



2515 A Street
Anchorage, AK 99503
(907) 677-8490

When submitting your application, please ensure that the information is complete and the requested documents are attached.

DO NOT USE WHITE OUT! APPLICATION WILL NOT BE PROCESSED

The landlord reference check will be faxed to your previous landlord to fill out. **Only** the applicant's printed name, signature, and date are to be on the form. Nothing else needs to be completed on the form. The remainder is for office use only. **There must be at least one landlord reference to check.**

The following pages are the application. Please fill out the application completely and leave no blank spaces. If it does not pertain to you, please write "N/A".

REQUESTED DOCUMENTS:

- There is a **\$25.00** application fee per adult. Each adult must complete an application. The fee is non-refundable. This is to cover the administrative cost incurred for a criminal background check and to verify credit history.
- A signed "*Landlord Reference*" form is required.

To expedite the application process, if a family member receives income from any source such as from the following agencies, please provide recent paystubs, a currently dated print-out, or award letter:

- Employment
 - Social Security Income
 - Adult Public Assistance
 - Alaska Temporary Assistance Program (ATAP/TANF)
 - Child Support
 - Unemployment
-
- Photo copy (legible) of driver's license or identification card for all adult applicants. The items copied must contain a picture of the applicant, and date of birth. If you do not have valid identification, your application will not be processed.
 - Photo Copy (legible) of All Household Member's social security cards.

Thank you for applying with NeighborWorks® Alaska





**Notice all applicants applying to live at NeighborWorks®
Alaska's Apartments**

**Effective September 1, 2016, All of NeighborWorks® Alaska's
properties listed below will be smoke free.**

In order to eliminate the known health hazards of secondhand smoke; the increased maintenance, cleaning, and redecorating costs from smoking; the increased risk of fire from smoking; and the high costs of fire insurance for properties where smoking is permitted, NeighborWorks® Alaska adopts this smoke-free housing policy for Hampstead Heath, The Mallary, Merrill Crossing, Spruce View and Stephen's Park Apartments located throughout Anchorage, Alaska.

Indoor Smoking

1. Effective **September 1, 2016** smoking is not permitted anywhere inside the NeighborWorks® Alaska buildings. This includes, but is not limited to, individual living spaces, all shared areas, stairwells, laundry rooms, and any other enclosed areas.
2. This policy applies to all current and new residents, all employees, all contractors and all guests at all times.

Outdoor Smoking

Smoking is not permitted within 20 feet of the entrances or any windows of the NeighborWorks® Alaska apartment buildings.

The Mallary
660 West 34th Avenue

Stephen's Park
3200 La Touche Street

Merrill Crossing
1275 East 9th Avenue

NeighborWorks® Alaska Properties Applying for:

- Patriot Square Panoramic View
 The Mallary Stephen's Park
 Merrill Crossing

- Each Adult (18 and Older) Must complete a separate application.
 ➤ There is a non-refundable fee of \$25/adult to apply

RESIDENTIAL HOUSING APPLICATION Please Print

Last Name: _____ First Name: _____ M.I.: _____

Other/Previous Names (please list all names used) _____

Current Address: _____ City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Social Security #: _____

Driver's License/State ID #: _____ State: _____ Bedroom Size Wanted: _____

E-mail Address: _____ Best Contact Number(s): _____

How Did You Hear About Us? _____ Date Available to Move In? _____

Are you Active Duty Military? Yes NoDo You Have a Rental Voucher? Yes NoAre you a U.S. Veteran? Yes No

If yes, where from? _____

Does the ENTIRE household (adults included) *Consist of or Anticipate becoming Full Time Students* Yes No**PLEASE LIST ALL HOUSEHOLD MEMBERS TO RESIDE IN UNIT**

No.	First & Last Name	Gender	Date of Birth	No.	First & Last Name	Gender	Date of Birth
1.				4.			
2.				5.			
3.				6.			

LAST TWO YEARS RESIDENCE HISTORY**Current Landlord** Name: _____ Phone #: _____

Address: _____ Unit #: _____

City: _____ State _____ Zip _____ Name On Lease: _____

Building or Management Company Name: _____ Date Tenancy Began: _____

Why Are You Moving?: _____

Have you given notice? _____

Previous Landlord Name: _____ Phone #: _____

Address: _____ Unit #: _____

City: _____ State _____ Zip _____ Name On Lease: _____

Building or Management Company Name: _____

Fax #: _____ E-Mail: _____ Dates: From: _____ To: _____

Why Did you Move?: _____

Other States Previously Lived In: _____

EMPLOYMENT INFORMATION**Current Employer:** _____ Your Title: _____

Address: _____ City: _____ State _____ Zip _____

Supervisor's Name: _____ Phone #: _____

Fax #: _____ E-Mail: _____

Monthly Gross Income: \$ _____ Date Employed: _____



Previous Employer: _____ **Your Title:** _____
 Address: _____ City: _____ State _____ Zip _____
 Supervisor's Name: _____ Phone #: _____
 Fax #: _____ E-Mail: _____
 Monthly Gross Income: \$ _____ Dates Employed: _____ To _____

ADDITIONAL HOUSHOLD INCOME (i.e. child support, social security, pensions, etc)

Amount \$ _____ per _____ Source _____
 Amount \$ _____ per _____ Source _____
 Amount \$ _____ per _____ Source _____
 Amount \$ _____ per _____ Source _____
 Amount \$ _____ per _____ Source _____

GENERAL INFORMATION

Have you or any member of your family ever been evicted from any housing? Yes No
 If yes, describe: _____
 Do you owe money to a previous landlord? Yes No
 If yes, explain: _____
 Have you or a member of your family ever been convicted of a crime? Yes No
 If yes, explain: _____
 Are you required to register under a state sex offender law? Yes No
 Have you or a member of your family been in jail or prison within the last three years? Yes No
 If yes, explain: _____

REFERENCES

Father/Mother: _____ Phone: _____
 Address: _____
 In case of emergency, who may we contact? _____
 Address: _____ Phone #: _____

The applicant certifies that the foregoing information is true and complete. NEIGHBORWORKS® ALASKA charges a \$25 nonrefundable application processing fee whether the application is approved or denied. It is required that your monthly income be at least 2 ½ times the rental amount. It is the policy of NEIGHBORWORKS® ALASKA not to discriminate in rental practices on the basis of race, religion, sex, age, sexual orientation, national origin, familial status, or disability status.

I AUTHORIZE RELEASE OF INFORMATION REGARDING MY CREDIT, REFERENCES, AND CRIMINAL HISTORY TO A REPRESENTATIVE OF NEIGHBORWORKS® ALASKA FOR A PERIOD OF ONE YEAR FROM THE DATE HEREBY SIGNED. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO KEEP NEIGHBORWORKS® ALASKA INFORMED OF MY CURRENT ADDRESS/TELEPHONE NUMBER, AND THAT MY APPLICATION MAY BE CANCELLED IF I FAIL TO DO SO.

 Print Legal Name Signature Date

WARNING: Title 18, Section 1001, of the United States Code states a person is guilty of a felony for knowingly and willingly making false or fraudulent statements in this application. Such false or fraudulent statements are punishable as crimes under Title 11 and 12 of the Alaska Statutes.

LANDLORD REFERENCE CHECKLIST

Please release the following information to NeighborWorks® Alaska where I have applied for an apartment.

Applicant: _____
 (Print Name)

Date: _____ **Signature:** _____

OFFICE USE ONLY BELOW THIS LINE

Address of Residence: _____

Landlord's Name: _____ Phone # (____) _____ Fax#: _____

Dates of Residence: From: _____ To: _____

- Are you a Relative of the Tenant? Yes No

RENT PAYMENT HISTORY

Amount of Monthly Rent \$ _____ Is rent paid on time? Yes No. If late, how often? _____

Have you ever begun or completed eviction proceedings? Yes No If yes, please explain: _____

Have tenant-paid utilities ever been disconnected? Yes No

UNIT CARE

Is/was there a security deposit? Yes No

Is the unit kept clean, safe and sanitary? Yes No

Has the unit been damaged? Yes No

If yes, please describe: _____

Did the tenant pay for damage? Yes No

Did you keep the security deposit? Yes No

Was rodent/insect infestation a problem? Yes No

Did the tenant's housekeeping contribute to infestation? Yes No

GENERAL

- Was the tenant listed on the lease? Yes No
- Did the tenant violate your lease/house rules in any way? Yes No
- Did the tenant allow persons not listed on the lease to live in the unit on a regular basis? Yes No
- Did the tenant, family members or guests cause any disturbances or complaints? Yes No
- Did the tenant, family members or guests damage or vandalize the common areas? Yes No
- Did the tenant, family members or guests engage in criminal activity including, drug-related activity in the building or unit? Yes No
- Has the tenant given you any false information? Yes No

If yes, please explain: _____

Did the tenant, family members or guests act in a physically violent or verbally abusive manner towards neighbors, yourself or your staff? Yes No

Would you rent to this tenant again? Yes No

Additional Comments _____

Name: _____ Date: _____

Reference completed by: _____ Phone Person to Person Written Email



Race and Ethnic Data Reporting Form

Name of Property: _____

Name of Head of Household: _____

Household Member Names

Ethnic Categories	Select One:					
Hispanic or Latino						
Not Hispanic or Latino						
Racial Categories	Select All That Apply:					
American Indian or Alaska Native						
Asian						
Black or African American						
Native Hawaiian or other Pacific Islander						
White						
Other						

* Definitions of these categories are available upon request.
 There are no penalties for persons who do not complete this form.

 Tenant/Resident Signature

 Date





NeighborWorks Alaska

Notice of Occupancy Rights under the Violence Against Women Act¹

To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.² The U.S. Department of Housing and Urban Development (HUD) is the Federal agency that oversees that NeighborWorks Alaska is in compliance with VAWA. This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.”

Protections for Applicants

If you otherwise qualify for assistance under NeighborWorks Alaska, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Signature of Head of House Hold

Date

Signature of other household member

Date

¹ Despite the name of this law, VAWA protection is available regardless of sex, gender identity, or sexual orientation.

² Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

