



190 E. Front Street Suite 112
Boise, ID 83702
208-344-7400

Dear Future Resident(s),

We would like to thank you for considering **Civic Plaza Apartments** for your future home. At **Civic Plaza**, we offer quality affordable one and two bedroom apartment homes. We would like you to be a part of our community and have enclosed an application packet for you to complete.

So that we may process your application in a timely manner you must bring in all of the documents listed below as well as the completed application. Incomplete application packets can not be accepted, which will delay the approval process. We look forward to meeting with you and answering any questions you may have about our community.

It is important when completing and turning in your affordable housing tax credit/bond application that you please follow the guidelines listed below as well as bring in the applicable documents.

- Drivers license or state photo ID for anyone age 18 and over
 - Social security card for all household members
 - Most recent paystub and/or awards letter
 - Birth certificate for anyone under the age of 18
 - Divorce Decree and/or child support order if applicable
- 2 separate **money orders** for the application fee and application deposit
Application Fee: \$40 per adult Deposit: \$100

***Do not use white out or any correction type products**

***All paperwork needs to be signed and dated with the same date**

***Everyone 18 years of age or older in the household must sign all of the paperwork & complete an application**

Once again we thank you for considering **Civic Plaza** for your new home. We look forward to hearing from you.

Sincerely,

Civic Plaza Management



**STEADFAST MANAGEMENT COMPANY, INC.
RENTAL APPLICATION**

COMMUNITY NAME _____

UNIT # _____

Please have each resident 18 years of age and older submit a separate application.

HOUSEHOLD INFORMATION							
COMPLETE THE FOLLOWING INFORMATION FOR EACH HOUSEHOLD MEMBER THAT WILL OCCUPY THE UNIT AT TIME OF MOVE-IN							
NAME FIRST, MIDDLE INITIAL, LAST	RELATIONSHIP	M/F	SSN	DRIVERS LICENSE NUMBER	AGE	DOB	Student Status: FI/PT or NO
1	HEAD OF HOUSEHOLD		- - -				
2			- - -				
3			- - -				
4			- - -				
5			- - -				
6			- - -				
7			- - -				

RENTAL HISTORY					
CURRENT ADDRESS (WHERE YOU CURRENTLY LIVE)					
STREET NAME		APT #	RENT \$ Do you own the property? yes or no (please circle)	FROM	TO
CITY		STATE	ZIP CODE		
APARTMENT COMMUNITY NAME		PHONE NUMBER () ()	LANDLORD PHONE () ()		
PREVIOUS ADDRESS					
STREET NAME (IF CURRENT ADDRESS IS LESS THAN 2 YEARS)		APT #	RENT \$ Do you own the property? yes or no (please circle)	FROM	TO
CITY		STATE	ZIP CODE		
APARTMENT COMMUNITY NAME		PHONE NUMBER () ()	LANDLORD PHONE () ()		
CURRENT EMPLOYMENT					
CURRENT EMPLOYER		POSITION			
ADDRESS		CONTACT			
CITY		STATE	ZIP CODE		
FROM	TO	CURRENT SALARY	FREQUENCY	PHONE	
PREVIOUS EMPLOYMENT					
PRIOR EMPLOYER (IF CURRENT EMPLOYER IS LESS THAN 2 YEARS)		POSITION			
ADDRESS		CONTACT			
CITY		STATE	ZIP CODE		
FROM	TO	SALARY	FREQUENCY	PHONE	
ADDITIONAL INCOME					
AMOUNT:	SOURCE	FREQUENCY			
AMOUNT:	SOURCE	FREQUENCY			
AUTO: TYPE OF CAR AND YEAR		CAR LICENSE #	COLOR		
2ND AUTO: TYPE OF CAR AND YEAR		CAR LICENSE #	COLOR		

ARE YOU EXPECTING ANY CHANGES TO THE HOUSEHOLD INCOME OR COMPOSITION IN THE COMING 12 MONTHS? YES NO IF YES, PLEASE DESCRIBE _____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENSE? YES NO IF YES, GIVE DETAILS AND DATES. _____

HAVE YOU BEEN INVOLVED IN ANY LITIGATION SUCH AS: EVICTIONS, SUITS JUDGMENTS, BANKRUPTCIES, FORECLOSURES, ETC? YES NO IF YES, GIVE DETAILS AND DATES. _____

IN CASE OF EMERGENCY NOTIFY:			
NAME	RELATIONSHIP	PHONE	
ADDRESS	CITY	STATE	ZIP CODE

Please Read Carefully

Applicant Authorization and Consent for Release of Information

The undersigned Applicant(s) hereby represents that all of the statements provided above are true, accurate and complete, and authorizes Steadfast Management Co., Inc. ("Manager") to verify the information above. Applicant acknowledges that any material false statements made within this Application shall be sufficient cause for Manager to decline to rent to, or to cancel or terminate any Rental Agreement with, Applicant. Applicant further authorizes Manager or its authorized agent to obtain credit reports, criminal background checks, rental history and employment history verification, litigation searches, character reports, and any other information deemed necessary to verify any information set forth in this Application, and authorizes persons, current and former employers, and other organizations and agencies to provide Manager or its authorized agent with all information that may be requested. Applicant agrees that any copy of this document is as valid as the original. Clear Screening, 28 Argonaut, Suite 140, Aliso Viejo, CA 92656 (949) 215-0188 will prepare such verification report for Manager.

Applicant hereby agrees to forever release and discharge the property owner, Manager and their authorized agents and employees, to the fullest extent permitted by law, from any claims, damages, losses liabilities, costs and expenses (including attorney's fees), or any other charge or complaint filed with any agency arising from the retrieval and/or reporting of information.

Applicant understands that the deposits and fees to be paid in connection with this Rental Application include (i) a non-refundable Application Fee, and (ii) based upon an approved Rental Application, a Security Deposit. This Application is preliminary only and does not obligate Owner or Manager to execute a Rental Agreement or deliver possession of any premises. No representations, promises or agreements as to occupancy, date of possession, alterations or decorations have been made except as expressly provided herein. Manager has the right to reject this Application and return any deposit, less the applicable non-refundable Application Processing Fee, at any time prior to signing the Rental Agreement.

ANY RENTAL AGREEMENT WITH APPLICANT WILL NOT BECOME EFFECTIVE UNTIL THIS APPLICATION IS APPROVED BY MANAGEMENT. Title VIII of the Civil Rights Act of 1968, as amended, makes discrimination based on race, color, religion, sex, nation origin, disability or familial status illegal in connection with the rental of most housing.

EQUAL CREDIT OPPORTUNITY ACT: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit application on the basis of sex or marital status. The Federal agency which administers compliance with this law concerning this company: Equal Credit Opportunity Federal Trade Commission, Washington, DC 20580.

AFFORDABLE HOUSING REQUIREMENTS: All compliance documents must be completed and verified prior to move-in. Applicant acknowledges that annual recertifications will be required upon occupancy.

Does your family have a need for an accessible unit? Yes No

By signing below, I acknowledge that I have read and understand this authorization and consent.

Applicant's Signature _____

Date _____

Applicant's Printed Name _____



Steadfast Management Co., Inc.

Resident Selection Plan

Manner of Service: All notices will be served on residents and other household members in accordance with state and local law.

Changes in the Resident Selection Plan:

Management reserves the right to amend or modify this Resident Selection Plan at any time and for any purpose. Management will notify potential applicants in writing of any changes in this Resident Selection Plan during the application process.

Applicant Signature

Date

Applicant Signature

Date



**STEADFAST MANAGEMENT COMPANY, INC.
FULL TIME STUDENT STATUS ADDENDUM**

* For properties with Tax Credit or Bond units, the full time household must meet at least one exemption.

Community: _____

Unit #: _____

Applicant/Tenant Name: _____

Applicant/Tenant Name: _____

I (We) certify under penalty of perjury that my (our) household is not currently comprised of Full-Time Students and if my (our) household should become a Full-Time Student household, we understand and agree that I (We) will immediately notify management. I (We) affirm that once this change should occur, I (We) will no longer qualify for the IRS Section 42 of Low Income Housing Tax Credit Program and/or Tax Exempt Bond Program. This disqualification may constitute immediate termination of the Lease Agreement and consequently, I (We) understand and affirm that we will immediately vacate the unit upon management's notice.

I (WE) AFFIRM OUR QUALIFICATION FOR LOW INCOME HOUSING TAX CREDIT AND BOND PROGRAM UNDER THE FOLLOWING EXEMPTION(S):

Check one:

<input type="checkbox"/>	All members of household are married and have filed or are entitled to file a joint tax return;
<input type="checkbox"/>	Receiving assistance under Title IV of the Social Security Act (AFDC, TANF);
<input type="checkbox"/>	Enrolled in a job training program receiving assistance under the Work Force Investment Act (WIA), (formerly the Job Training Partnership Act) or under another similar federal, state or local laws;
<input type="checkbox"/>	Single parent with minor children, all of whom are full-time students and such parents and children are <i>not</i> dependants of another individual;
<input type="checkbox"/>	At least one member of the household has exited the Foster Care system (applies only to persons age 24 or under and who have exited the Foster Care system within the previous 6 years).

_____ Applicant/Tenant Signature	_____ Date
_____ Applicant/Tenant Signature	_____ Date
_____ Applicant/Tenant Signature	_____ Date
_____ Applicant/Tenant Signature	_____ Date
_____ Management Signature	_____ Date



STEADFAST MANAGEMENT COMPANY
TENANT RELEASE AND CONSENT

The undersigned prospective tenants ("Applicants") of Civic Plaza Apartments hereby authorize all persons or companies in the categories listed immediately below to release, without liability, any and all information regarding Applicants' employment, income, and/or assets to STEADFAST MANAGEMENT COMPANY, INC. ("Steadfast"), as agent for the owner of the above-referenced apartment complex, for the purpose of verifying the information on Applicants' apartment rental application.

Applicants expressly authorize Steadfast, its affiliates and agents, to obtain information regarding my income, assets, expenses, and household status for purposes of determining my eligibility for participation in the following affordable housing program:

- Tax Exempt Bond Program – IRC Section 142
- Low Income Housing Tax Credit Program – IRC Section 42
- HOME Program

Applicants also acknowledge that the information obtained will only be used for determining eligibility in said program(s) and will be kept confidential and not released outside of this scope, and consent to its use as set forth herein. Applicant also understands and agrees that photocopies of this Release and Consent may be used for the purposes stated above.

 Applicant Signature

 Date

 Applicant Signature

 Date

 Applicant Signature

 Date

 Applicant Signature

 Date

 Applicant Signature

 Date

 Applicant Signature

 Date

Applicant Signature

Applicant Signature

Tenant Demographic Form

Date: _____ Development Name and Unit #: _____

Name of Head of Household: _____

Name of Household Member: _____

Ethnic Categories*	Select one
Hispanic or Latino	
Non-Hispanic or Latino	
Racial Categories*	Select one
White	
Black/African American	
American Indian/Alaska Native	
Asian	
Native Hawaiian/other Pacific Island	

***Definitions of these categories may be found on page two.**

Is the household member named above disabled? **Y or N**

Completion of this form is voluntary.

Signature

Date