

## Near Northwest Neighborhood Rental Application Instructions

The Near Northwest Neighborhood (NNN) uses a RENTAL APPLICATION form to assess your soundness as a tenant. The NNN also asks for additional current documentation in the application process. Please supply the most recent documentation to be considered. No application will be processed until current documentation and completed applications have been supplied.

### General Tips for Application

Add "NA" and initial any areas that do not apply to you. If unknown, indicate "UNK" and explain on an additional sheet of paper. Otherwise fill in every blank.

Use an additional sheet of paper for anything on the applications that need extra space. Use an additional sheet of paper to explain the absence of documentation (for example, you have no W-2s because you worked for cash or did not work the last two years).

Co-Applicants are any adult hoping to reside in the rental over the age of 18.

Additional Documentation for Income Qualification: Every Applicant/co-applicant must furnish current:

- Paystubs from the last month
- Banking or investment statements for the past 3 months.
- W-2s for the last two years
- Most recent Tax Return
- Any documentation for other income such as:
  - o Social security
  - o Child support
  - o Annuities, judgements, court orders
  - o Alimony
  - o Etc.
- Email, phone numbers and mailing address for any references or current landlord and for your current employer who will complete your Employment Verification Form.
- Employment Verification form (only if employed)
  - o Applicant should only fill out the blue section, items 1, 7, 8 and sign below item 8 then return the form to the NNN
  - o Do not deliver the form to your employer
- Self-Employment Certification only as applies
- Copy of your Driver's License
- Please submit non-returnable copies of all documents

*The NNN will not consider an incomplete application, including income qualification, for tenancy. We will review fully complete applications and be in contact with the applicant regarding apartment availability and next steps. Application materials remain the property of the NNN.*

**NEAR NORTHWEST NEIGHBORHOOD, INC.**

1007 Portage Avenue, South Bend, Indiana 46616

Telephone: (574) 232-9182

**Rental Application**

Use additional sheets for details/explanations

Size of Unit Applying For: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Unit Desired \_\_\_\_/\_\_\_\_/\_\_\_\_

Applicant's Name \_\_\_\_\_ SS # \_\_\_\_\_

Co-Applicant Name \_\_\_\_\_ SS # \_\_\_\_\_

Children and others? \_\_\_\_ List Ages, Names: \_\_\_\_\_

List Automobile Make and Plate #s \_\_\_\_\_

Smoker: Yes \_\_\_\_ No \_\_\_\_

**NO PETS, NO INDOOR SMOKING**

**Applicant Information**

Phone# (\_\_\_\_) \_\_\_\_\_ D.L.# \_\_\_\_\_ State \_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Email address: \_\_\_\_\_

Current Address \_\_\_\_\_

Street Apt# City State Zip Code

How long at this address? \_\_\_\_ years \_\_\_\_ months Monthly rental amount \_\_\_\_\_

Current LandLord \_\_\_\_\_

Name Phone#

Landlord Address \_\_\_\_\_

Street City State Zip Code

Current Landlord Email address: \_\_\_\_\_

Previous Address \_\_\_\_\_

Street City State Zip Code

How long at this address? \_\_\_\_ years \_\_\_\_ months Monthly rental amount \_\_\_\_\_

Previous Landlord \_\_\_\_\_

Name Phone #

Previous Landlord Address \_\_\_\_\_

Street City State Zip Code

**Applicant Bank Information:**

Name of Bank	Phone	Account Type	Account #
Name of Bank	Phone	Account Type	Account #

**Please attach a sheet with additional accounts, as needed.**

**Applicant Employment Information:**

**Employer Name:** \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Position \_\_\_\_\_ Email: \_\_\_\_\_

Your wages per year: \_\_\_\_\_

Length of Employment in years/month or from/through dates: \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Position \_\_\_\_\_ Email: \_\_\_\_\_

Your wages per year: \_\_\_\_\_

Length of Employment in years/month or from/through dates: \_\_\_\_\_

***Additional employment information required if Applicant's employment history shown is less than 3 years. Please attach a sheet with this info.***

**Co-Applicant Information**

Phone# (\_\_\_\_) \_\_\_\_\_ D.L.# \_\_\_\_\_ State \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

Street	Apt#	City	State	Zip Code
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How long at this address? \_\_\_\_ years \_\_\_\_ months Monthly rental amount \_\_\_\_\_

Current LandLord \_\_\_\_\_

Name	Phone#
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Landlord Address \_\_\_\_\_

Street	City	State	Zip Code
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**Co-Applicant Bank Information:**

Name of Bank \_\_\_\_\_ Phone \_\_\_\_\_ Account Type \_\_\_\_\_ Account # \_\_\_\_\_

Name of Bank \_\_\_\_\_ Phone \_\_\_\_\_ Account Type \_\_\_\_\_ Account # \_\_\_\_\_

**Please attach a sheet with additional accounts, as needed.**

**Co-Applicant Employment Information:**

Employer Name \_\_\_\_\_ Phone# (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Position \_\_\_\_\_ Email: \_\_\_\_\_

Your wages per year: \_\_\_\_\_

Length of Employment in years/month or from/through dates: \_\_\_\_\_

**Please attach a sheet with additional employment, as needed to cover the most recent 3 years. Attach sheets for additional Co Applicants**

I/We confirm that all the information supplied is true and correct. I/We understand that I/we can be turned down for the unit if I/we have falsified any information on this application. I/We hereby authorize the verification of all the above information including my credit, rental, check writing, employment (including salary) and criminal history. I/We authorize release of this information to Near Northwest Neighborhood, Inc.

Upon execution of a lease, the 1<sup>st</sup> months' rent will be due and payable along with a security deposit.

*Applicant(s) must provide verification of earnings (one months pay stubs) as well as a copy of photo identification.*

SIGNATURE OF APPLICANT (S)

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

**Income**

	Applicant Monthly Income	Co Applicant Monthly Income	Total
First Job			
Second Job			
Overtime			
Bonuses/Tips			
Child Support			
SS/SSI/SSDA			
Pension			
Alimony			
Investments/Dividends			
Other			
<b>Total</b>			

	Co Applicant Monthly Income	Co Applicant Monthly Income	Total
First Job			
Second Job			
Overtime			
Bonuses/Tips			
Child Support			
SS/SSI/SSDA			
Pension			
Alimony			
Investments/Dividends			
Other			
<b>Total</b>			

**Please attach a sheet with additional sources as needed.**

**Household members under the age of 18 INCOME**

Name	Monthly Income	Source of Income

**Please attach a sheet for additional children, as needed.**

## Assets

Applicant Cash Savings: \_\_\_\_\_

Applicant Net Cash Value (investments, IRAs, 401ks, etc.): \_\_\_\_\_

\_\_\_\_\_

Applicant Other Assets/Value (e.g. autos, real estate, etc.): \_\_\_\_\_

\_\_\_\_\_

Co Applicant Cash Savings: \_\_\_\_\_

Co Applicant Net Cash Value (investments, IRAs, 401ks, etc): \_\_\_\_\_

\_\_\_\_\_

Co Applicant Other Assets/Value (e.g. autos, real estate, etc.): \_\_\_\_\_

**Please attach a sheet with additional accounts, as needed.**

<b>Monthly Expenses</b>	<b>Present</b>	<b>In new apartment</b>
Housing Mortgage or Rent		
Gas Utility		
Electric Utility		
Water/Trash Utility		
Car Payment		
Auto - Fuel		
Mortgage/Renter's Insurance		
Medical/other Insurance		
Internet/Phone/Streaming Svc.		
Groceries		
Home/Auto maintenance		
Clothing		
Tuition		
Entertainment		
Computer/other electronics		
Other:		
<b>Total:</b>		

# Employment Verification page

Applicant and Co Applicants fill out Blue Sections and RETURN TO THE NNN, one sheet for each job.

Form RD 1910-5  
(Rev.08-13)

UNITED STATES DEPARTMENT OF AGRICULTURE  
HOUSING AND URBAN DEVELOPMENT  
VETERANS ADMINISTRATION  
(Community Planning and Development, and  
Housing - Federal Housing Commissioner)

Form Approved  
OMB No. 0575-0172

## REQUEST FOR VERIFICATION OF EMPLOYMENT

**LENDER, LOCAL PROCESSING AGENCY (LPA), AND LOAN PACKAGER:** Complete Items 1 through 7. Have the applicant complete Item 8 and sign. Forward the completed form directly to the employer named in Item 1. **CONTRACTOR:** Complete Items 1 through 7. Have applicant or borrower complete Item 8 and sign. Forward the completed form directly to the USDA or lender office identified in Item 2. **EMPLOYER/PROVIDER:** Complete either parts II and IV or parts III and IV. Return form directly to the office identified in Item 2 of Part 1.

### PART I - REQUEST

<p>1. TO: (Name, Phone, Address and email of Employer)</p>	<p>2. FROM: (Name and Address of Lender or Local Processing Agency) <i>This item must be completed before sending to employer.</i></p> <p style="text-align: center;">Near Northwest Neighborhood, Inc. PO Box 1132 South Bend, IN 46624</p>
<p>3. I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.</p> <p>_____ <i>(Signature of Lender, Official of LPA, USDA Official/USDA Loan Packager or Government contractor)</i></p>	<p>4. TITLE OF LENDER OFFICIAL OF LPA, USDA OFFICIAL, MFH PROJECT MGR., OR USDA LOAN PACKAGER</p> <p style="text-align: center;">Executive Director</p>
<p>7. NAME AND ADDRESS OF APPLICANT</p>	<p>5. DATE</p> <p>6. HUD/FHAC/CPD, VA OR USDA NO.</p>
<p>8. TAXPAYER'S IDENTIFICATION NO. OR SOCIAL SECURITY NO.</p>	<p>I have applied for a mortgage loan, a farm loan or a rehabilitation loan or to be an occupant in an MFH project and stated that I am or was employed by you. My signature in the block below authorizes verification of my employment information.</p>
<p>SIGNATURE OF APPLICANT</p>	

### PART II - VERIFICATION OF PRESENT EMPLOYMENT/INCOME

EMPLOYMENT DATA	PAY DATA			
9. APPLICANT'S DATE OF EMPLOYMENT	12A. BASE PAY (Current) OR OTHER INCOME			For Military Personnel Only
	\$ _____	<input type="checkbox"/> Annual	\$ _____	<input type="checkbox"/> Hourly
10. PRESENT POSITION	\$ _____	<input type="checkbox"/> Monthly	\$ _____	<input type="checkbox"/> Weekly
	\$ _____	<input type="checkbox"/> Other (Specify)		
11. PROBABILITY OF CONTINUED EMPLOYMENT	12B. EARNINGS			
	Type	Year to Date as of	Past Year	
				RATIONS \$
				FLIGHT OR HAZARD \$
				CLOTHING \$
				QUARTERS \$
				PRO PAY \$
				OVERSEAS OR COMBAT \$
13. IF OVERTIME OR BONUS IS APPLICABLE IS ITS CONTINUANCE LIKELY?	BASE PAY	\$	\$	
OVERTIME <input type="checkbox"/> Yes <input type="checkbox"/> No	OVERTIME	\$	\$	
BONUS <input type="checkbox"/> Yes <input type="checkbox"/> No	COMMISSIONS	\$	\$	
	BONUS	\$	\$	
14. REMARKS (If paid hourly, please indicate average hours worked each week during current and past year)				
a. Number of hours worked per week	b. Anticipated increase or decrease in salary in next 12 months	c. Anticipated overtime hours to be worked in next 12 months	d. If seasonal employment, anticipated number of weeks in the next 12 months	

### PART III - VERIFICATION OF PREVIOUS EMPLOYMENT

15. DATES OF EMPLOYMENT	16. SALARY/WAGE AT TERMINATION PER <input type="checkbox"/> YEAR <input type="checkbox"/> MONTH <input type="checkbox"/> WEEK			
	BASE PAY	OVERTIME	COMMISSIONS	BONUS
	\$	\$	\$	\$
17. REASONS FOR LEAVING	18. POSITION HELD			

### PART IV

**Federal statutes provide severe civil and criminal penalties for any person who knowingly makes false or fraudulent statements or representations to a government agency or officer with the intention of influencing any action by such agency or officer.**

19. SIGNATURE	20. TITLE OF EMPLOYER	21. DATE
Printed name and phone number		

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**SEE ATTACHED PRIVACY ACT NOTICE**

