

RENTAL HOUSING WAITING LIST APPLICATION

Property Applying			NAME OF THE OWNER	
Applicant's name	YOUNT	STREET APARTME	NTS	
Residence address				
Mailing address				
Telephone Numbers Daytim Cell: (:()	Evening: (Work: ()	
Selection Criteria) SRO (1 person 2BR (2-5 person HOUSEHOLD COM	qualifies for the Studions) 3BR	io (1-2 persons) [(3-7 persons) [ase attach a separ	(See Household Size Guide 1BR (1-3 persons) 4BR (4-9 persons) ate sheet for additional here.	ousehold members.)
List yourself as the Na:		rst household mem Relationship	ber. Use a separate line for Social Security #	each member. Birth Date
1			(Optional)	
2				
3				
household me	ousehold memb	pers listed above ha	s been evicted within the pa	
Do you possess a curr	ent Section 8 vou	icher or certificate?	Yes	or No (circle one)



If hearing impaired call 800-735-2929.

HOUSEHOLD GROSS INCOME (all household members 18 or over)					
#	Name of Employer	Annual Gross Income			
	TOTAL ANNUAL GROSS HOUSEHOLD INCOM	E			
TOTAL DAGGERS (111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
#	CHOLD ASSETS (all household members 18 or over)	Cash Value			
#	Bank / Type of Asset (e.g. savings, real estate, 401-k)	Cash value			
Crimin	nal/ History				
 A. Have you, or any other person named on this application, ever been convicted for manufacturing or distribution of a controlled substance? Yes \[\bigcup \text{No} \[\bigcup \] 					
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11 y	res, Name:Date: Reason: Name:Date: Reason:				
	ranoradon.				
How did you hear about us?					
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 Yount Street Apartments 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.					
APPLIC	CANT SIGNATURE:	Date:			

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Napa Valley Community Housing does not discriminate against any person see of race, color, religion, national origin, sex familial status, disability, marital status, age, ancestry, sexual origination, 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.

