



Cedar Sinai Park
love. honor. respect.

Kehillah Housing

Site Address: 6000 S.W. Beaverton Hillsdale Highway, Portland, OR 97221

Mailing Address: 6140 SW Boundary Street, Portland, OR 97221, (503) 535-4000

AFFORDABLE HOUSING TENANT RENTAL APPLICATION FOR ADMISSION

To be completed by each legally eligible applicant able to enter into a contract

APPLICATIONS MUST BE COMPLETED IN FULL AND SIGNED

Co-habitants must provide separate applications

Applicant's Name: _____ Valid Photo I.D. Required

Current Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Work Tel. Number: _____

Email Address: _____

How did you hear about us? _____

I understand and acknowledge that the property for which I am applying is an affordable housing complex:

Signature: _____ **Date:** _____

For Office use Only

Date Application Received: _____

Time Application Received: _____

Received By: _____

Cedar Sinai Park Kehillah Housing does not discriminate against any person in housing or services directly or indirectly on the basis of race, color, religion, sex, gender, sexual orientation, national origin, age, familial status, or disability.

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Personal Information

Applicant's Name: _____
Date of Birth: _____ please provide proof
Social Security Number: _____ please provide proof
Telephone Number: _____

Current Address

Street: _____
City: _____ State: _____ Zip Code: _____
Have you given legal notice to vacate current address? [yes] [no]
Current Landlord/Management Company: _____
Address: _____ Telephone Number: _____

Previous Residence

Please provide 3 years of rental history

Address 1: _____
How long did you live there?: _____
Did you give legal notice to vacate? [yes] [no]
Landlord/Management Company: _____
Address: _____ Telephone Number: _____

Address 2: _____
How long did you live there?: _____
Did you give legal notice to vacate? [yes] [no]
Landlord/Management Company: _____
Address: Telephone Number: _____

Address 3: _____
How long did you live there?: _____
Did you give legal notice to vacate? [yes] [no]
Landlord/Management Company: _____
Address: Telephone Number: _____

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Are you currently living in a subsidized property?

Source: _____ Monthly: _____ Annually: _____

Source: _____ Monthly: _____ Annually: _____

Source: _____ Monthly: _____ Annually: _____

Receive Social Security or disability benefits: _____

Have you ever been evicted from an apartment?

Yes: _____ No: _____

Criminal History

Have you ever been convicted, pled guilty, no-contest, or have current pending charges to any felony or misdemeanor (other than a traffic offense)?

Yes: _____ No: _____ Please explain: _____

Offense Date: _____

Registration Locations and Dates (please list in which States):

Please list all states where you have lived previously:

Household Composition

Do you require the features of a mobility impaired unit? [yes] [no]

Eligibility

In order to be eligible for residency at Kehillah Housing, you must (1) be a “disabled household” as defined in 24 CFR 891.305; (2) meet the occupancy requirements for Kehillah Housing approved by the U.S.

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Department of Housing and Urban Development; and (3) meet the very low-income requirements contemplated by 24 CFR 891.105.

Are you currently receiving funds from the Social Security Administration? [yes] [no]
If yes, please check the type of Social Security funds you receive:

- Regular Social Security (for persons over 62 years of age)
- SSI (Supplemental Security Income)
- SSD (Social Security Disability)

If you are under age 62 and you selected “no” above, to indicate that you do not receive funds from the Social Security Administration, or if you only receive Social Security Disability payments from the Social Security Administration, we are required to verify your disability status. Please fill out the following section with the name, address, and phone number of your physician, psychiatrist, therapist, and other qualified professional who is familiar with your condition, and sign and date the form in this packet entitled “Verification of Disability.” We will send it to the professional that you have indicated.

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I certify that the above information is correct and complete and hereby authorized you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that giving incomplete or false information is grounds for rejection of this application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy. Applicants screening entails the checking of the applicant's credit, rental history, employment history, public records and other criteria for residency. The applicant has the right to dispute the accuracy of any information provided to the owner/agent by the screening service or credit reporting agency. The screening service is provided by Pacific Screening Inc., PO Box 25582, Portland, OR 97298 (503) 297-1941. If the applicant is approved, the applicant will be contacted by Kehillah Housing, for further information in order to execute a rental agreement. Owner/agent shall have noliability to applicant until such time as a rental agreement is signed by both parties. I understand that a security deposit will be required before I move into an apartment and that pets are allowed only after a pet registration has been processed and approved. Applicant acknowledges receipt of a copy of the Criteria for Residency. I certify that if selected to receive assistance, the unit I occupy will be my only residence. The information contained in this application is true and complete. I agree to all fo Thea bone and sign this application of my own volition.

Applicant signature: _____ Date: _____
Lessor/Agent Signature: _____ Date: _____

- *Acceptable Social Security Number verifications are as follows:
- Social Security card issued by the Social Security Administration
- Driver's license
- Identification card issued by a Federal, State, or a local agency
- Earning statements or payroll stubs
- Bond statements
- IRS Form 1099
- Benefit award or Retirement Benefit letter
- Life Insurance policies
- Court records

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