



# Capitol Square Villas

3856 N Kelley  
Oklahoma City OK 73111  
405-996-6016



Telephone Device for the Deaf # 1-800-833-7741

### FOR MANAGEMENT USE ONLY

Application Received:

Date: \_\_\_/\_\_\_/\_\_\_ Time: \_\_\_:\_\_\_M

Date Approved: \_\_\_\_\_ Date Rejected: \_\_\_\_\_

Unit Assigned: \_\_\_\_\_

### CURRENT TELEPHONE NUMBERS

Home: \_(\_\_\_\_)\_\_\_\_--\_\_\_\_\_

Work: \_(\_\_\_\_)\_\_\_\_--\_\_\_\_\_

Cell: \_(\_\_\_\_)\_\_\_\_--\_\_\_\_\_

Other: \_(\_\_\_\_)\_\_\_\_--\_\_\_\_\_

Size Requested: ( )1BR, ( )2BR, ( )3BR, ( )4BR  
(Mark all that apply)

## APPLICATION FOR LEASE *(Conventional AHTC)*

1. Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Age: \_\_\_\_\_ years. Date of Birth: \_\_\_/\_\_\_/\_\_\_ Are you a student? \_\_\_Yes \_\_\_No

2. Spouse's Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Age: \_\_\_\_\_ years. Date of Birth: \_\_\_/\_\_\_/\_\_\_ Are you a student? \_\_\_Yes \_\_\_No

3. Do you wish to have priority for an home with special design features for individuals with handicaps? ( )Yes ( ) No

4. Current Street Address: \_\_\_\_\_

Mailing Address if Different \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_ years and \_\_\_\_\_ months.

5. List all members of the household who will reside in the home.

NAME	RELATIONSHIP	SSN	DATE OF BIRTH	STUDENTS?
_____	_____	_____	___/___/___	___Yes ___No
_____	_____	_____	___/___/___	___Yes ___No
_____	_____	_____	___/___/___	___Yes ___No
_____	_____	_____	___/___/___	___Yes ___No
_____	_____	_____	___/___/___	___Yes ___No
_____	_____	_____	___/___/___	___Yes ___No

6. List all income of applicant, spouse, and any other member of household living in the home.

Received by	Amount per year	Source / Employer	Mailing Address

12. Other Information:

- 1. Have you ever been evicted from other housing? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_
- 2. Have you ever been arrested for a felony? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_  
 If yes, what was the charge? \_\_\_\_\_  
 If arrested for a felony, did the arrest result in a conviction? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_  
 If yes, what was the date of conviction? \_\_\_\_\_  
 If no, is the case still pending? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_  
 If the case is not pending, were you acquitted of the charge(s)? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_  
 If you were convicted of the felony, were you incarcerated? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_  
 If yes, what was the date of your release? \_\_\_\_\_
- 3. Are you currently using illegal drugs? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_
- 4. Have you ever been convicted of sale, distribution, or possession of illegal drugs? ..... Yes: \_\_\_\_\_ No: \_\_\_\_\_

I/We hereby certify that the unit applied for will be my permanent residence and I will not maintain a separate subsidized rental unit in a different location.

I/We do hereby authorize Western Property Management and it's staff or authorized representative to contact any agencies or organizations, local police departments, credit bureaus, or other offices to obtain and verify any information or materials which are deemed necessary to complete my/our application for housing. I/We further authorize management to verify all information on this application. I/We certify that all information in this application is true to the best of my/our knowledge and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Co-applicant's Signature

**Race/national Origin of Tenant:**

- ( ) American Indian or Alaskan Native      ( ) Asian      ( ) Black or African American
- ( ) Native Hawaiian or Pacific Islander      ( ) White

**Choices for Ethnicity are:**

- ( ) Hispanic or Latino      ( ) Not Hispanic or Latino

**Sex of Tenant:**

- ( ) Male      ( ) Female

"The information regarding race, national origin, and sex designation solicited on this application is requested in order to assure that the Federal laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. **This information will not be used in evaluating your application or to discriminate against you in any way.** However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname."

I/We certify and affirm the following (check one):

- Changes to my/our circumstance have been noted above and initialed by all parties to this application.
- No changes have occurred in my/our circumstances between time of initial application and the date below.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Co-applicant's Signature

\_\_\_\_\_ Changes have occurred since original completion of this application. These changes are listed on the accompanying Clarification Record form.

**This institution is an equal opportunity provider and employer**

7. List all assets of each member of the applicant(s) household. (i.e. checking acct, savings acct, real estate, etc)

<u>Description of Asset</u>	<u>Value or Equity</u>	<u>Income Received from Asset</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7a. Did you dispose of an asset for less than fair market value in the two years preceding the date of this application?

( ) YES ( ) NO **If "Yes" please list:**

Date: \_\_\_\_\_ Market Value: \_\_\_\_\_ Amount Received: \_\_\_\_\_ Description: \_\_\_\_\_

Do you have equity in assets, excluding household furnishings and personal automobile, which exceeds \$5,000?

( ) YES ( ) NO **If "Yes", please list:**

\_\_\_\_\_

8. Credit References: (Complete Those That Are Applicable)

Name of your Bank \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

( ) Checking Acct. No. \_\_\_\_\_ ( ) Savings Acct. No. \_\_\_\_\_

( ) Loan Account No. \_\_\_\_\_ Type of Loan \_\_\_\_\_ (Car, Furniture, Etc.)

9. Credit Card References:

( ) Visa Acct. No. \_\_\_\_\_ ( ) Master Card Acct. No. \_\_\_\_\_

( ) \_\_\_\_\_ Acct. No. \_\_\_\_\_

( ) \_\_\_\_\_ Acct. No. \_\_\_\_\_

10. Retail Credit References:

<u>Name of Store</u>	<u>Address</u>	<u>City, St, Zip Code</u>	<u>Account No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. References:

Name of Present Landlord \_\_\_\_\_

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

Phone \_\_\_\_\_ How long did you live there? \_\_\_\_\_ yrs. \_\_\_\_\_ months

Reason for leaving? \_\_\_\_\_

Name of Previous Landlord \_\_\_\_\_

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

Phone \_\_\_\_\_ How long did you live there? \_\_\_\_\_ yrs. \_\_\_\_\_ months

Reason for leaving? \_\_\_\_\_