person
 use of race, color, religion, national origin, sex familial status, disability, marital status, age,
 ancestry, sexual orientation, medical condition, gender, gender identity, gender expression, genetic
 information, source of income, any arbitrary basis or any other basis protected by federal and/or
 California law.



HOUSEHOLD GROSS INCOME (all household members 18 or over)

#	Name of Employer	Annual Gross Income
TOTAL ANNUAL GROSS HOUSEHOLD INCOME		

HOUSEHOLD ASSETS (all household members 18 or over)

#	Bank / Type of Asset (e.g. savings, real estate, 401-k)	Cash Value

Criminal/ History

A. Have you, or any other person named on this application, ever been convicted for manufacturing or distribution of a controlled substance?

Yes No

If yes, Name: _____ Date: _____ Reason: _____
 Name: _____ Date: _____ Reason: _____

How did you hear about us? _____



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Applicant's Certification

I hereby apply to lease the above-described premises on substantially the terms set forth herein. As an inducement to **Napa Valley Community Housing**, Agent for the owner of the property, to accept this application I certify that all information contained herein is true. Material falsification of information provided may result in the rejection of this application, in the termination of the Lease Agreement, and may be punishable under Federal Law.

By execution of this application, I/we hereby authorize Vista del Valle or its agent, to make such investigations into my credit, employment, rental and criminal history as they may deem appropriate, and release all parties from all liability for any damage that may result from their furnishing information to you. I/we understand that the above information is being collected to determine my/our eligibility.

I/we certify that if selected to receive assistance, the unit I will occupy and it will be my only residence.

APPLICANT SIGNATURE: _____

Date: _____



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