

# APPLICATION PROCESS

## Villita Artes

**Application Fee:** \$40.00 for Head of Household and \$25.00 for each household member 18 years or older. Must be paid by money order or certified check made payable to **Villita Artes Application Fees are non-refundable.**

### CHECKLIST:

Completed Application and Authorization for Release of Applicant Information (in ink)  
Application Fee (Money Order or Bank Check – No personal checks)

### Attach copies of the following documents:

Photo identification (driver's license or other photo ID) for all household members aged 18 years or older **and** proof of birth date (birth certificate, valid US Passport, immigration status, etc.) for **ALL** household members **AND** proof of social security number on any official document.

**All** sources of income for most recent month. Ex: Four(4) most recent pay stubs, child support, Social Security benefit statement, pensions, etc. for all household members.

Most recent bank statements: checking, savings, retirement

Last year's federal income tax return (1040) & W-2 attachments

Other Assets including real estate, investments, retirement accounts

Documents supporting any housing assistance (Section 8 vouchers, RAP, etc.)

Did you sign the Application, Consent/Authorization to Release Information and Applicant Questionnaire?

**\* NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED AND WILL BE RETURNED.**

Upon submission of the Application Forms, the Application Fee and all supporting documents:

- Consumer Background Check (Credit & Police) for each adult in the household is conducted. If acceptable, preliminary income verification will be performed.
- If preliminary income verification meets Villita Artes guidelines, an interview will be conducted.
- Initial certification for household income will be determined and eligibility determined.
- If conditional approval is granted, you will be placed on a "Waiting List in order of date & time the completed application was received. When an appropriate unit becomes available a final Income Certification will be performed. If you qualify, you will be offered a unit.
- For the initial rent up, some units require applicants be placed in a lottery system to determine the order unit offering. If you have been selected for placement in this state sponsored process you will be notified of your placement on the waiting list after the lottery.



# AFFORDABLE LIVE WORK APARTMENTS

## Villita Artes

INSTRUCTIONS: Please PRINT clearly in ink.

Complete all information throughout the application. If a question does not apply to your situation, please mark "N/A."

\*\*\*DO NOT LEAVE ANY QUESTIONS BLANK.\*\*\*

When completed, return the application, supporting documents, and fee to:

Villita Artes  
c/o Kelli Copeland Artist Lofts 15 S. Essex Avenue  
Orange, New Jersey 07050

1. Applicant Name: \_\_\_\_\_
2. Co-Applicant: \_\_\_\_\_
3. Current Address/City/State/Zip \_\_\_\_\_
4. Telephone (Day) (     ) \_\_\_\_\_  
Evening (     ) \_\_\_\_\_
5. Email address \_\_\_\_\_
6. Current Landlord's Name, Address: \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_
7. Prior Landlord's Name, Address: \_\_\_\_\_  
Telephone (     ) \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_

If yes, why:

7. Do you file Income Tax Returns? \_\_Yes \_\_No If yes, attach a copy of most recent Return & W-2
7. Total household income for previous year?     \$     \_\_\_\_\_
8. Are you entitled to receive child support?     \_\_Yes \_\_No  
If yes, do you receive child support?     \_\_Yes \_\_No  
If no, have you filed a claim with The Bureau of Child Support Enforcement?     \_\_Yes \_\_No

**Household Composition – List everyone who will be living in the unit**

Legal Name	Relationship to Head of Household	Date of Birth mm/dd/yy	Sex	Full Time Student	Social Security Number
	Head of Household	/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	
		/ /	M F	Y N	

**Employment History past three (3) years (Complete for each household member 18 years or older).**

Name	Current Employer: <b><i>Include Address, Telephone and Fax Number</i></b>	Dates of Employment

**Income: Gross Monthly (Complete for each household member 18 years or older and submit copies of last 6 month's income sources. Leave no blank spaces)**

Name	<b>MONTHLY</b> Wages/ Salary	TANF, SSI, Public Assistance	Pension, Disability, Workers Comp, Unemployment	Alimony, Child Support	Business Income, Family Contributions, Other

**Household Assets (LIST ALL BANK ACCOUNTS, STOCKS, BONDS, MUTUAL FUNDS, RETIREMENT ACCOUNTS, WHOLE LIFE INSURANCE, ETC)**

**\*\*\*Attach last three (6) months of statements\*\*\***

	Checking Account	Savings/MM/CD Account	401k or Other Retirement Plan	WHOLE Life Insurance Policy	Mutual Fund or Other Asset
Bank/Institution Name					
Bank/Institution Address					
Account #					
Current Balance					

**Do you currently own real estate or have you owned real estate within the past two years?**

Yes  No If yes, property address

Assessed value? \_\_\_\_\_

Outstanding mortgage balance? \_\_\_\_\_

**Have you disposed of any assets for less than fair market value within the past two years?**

Yes  No If yes, explain

**Current Monthly Household Expenses**

<b>Rent:</b>	<b>Health Insurance:</b>
<b>Utilities:</b>	<b>Medical Costs:</b>
<b>Childcare:</b>	

**Have you, or any member of your household, ever been convicted of any crime other than traffic violations?**

No  Yes If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

**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 will lead to cancellation of this application. All adult applicants (18 years or older) must sign the application. (Please sign below.)**

**Head of Household:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Other Adult Household Members:** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_ **Date** \_\_\_\_\_

## AUTHORIZATION TO RELEASE INFORMATION CONSENT:

I authorize and direct any Federal, State or local agency, organization, business or individual to release to Villita Artes/The Kelli Copeland Artist Lofts information needed to verify my application for participation and/or maintain my continued tenancy per funding guideline and/or other government agencies in administering and enforcing program rules and policies.

### INFORMATION COVERED:

I understand that depending on program policies and requirement, previous or current information regarding my household or me may be needed. Verifications and inquiries that any of these agencies may request for review include but are not limited to:

- Identity and Marital Status;
- Employment, Income and Assets;
- Credit and Criminal Activity about any person who will live in the unit; and,
- Residences and Rental Activity
- Education

### CONDITIONS:

I agree that photocopies of this authorization may be used for the purposes stated above. The original of this authorization will be on file in the Management Office and will stay in effect for a year and one month from the date signed. I understand that I have a right to review my file and to correct any information that I can prove to be incorrect.

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Signature of Head of Household	Print Name	Date
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Signature	Print Name	Date
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Signature	Print Name	Date
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