



Home Rental Information and Application

NeighborWorks Mountain Country Home Solutions is a non-profit organization. We have been creating opportunities for people to improve their lives and strengthen their communities since 1992. We provide affordable rental housing for very low, low, and moderate income families in the state of Utah. We also provide Foreclosure Prevention Counseling, Mortgage Modification Services, Homebuyer Education, and Reverse Mortgage Counseling. Our counselors are HUD - certified and state licensed.

NeighborWorks Mountain Country Home Solutions, does not discriminate on the basis of race, color, religion, national origin, age, disability, gender, gender identity or sexual orientation, religion, familial status, or source of income in the sale, rental and management of any of its residential dwellings, nor in any of our financial counseling services.

NeighborWorks Mountain Country Home Solutions affirms its policy of equal housing opportunity in accordance with all state and federal fair housing laws.



1031 West Center street Suite 302, Orem, Utah 84057

(801) 375-5820

FAX (801) 375-5966

Thank you for your request for more information about our rental house:

NeighborWorks Mountain Country Home Solutions owns and manages several rental properties in Utah County for rent to very low, and low income families. Rents range from \$750 to \$1400 for a three-bedroom, and \$975 to \$1550 for a 4-bedroom unit. Occasionally we have a 5-bedroom house for rent for \$1050 to \$1700. We don't own any one bedroom or studio units. The houses we have for rent are for families only - this means people related to each other. We do not rent to single people, or carry multiple student contracts.

NeighborWorks Mountain Country Home Solutions is a non-profit organization with a mission to acquire older, decaying homes, remodel them and then rent them as affordable, safe homes in order to revitalize traditional neighborhoods.

We understand that the detail in the application process can be frustrating, but we have to answer to our funders – state and federal agencies who require a lot of detail from us. Information is listed below telling you all the things you will need to submit to us with your application. Our application process – checking all the submissions – can take over a week, so if you are in a hurry to get into a house this may be a consideration.

There is a refundable security deposit equal to one month rent due at lease signing, along with the one month rent in advance. All leases are for at least one year. Just prior to the end of the first rental year we will need to verify that all the information you provided originally is still current (employment, etc.) and then the lease may be renewed. All utilities are the responsibility of the tenant as well as yard care and watering in the summer and snow removal in the winter.

HOW TO APPLY:

Obtain an application from us by email at eric.nmchs@gmail.com or download and print a copy from our website (neighborworksmchs.org) or pick one up from our office at 1031 West Center Street Suite 302, Orem, Utah, or we can fax one to you. Our office is open Monday - Wednesday 7:30 to 6:00 and Thursday 7:30 – 5:00. The documents you will need to submit with your application are:

- * **A social security card** for each household member
- * **A US birth certificate** for each household member
- * **A photo ID for anyone 18 or older** who will be living in the house
- * **3 month's most recent bank or credit union statements** with institution name, applicant name and full account number printed on the statements.
- * **3 month's income verification** (all sources: paycheck stubs, social security, child support, housing assistance confirmation, food stamps, etc.)
- * **Most recent 1040 IRS Tax Form**

After you have completed the application we'll schedule an appointment with you for a home visit to your current residence to give us a general idea of how you care for your living areas. We will conduct a criminal background search, run your credit report, and contact your employer for income verification and landlord for references.

We'll contact you if we have any questions, and will let you know as soon as possible about acceptance or denial of your application. Acceptance into our rental program is based on several factors such as availability, unit size, your demonstrated ability to pay consistent rent on time, income level, family size, background check, etc. Any other questions? Please call us.



Rental Application

Address(s) of Unit Applying for _____

Applicant Information				
Name:		E-mail:		
Date of birth:	SSN:	Phone:		
Current address:				
City:	State:	ZIP Code:		
Own	Rent	Monthly payment or rent:		How long?
Previous address :				
City:	State:	ZIP Code:		
Owned	Rented	Monthly payment or rent:		How long?
Employment and Income Information (Restrictions may apply)				
Current employer:				
Employer address:				How long?
Phone:	E-mail:		Fax:	
City:	State:	ZIP Code:		
Position:	Hourly	Salary	(Please circle)	Annual income:
Emergency Contact				
Name of a person not residing with you:				
Address:				
City:	State:	ZIP Code:	Phone:	
Relationship:				
Co-applicant Information, if Married				
Name:		E-mail:		
Date of birth:	SSN:	Phone:		
Current address:				
City:	State:	ZIP Code:		
Own	Rent	Monthly payment or rent:		How long?
Previous address:				
City:	State:	ZIP Code:		
Owned	Rented	(Please circle)	Monthly payment or rent:	How long?
Co-applicant Employment Information				
Current employer:				
Employer address:				How long?
Phone:	E-mail:		Fax:	
City:	State:	ZIP Code:		
Position:	Hourly	Salary	(Please circle)	Annual income:
References of Previous Landlords				
Name:	Address:			Phone:
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.				
Signature of applicant:				Date:
Signature of co-applicant:				Date:

INFORMATION REQUIRED BY HUD - we must ask these questions

HOUSEHOLD COMPOSITION

Household Composition - List the head of your household and all members who live in your home. Give the relationship of each member to the head of household.

Family Size	Full Name	Social Security #	Relationship	Age	Sex	Ethnic Origin (see codes below)
1			Head			
2						
3						
4						
5						
6						
7						

1. Have any of your children been tested for lead paint poisoning? ☐ Yes ☐ No
2. Does anyone live with you now who are not listed above? ☐ Yes ☐ No
3. Does anyone plan to live with you in the future who are not listed above? ☐ Yes ☐ No
4. Have you, your spouse or co-applicant ever declared bankruptcy? ☐ Yes ☐ No
If yes, Date Filed _____ Status _____
Please explain if you answered "Yes" to any question above. _____
6. Are you, your spouse or co-applicant related to an employee of the Provo City Redevelopment Agency, NeighborWorks Provo or any appointed or elected Provo City Official? ☐ Yes ☐ No
7. Have you ever received any type of Federal assistance? If yes, please explain: _____

Race and Ethnicity Category Codes:

1. White - a person having origins in any of the original peoples of Europe, North Africa, or the Middle East.	6. American Indian/Alaskan Native and White - A person having these multiple racial origins as defined above.
2. Black/African American - A person having origins in any of the black racial groups of Africa.	7. Asian/White - A person having these multiple racial Origins as defined above.
3. 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.	8. Black/African American and White - A person having these multiple racial origins as defined above.
4. American Indian/Alaskan Native - A person having origins in any of the original peoples of North and South America (including Central America) and who maintains a tribal affiliation or community attachment.	9. American Indian/Alaskan Native & Black/African American - A person having these multiple racial origins as defined above.
5. Native Hawaiian/Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.	10. Other Multi-Racial - Category used for reporting individual responses that are not included in any of the categories listed above.

White, Black, Asian, Pacific Islander, American Indian, or multi-race may also be counted as being Hispanic. Select from the number code above for your household members race & ethnicity information. The race and ethnicity categories are compiled by the U.S. Department of Housing and Urban Development and are required fields. A person of Hispanic/Latino ethnicity is defined as someone of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture, regardless of race.

Hispanic/Latino for each occupied unit, indicate if the head of household is Hispanic/Latino by circling:

☐ Yes ☐ No

1. Has any household member ever used any names (maiden name, etc.) or Social Security numbers other than the ones currently in use? If yes, please explain:

Family Size and Income Limit Requirements

To qualify for any program using Federal Funds, we are required to determine income eligibility based upon the number of persons who will occupy the household and total household income. Please circle the total number of persons who will be occupying residence, then circle the range that most accurately reflects the combined total household income of all persons 18 years of age and older who will be living in the home you are applying for:

Household Size	Very, Very Low 30% of AMI	Very Low Income 50% of AMI	Low/Moderate Income 80% of AMI	Ineligible Income (more than 80% of the Average Median Income)
1	\$0-\$17,600	\$17,601-\$29,300	\$29,301-\$46,900	\$46,901 or above
2	\$0-\$20,100	\$20,101-\$33,500	\$33,501-\$53,600	\$53,601 or above
3	\$0-\$22,600	\$22,601-\$37,700	\$37,701-\$60,300	\$60,301 or above
4	\$0-\$25,100	\$25,101-\$41,850	\$41,851-\$66,950	\$66,951 or above
5	\$0-\$27,150	\$27,151-\$45,200	\$45,201-\$72,350	\$72,351 or above
6	\$0-\$29,150	\$29,151-\$48,550	\$48,551-\$77,700	\$77,701 or above
7	\$0-\$31,150	\$31,151-\$51,900	\$51,901-\$83,050	\$83,051 or above
8	\$0-\$33,150	\$33,151-\$55,250	\$55,251-\$88,400	\$88,401 or above

Disability:

Does Head of Household or spouse have a verifiable disability? Yes ☐ No ☐
 Do you require wheelchair accessibility? Yes ☐ No ☐

Landlord Information – Please list you’re three [3] most recent landlords:

Failure to provide this information may result in the delay or denial of your application

If you own your home please let us know - and don't fill out this part of the application	Present Landlord	Previous Landlord 1	Previous Landlord 2
Name			
Street Address			
City, State, ZIP			
Phone (include area code)			
How long did you rent?			
Were you evicted?			
If yes, when? (mo/yr)			
If yes, please explain			

Income:

Please consider all sources of income and money received or paid in your behalf for yourself and all members of the household. If you answer YES to any questions below, you must provide all requested information on the following table. Amounts must be gross (before tax), monthly totals. Provide income verification of all monies received by all household members. Verifications could include; printouts from Dept of Workforce Services, Office of Recovery Services, or Social Security; the most recent month's check stubs; bank statements, etc.

Does any household member receive full-time or part-time earnings from any type of employment, including self-employment?	Y	N
Does any household member own a business or receive earnings as an independent contractor?	Y	N
Does any household member receive cash, tips, bonuses, commissions, or any type of compensation for providing any type of services?	Y	N
Does any household member receive unemployment compensation, worker's compensation or severance pay?	Y	N
Does any household member receive any type of Social Security?	Y	N
Does any household member receive child support directly from the absent parent and/or from any child support recovery unit or agency?	Y	N
Does anyone in your household receive any type of income, money, or financial support from any source other than the ones we have asked about above?	Y	N
Please explain:		

>Please provide the three most recent statements, showing your full account number, for all bank accounts and investment accounts owned by any member of the household. This information is necessary for us to verify your income.

CERTIFICATION:

All information provided in this application will be kept confidential in accordance with Federal and State guidelines

I/We verify that the information given on this form is accurate and complete to the best of our information, and I/We authorize you to obtain such information as you may require in order verifying the information contained herein.

I/We affirm that each answer is true and correct and is made for the purpose of obtaining rental housing through NeighborWorks Mountain Country Home Solutions and you are entitled to rely thereon, whether or not you obtain further and/or additional information.

I/We have also read and understand the HOME Ownership Assistance Program Guidelines and this application and I/We agree to abide by the guidelines of the Provo City HOME Ownership Assistance Program. I/We will not hold NeighborWorks Mountain Country Home Solutions legally liable for any actions of the NeighborWorks staff or their sub-contractors.

DISCLAIMER:

The undersigned hereby acknowledges that any discussions with or any information given by a NeighborWorks employee regarding this application prior to receipt of a formal signed lease agreement from NeighborWorks Mountain Country Home Solutions is only for program information and may not be considered a binding commitment on the part of NeighborWorks Mountain Country Home Solutions to provide rental housing.

Date: _____ **Signature:** _____

Date: _____ **Signature:** _____

Date: _____ **Witnessed:** _____

HUD - Declaration of Citizenship

Name of Head of Household: _____

Mailing Address: _____

Part 1: Applies to ALL Family Members:

Each person who will benefit under the subsidized housing program must either be a citizen or national of the United States, or be a non-citizen who has eligible immigration status that qualifies them for rental assistance as determined by the U.S. Department of Housing and Urban Affairs and the U.S. Immigration and Naturalization Service.

One line in this form must be checked for each family member indicating status as a citizen or as a national of the United States, or a non-citizen with eligible immigration status. Family members residing in the unit to be assisted that do not claim to be a citizen or national of the United States, or do not claim to be a non-citizen with eligible immigration status should not check any box.

All adults must sign where indicated. For each child who is not 18 years of age, the form must be signed for them by an adult member of the family residing in the dwelling, who is responsible for that child. Use blank lines or write on the back of this sheet to add any family members who are not listed.

First Name	Last Name	Age	I am a citizen or national of the U.S.	I am a non-citizen with eligible immigration status	Signature of Adult listed to the left or Signature of Guardian for Minor
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____
_____	_____	_____	_____	or _____	_____

Warning: Title 18 US Code Section 1001 states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to any department or agency of the United States. If this form contains false or incomplete information you may be required to repay all overpaid rental assistance you have received, you can be fined up to \$10,000, imprisoned for up to 5 years, and/or prohibited from receiving any future assistance.

Note: Family members who have checked a line indicating that they are a non-citizen with eligible immigration status must complete Part 2 of this form.

Part 2: Applies to Noncitizen Eligible Immigration Status Family Members Only:

Please provide this office with the original of ONE of the following documents if you have claimed eligible immigration status on Part 1 of this form above:

1. Form I-551, Alien Registration Receipt Card
2. Form I-94, Arrival-Departure Record with appropriate annotations or documents
3. Form I-688, Temporary Resident Card
4. Form I-688 B, Employment Authorization Card
5. A receipt issued by the INS indicating that an application for issuance or replacement of one of the above- listed documents has been made and the applicant's entitlement to the has been verified.

Please call us to arrange for delivery and copying of the original documents. **Do not mail original documents to our office.** If documents are not presented and verified then your family rental assistance may be reduced, denied, or terminated as provided in regulations promulgated by the U.S. Department of Housing and Urban Development, pending available appeals processes.

Head of Household Certification

As Head of Household I hereby certify, under penalty of perjury, that all members of my household are listed in on Part 1 of this form and that members of my household who have not checked either box in Part 1 of this form do not claim to be citizens or nationals of the United States, or non-citizens with eligible immigration status.

Signature _____ Date _____

Consent to Verify Eligible Immigration Status

Each family member required to complete Part 2 of this form must sign below granting consent to verify eligible immigration status. For each child who is not yet 18 years of age the form must be signed by an adult member of the family residing in the dwelling unit, who is responsible for that child.

First Name	Last Name	Age	Signature of adult or adult Guardian for Minor
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Evidence supplied with this form may be released by the Housing Agency, without responsibility for its further use or transmission, to the Immigration and Naturalization Service for purposes of verification of the immigration status of the individual or to the U.S. Department of Housing and Urban Development, as required. The U.S. Department of Housing and Urban Development is not responsible for the further use or transmission of the evidence or other information.

Authorization for the Release of Information/ Privacy Act Notice

to the U.S. Department of Housing and Urban Development (HUD)
and the Housing Agency/Authority (HA)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB CONTROL NUMBER: 2501-0014

exp. 07/31/2017

PHA requesting release of information: (Cross out space if none)
(Full address, name of contact person, and date)

IHA requesting release of information: (Cross out space if none)
(Full address, name of contact person, and date)

NeighborWorks

Mountain Country Home Solutions
39 West 300 North
Provo, UT 84601

Authority: Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by Section 903 of the Housing and Community Development Act of 1992 and Section 3003 of the Omnibus Budget Reconciliation Act of 1993. This law is found at 42 U.S.C. 3544.

This law requires that you sign a consent form authorizing: (1) HUD and the Housing Agency/Authority (HA) to request verification of salary and wages from current or previous employers; (2) HUD and the HA to request wage and unemployment compensation claim information from the state agency responsible for keeping that information; (3) HUD to request certain tax return information from the U.S. Social Security Administration and the U.S. Internal Revenue Service. The law also requires independent verification of income information. Therefore, HUD or the HA may request information from financial institutions to verify your eligibility and level of benefits.

Purpose: In signing this consent form, you are authorizing HUD and the above-named HA to request income information from the sources listed on the form. HUD and the HA need this information to verify your household's income, in order to ensure that you are eligible for assisted housing benefits and that these benefits are set at the correct level. HUD and the HA may participate in computer matching programs with these sources in order to verify your eligibility and level of benefits.

Uses of Information to be Obtained: HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. HUD may disclose information (other than tax return information) for certain routine uses, such as to other government agencies for law enforcement purposes, to Federal agencies for employment suitability purposes and to HAS for the purpose of determining housing assistance. The HA is also required to protect the income information it obtains in accordance with any applicable State privacy law. HUD and HA employees may be subject to penalties for unauthorized disclosures or improper uses of the income information that is obtained based on the consent form. **Private owners may not request or receive information authorized by this form.**

Who Must Sign the Consent Form: Each member of your household who is 18 years of age or older must sign the consent form. Additional signatures must be obtained from new adult members joining the household or whenever members of the household become 18 years of age.

Persons who apply for or receive assistance under the following programs are required to sign this consent form:

- PHA-owned rental public housing
- Turnkey III Homeownership Opportunities
- Mutual Help Homeownership Opportunity
- Section 23 and 19(c) leased housing
- Section 23 Housing Assistance Payments
- HA-owned rental Indian housing
- Section 8 Rental Certificate
- Section 8 Rental Voucher
- Section 8 Moderate Rehabilitation

Failure to Sign Consent Form: Your failure to sign the consent form may result in the denial of eligibility or termination of assisted housing benefits, or both. Denial of eligibility or termination of benefits is subject to the HA's grievance procedures and Section 8 informal hearing procedures.

Sources of Information To Be Obtained

State Wage Information Collection Agencies. (This consent is limited to wages and unemployment compensation I have received during period(s) within the last 5 years when I have received assisted housing benefits.)

U.S. Social Security Administration (HUD only) (This consent is limited to the wage and self employment information and payments of retirement income as referenced at Section 6103(l)(7)(A) of the Internal Revenue Code.)

U.S. Internal Revenue Service (HUD only) (This consent is limited to unearned income [i.e., interest and dividends].)

Information may also be obtained directly from: (a) current and former employers concerning salary and wages and (b) financial institutions concerning unearned income (i.e., interest and dividends). I understand that income information obtained from these sources will be used to verify information that I provide in determining eligibility for assisted housing programs and the level of benefits. Therefore, this consent form only authorizes release directly from employers and financial institutions of information regarding any period(s) within the last 5 years when I have received assisted housing benefits.

Consent: I consent to allow HUD or the HA to request and obtain income information from the sources listed on this form for the purpose of verifying my eligibility and level of benefits under HUD's assisted housing programs. I understand that HAs that receive income information under this consent form cannot use it to deny, reduce or terminate assistance without first independently verifying what the amount was, whether I actually had access to the funds and when the funds were received. In addition, I must be given an opportunity to contest those determinations.

This consent form expires 15 months after signed.

Signatures:

Head of Household	Date		
Social Security Number (if any) of Head of Household		Other Family Member over age 18	Date
Spouse	Date	Other Family Member over age 18	Date
Other Family Member over age 18	Date	Other Family Member over age 18	Date
Other Family Member over age 18	Date	Other Family Member over age 18	Date

Privacy Act Notice. Authority: The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities. Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interest, and to verify the accuracy of the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Penalty: You must provide all of the information requested by the HA, including all Social Security Numbers you, and all other household members age six years and older, have and use. Giving the Social Security Numbers of all household members six years of age and older is mandatory, and not providing the Social Security Numbers will affect your eligibility. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.

Penalties for Misusing this Consent:

HUD, the HA and any owner (or any employee of HUD, the HA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9886 is restricted to the purposes cited on the form HUD 9886. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000.

Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the HA or the owner responsible for the unauthorized disclosure or improper use.

Original is retained by the requesting organization.

ref. Handbooks 7420.7, 7420.8, & 7465.1

form HUD-9886 (07/14)



1031 West Center Street Suite 302, Orem, Utah 84057
Phone 801-375-5820, FAX 801-375-5966

LAW ENFORCEMENT QUESTIONNAIRE

ANYONE REPORTING FALSE INFORMATION ON THIS FORM WILL BE DENIED HOUSING

PRINT FULL NAME OF APPLICANT (Maiden, Also Known as): _____

Date of Birth: _____ / _____ / _____ Social Security # _____ / _____ / _____

Print Full Name of Co Applicant (Maiden, AKAs): _____

Date of Birth: _____ / _____ / _____ Social Security # _____ / _____ / _____

Print Full Name of Any Person over 18 years of Age: _____

Date of Birth: _____ / _____ / _____ Social Security # _____ / _____ / _____

Print Full Name of Any Person over 18 years of Age: _____

Date of Birth: _____ / _____ / _____ Social Security # _____ / _____ / _____

Use an additional sheet if more persons over the age of 18 are applying.

Answer each of the following questions for all applicants with one indicator, and explain in detail in Section A of the next page:

1. Yes ☐ No ☐ Has any member of household been convicted, arrested, or had a police report filed on them involving crimes of physical violence against person(s) or property, drug-related activity, OR ANY OTHER FELONY OR MISDEMEANOR CRIMINAL ACTIVITY, other than a minor traffic violation?
2. Yes ☐ No ☐ Has any household member been evicted from federally assisted housing because of drug-related criminal activity involving the illegal manufacture, sale, distribution or possession with the intent to manufacture, sell or distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 USC 802?
3. Yes ☐ No ☐ Is any household member illegally using a controlled substance or abusing alcohol in a way that may interfere with the health, safety or right to peaceful enjoyment of the premises by other residents?
4. Yes ☐ No ☐ Has any household member been arrested or convicted of manufacturing or producing methamphetamine (speed)?
5. Yes ☐ No ☐ Has any member of the household ever been or is currently on a sex offender registration?
6. Yes ☐ No ☐ Has any household member been arrested for drugs and had a firearm in the unit at the time of the arrest?
7. Yes ☐ No ☐ Has any household member been arrested or convicted for use of a firearm in the commission of a crime?

All "yes" answers must be explained on this form in Section A below and include: who, what, when, where and final disposition.

I hereby certify that the above information is correct and complete to the best of my knowledge. I hereby authorize NeighborWorks Mountain Country Home Solutions or its agents to verify the above information and certify that the information provided is true and correct.

Signature of Applicant: _____

Date _____

Signatures of other Adult Household Members:

Date _____

Date _____

Date _____

SECTION A: If “Yes” is answered to any one of questions 1 through 7 above, the following information is as an explanation. List ALL criminal history.

Name of parties involved:

Date(s) the event(s) occurred (month, day and year):

Where did the event(s) occur (city and state):

Describe what happened:

Final disposition with the Justice system (how it was resolved):

Credit Report Authorization and Privacy Disclosure Form

I hereby authorize and instruct NeighborWorks Mountain Country Home Solutions to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by NeighborWorks Mountain Country Home Solutions. I understand and agree that NeighborWorks Mountain Country Home Solutions intends to use the credit report for the purpose of evaluating my financial ability to pay rent on one of their homes I wish to rent.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to NeighborWorks Mountain Country Home Solutions in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, I authorize NeighborWorks Mountain Country Home Solutions to share with Provo City Redevelopment Agency my credit report and any information that I have provided including any computations and assessments that have been produced based upon such information.

I understand that, except as outlined within this document, no additional persons or business shall have the privilege or access to my information obtained by NeighborWorks Mountain Country Home Solutions for this rental application purpose.

I understand that my refusal to sign this Credit Report Authorization and Privacy Disclosure Form will result in my ineligibility to rent any home for which I have applied.

Applicant's Name (Print)

Co-Applicant's Name (Print)

Applicant's Signature

Co-Applicant's Signature

_____-_____-_____
Social Security Number

_____-_____-_____
Social Security Number

Date

Date

Rental decisions will not be based on the credit scores.