



Criterio de Calificar para el Programa Económico

Ingreso anual no puede superar el **50%** del ingreso medio del año en curso para el área de Raleigh en función del tamaño de la familia. Por favor, consulte la tabla siguiente. Además, la renta no puede superar el 30% de sus ingresos mensuales.

[Salario/hora _____ x Horas trabajado por Semana _____ = _____ Ingresos Mensuales]

| TOMANO DEL HOGAR | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| Ingreso Maximo de Hogar | \$37,450 | \$42,800 | \$48,150 | \$53,500 | \$57,800 | \$62,100 | \$66,350 | \$70,650 |

Para estas propiedades, la renta no puede superar el **80%** del ingreso medio del año en curso:

NEW BERN AVE, FRIAR TUCK ROAD, HAVEN ROAD, COLEMAN STREET Y UJAMAA DRIVE.

| TOMANO DEL HOGAR | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|-------------------------|----------|----------|----------|----------|----------|----------|-----------|-----------|
| Ingreso Maximo de Hogar | \$59,950 | \$68,500 | \$77,050 | \$85,600 | \$92,450 | \$99,300 | \$106,150 | \$113,000 |

Crédito

Historial crediticio actual de cualquier cuenta calificación peor que un "5" no es aceptable. La bancarrota no afectará su estado de crédito actual, si las nuevas cuentas se han establecido por lo menos un año desde la descarga de la quiebra, y las nuevas cuentas tienen calificaciones crediticias aceptables. Sentencias para el alquiler o utilidades anteriores no son aceptables. Para las personas con problemas de calificación crediticia, pero un historial de crédito satisfactorio durante los últimos 12 meses, se tendrá en cuenta PROPORCIONADO un alquiler historial de pago satisfactorio para los últimos 12 meses también se puede verificar.

Historial de Alquiler

Cualquier historia relacionada con un alquiler anterior o actual con saldos adeudados en alquiler o los daños no es aceptable. Retrasos en los pagos superiores a tres en un plazo de arrendamiento no es aceptable.

Búsqueda de Antecedentes Penales

Una búsqueda de antecedentes penales se llevará a cabo en todos los miembros de la familia de dieciocho (18) años de edad. Dentro de los 6 años de la fecha de aplicar, el suplicante no debe haber sido condenado por y/o salir de la cárcel para cualquiera de los siguientes:

Crímenes o Delitos que implican:

- La violencia física para las personas o asalto, donde es un elemento esencial del delito.
- La fabricación, venta, y/o distribución de drogas/sustancias ilegales controladas.
- Acoso o la mirada furtiva.
- Un delito relacionado sexual.

Crímenes implican:

- El uso ilegal o posesión de un arma.
- Destrucción de bienes inmuebles y/o personal.

| TASAS DE SOLICITUD | |
|--|------|
| Solicitante Principal | \$30 |
| Esposo/a de Solicitante Primario | \$30 |
| Hijo a cargo mayor de 18 años | \$30 |
| *TODAS LAS TASAS DE SOLICITUD NO SON REEMBOLSABLES* | |

La Ley de Vivienda Justa prohíbe la discriminación en la venta, alquiler o financiamiento de vivienda por motivos de raza, color, religión, sexo, discapacidad, estado familiar u origen nacional. Además, agentes de bienes raíces tienen un deber ético para llevar a cabo dichas actividades sin respeto a la orientación sexual de cualquier persona o partido posible a este acuerdo.



Gracias por aplicar con Barker Realty, Inc.

El Programa Economico tiene un conjunto unico de requisitos y restricciones. Para evitar perder su solicitud no reembolsable libre a una denegacion, por favor asegurese de haber leído a fondo los requisitos de la parte frontal de la aplicacion. Tambien hemos proporcionado instrucciones especiales y una lista de comprobacion siguiente para ayudar a asegurar que toda la informacion necesaria ha sido proporcionada. Si Usted tiene alguna pregunta no dude en llamar a nuestra oficina al **919-859-0044**.

INSTRUCCIONES/RESTRICCIONES ESPECIALES

- ◆ Es un requisito a ver el **certificado de nacimiento original** y **tarjeta de seguridad social original** por **CADA** ocupante en la casa.
- ◆ **No se permiten** mascotas en o sobre la propiedad.
- ◆ **Fiadores no aceptadas.**
- ◆ **Tasa de solicitud no es reembolsable.** No comenzamos procesar aplicaciones hasta que recibimos toda la información requerida y se paga la tasa a Barker Realty, Inc. La propiedad para la que se aplica no está reservado para usted hasta que se apruebe su solicitud, que ha firmado un contrato de arrendamiento y sus depósitos de seguridad debe ser recibido y arrendamientos debe ser firmado dentro de las 24 horas siguientes a la notificación de la aprobación de la solicitud o en el siguiente día hábil, lo que ocurra primero.

| Marcar | Antes de presentar su solicitud, favor compruebe que nos ha proporcionado la siguiente información |
|--------|--|
| | Identificación con foto para todos los solicitantes de 18 años o mayor. |
| | Tarjeta de Seguridad Social Original y Certificado de Nacimiento Original por cada ocupante. |
| | ¿Ha adjuntado la tasa de solicitud requerida? |
| | Actual y Previa Informacion de Propietario. |
| | Informacion de Empleo. *Por favor provee talones de cheque de 60 días. |
| | ¿Ha completado la formas de Activo e Ingresos y de Estudiantes? (y presentar la documentación necesaria) |
| | ¿Ud ha firmado la suplicante? |
| | ¿Estás preparado a firmar el contrato y dispuesto a pagar el depósito de garantía en su totalidad? (El depósito de seguridad es normalmente igual a un mes de alquiler y debe ser pagado en fondos certificados [un giro postal o cheque certificado] para asegurar la propiedad). |
| | ¿Está usted preparado para obtener el Seguro de Inquilino requerida por su fecha de firma del contrato? SE REQUIERE la cobertura de responsabilidad civil de \$300,000. Barker Realty, Inc. debe estar alistado como asegurada en la pagina de declaraciones. |



Start the Application

Applicant Information



| | |
|--------------------------|----------------------|
| PROPERTY DESIRED: | DATE DESIRED: |
|--------------------------|----------------------|

PRIMARY APPLICANT:

Last Name: _____ First Name: _____ Middle: _____

Date of Birth: _____ Social Security #: _____ Home #: _____

Cell #: _____ Email Address: _____ License #: _____

Best form of Contact?: Call ___ Text ___ (Cell Provider: _____) Email ___

SPOUSE:

Last Name: _____ First Name: _____ Middle: _____

Date of Birth: _____ Social Security #: _____ Home #: _____

Cell #: _____ Email Address: _____ License #: _____

Best form of Contact?: Call ___ Text ___ (Cell Provider: _____) Email ___

Will there be other people living in the home (family members / roommates, etc.)? YES _____ NO _____

- Name: _____ Date of Birth: _____
- Name: _____ Date of Birth: _____
- Name: _____ Date of Birth: _____
- Name: _____ Date of Birth: _____

****Original Birth Certificates and Social Security Cards are required for everyone living in the home.**

****Anyone over the age of 18, who is not an immediate family member, is required to fill out their own application and pay the application fee.**

Residence History: *Please ensure that every section is completed.*

CURRENT

| | | |
|---|-----------------------------------|----------------------------------|
| Street Address : | | City/State/Zip: |
| Dates of Occupancy : | Mortgage or Rental Rate/Mo.: | Reason for Leaving: |
| Do you own or rent this property? | Owner/Landlord Name: | |
| Landlord Phone #: | Landlord Fax#/Email: | Have you given notice? YES or NO |
| Was the lease in your name? YES or NO | If NO, who was the lease holder? | |
| Was your rent subsidized (ex. Section 8 Voucher)? YES or NO | If YES— How much did subsidy pay? | |

PREVIOUS

| | | |
|---|-----------------------------------|----------------------------------|
| Street Address : | | City/State/Zip: |
| Dates of Occupancy : | Mortgage or Rental Rate/Mo.: | Reason for Leaving: |
| Do you own or rent this property? | Owner/Landlord Name: | |
| Landlord Phone #: | Landlord Fax#/Email: | Have you given notice? YES or NO |
| Was the lease in your name? YES or NO | If NO, who was the lease holder? | |
| Was your rent subsidized (ex. Section 8 Voucher)? YES or NO | If YES— How much did subsidy pay? | |

Employment Information

PRIMARY APPLICANT: **Please Provide 60 Days of Paystubs with your Application*

| Employment / Student Status | | | |
|-----------------------------|--------------------|--------------------------|-------------------|
| <input type="checkbox"/> | Employed Full-Time | <input type="checkbox"/> | Retired |
| <input type="checkbox"/> | Employed Part-Time | <input type="checkbox"/> | Full-Time Student |
| <input type="checkbox"/> | Unemployed | <input type="checkbox"/> | Part-Time Student |

**If self - employed please provide the past 2 year's tax returns. (Page 1 & Schedule C only)*

Company Name: _____

Occupation: _____

Employment Dates: _____

Work Address: _____ Work #: _____

Supervisor's Name/ HR: _____ Phone #: _____

Fax # or Email Address: _____

SPOUSE: **Please Provide 60 Days of Paystubs with your Application*

| Employment / Student Status | | | |
|-----------------------------|--------------------|--------------------------|-------------------|
| <input type="checkbox"/> | Employed Full-Time | <input type="checkbox"/> | Retired |
| <input type="checkbox"/> | Employed Part-Time | <input type="checkbox"/> | Full-time Student |
| <input type="checkbox"/> | Unemployed | <input type="checkbox"/> | Part-time Student |

**If self - employed please provide the past 2 year's tax returns. (Page 1 & Schedule C only)*

Company Name: _____

Occupation: _____

Employment Dates: _____

Work Address: _____ Work #: _____

Supervisor's Name/ HR: _____ Phone #: _____

Fax # or Email Address: _____

PLEASE RESPOND

Did you file a Federal Tax Return last year? YES or NO

Were you claimed as a dependent on anyone's taxes last year?: YES or NO

Other Information Needed:

Emergency Contact (This CANNOT be someone who is living in the home): _____

Relationship: _____ Phone #: _____

Address: _____ City/State/Zip: _____

How did you hear about Barker Realty, Inc.?

Barker Sign Craig's List MLS/Realtor.com Go Section 8 Other Internet Site Referral Realtor

Have you viewed the interior of the property for which you are applying?: YES or NO

Asset & Income Disclosure Statement

**ALL HOUSEHOLD MEMBERS ASSETS AND INCOME INFORMATION
(INCLUDING CHILDREN UNDER THE AGE OF 18)**

****You will need to provide documentation for ALL Sources of Income****

Income

| SOURCE: <i>(Receives now or will in the next 12 months)</i> | CIRCLE ONE | | HOUSEHOLD MEMBER NAME | AMOUNT RECEIVED MONTHLY | VERIFIED |
|---|-------------------|----|----------------------------------|--|-----------------|
| | YES | NO | | | |
| Employment Income | YES | NO | | \$ | |
| Self-Employment Income | YES | NO | | \$ | |
| Unemployment Benefits | YES | NO | | \$ | |
| Disability or Worker's Compensation | YES | NO | | \$ | |
| Social Security/SSI/SSDI | YES | NO | | \$ | |
| Pension Income | YES | NO | | \$ | |
| Alimony/Child Support | YES | NO | | \$ | |
| AFDC | YES | NO | | \$ | |
| Food Stamps | YES | NO | | \$ | |
| Income from Annuities / Insurance Policies | YES | NO | | \$ | |
| Veteran Admin. Benefits/ Military Pay | YES | NO | | \$ | |
| Income from Retirement Plan | YES | NO | | \$ | |
| Rental Income <i>(from property owned)</i> | YES | NO | | \$ | |
| Other Recurring Income <i>(gifts,</i> | YES | NO | | \$ | |

Asset & Income Disclosure Statement

ASSET SOURCE: Includes any asset disposed of within the last 12 months

| SOURCE | CIRCLE ONE | | HOUSEHOLD MEMBER NAME | CURRENT VALUE | BANK/ FINANCIAL INSTITUTE & ACCT # |
|---|------------|----|-----------------------|---------------|------------------------------------|
| Checking Account | YES | NO | | \$ | |
| Savings Account / Money Market | YES | NO | | \$ | |
| Cash Held | YES | NO | | \$ | |
| Certificate of Deposit (CD) | YES | NO | | \$ | |
| Stocks/Bonds/Treasury Notes/ Mutual Funds | YES | NO | | \$ | |
| IRA/KEOUGH/ 401K | YES | NO | | \$ | |
| Owned Real estate: Home, land, mobile home | YES | NO | | \$ | |
| Owned Rental Property | YES | NO | | \$ | |
| Personal Property held as Investment: Antiques/jewelry/ antique cars | YES | NO | | \$ | |
| Life Insurance Policies w/ cash value | YES | NO | | \$ | |
| Trust (Principle Value) | YES | NO | | \$ | |
| Any other asset held separately or jointly | YES | NO | | \$ | |

Applicant/Resident therefore certifies that this Asset and Income Disclosure Statement has been completed both truthfully and accurately.

WARNING: Title 18, US Code Section 1001, states that a person who knowingly and willingly makes false or fraudulent statements to any Department or Agency of the United States is guilty of a felony. State law may also provide penalties for false or fraudulent statements.

Applicant Signature

Date

Applicant Signature

Date



Authorization for the Release of Information

PLEASE READ THE FOLLOWING BEFORE SIGNING:

- ◆ I/we certify that the foregoing information is true and complete to the best of my/our knowledge and understand that falsified information on this application shall be grounds for denial. All applications, co-signer applications, and fees must be received before processing will begin.
- ◆ We do not operate on a first come, first serve basis. I/we understand that Barker Realty, Inc. will take multiple applications on the same property and process them simultaneously.
- ◆ Upon approval, applicant(s) will be given 24 hours from notification of approval to sign the lease and pay the security deposit. If the approved applicant fails to sign the lease and pay the security deposit within that time frame, the property will be offered to the next approved applicant.
- ◆ As the agent for the property owner, Barker Realty, Inc. is authorized to share all information with the property owner.

I/we authorize BARKER REALTY, INC. to make inquiries, do credit checks, criminal background checks, and verify rental and employment histories, now and in the future to verify the statements above.

| | | |
|---------------------------------|-----------------------|------|
| Applicant's Name (Please Print) | Applicant's Signature | Date |
|---------------------------------|-----------------------|------|

| | | |
|------------------------------|--------------------|------|
| Spouse's Name (Please Print) | Spouse's Signature | Date |
|------------------------------|--------------------|------|



Attached you will find a REQUIRED form to be filled out: **Annual Student Certification Form.**

(This form must be completed whether you are a student or not a student).

Please read the form in its entirety and fill out the appropriate answers. All leaseholders over the age of 18 must sign and date the bottom of the form.

On the attached form you will need to check only ONE of the boxes: A, B, or C

If A applies, then Check A. You are done – sign and date bottom of form.

If A does NOT apply, then you check either B or C.

IF B applies, then check B. – sign and date bottom of form (required documents: transcript from school showing credit hours).

If C applies, check C and then check yes or no to all of the 5 Questions- please provide the required documentation for the questions that you marked yes - sign and date bottom of form.

If you have any additional questions please call us at 919-859-0044.

ANNUAL STUDENT CERTIFICATION

Effective date _____

Move in date _____

Under the Low Income Housing Tax Credit Program households comprised of full time students are not eligible for tax credits unless they meet one of the student exceptions. This document is the Annual Student Certification to confirm the student status of the resident(s) residing in the following unit:

Property Name _____ Unit Number _____

Head of Household Name: _____ BIN# _____

Check A, B, or C, as applicable to the resident(s) in the unit. Note: Students include those attending kindergarten through a PhD and all other types such as barber/beauty, police academies, technical, trade and mechanical schools.

A. Household contains at least one occupant who is not a student and has not been or will not be a student for five months or more out of the current and/or upcoming calendar year (months do not need to be consecutive). If checked, no further information is necessary.

B. Household contains all students, but is qualified because the following occupant(s) is/are part time student(s). Verification of part time student status is required for at least one resident. Part time Student(s): _____

C. Household contains all FULL TIME students for five or more months out of upcoming calendar year (months need not be consecutive). If this box is checked, answer questions 1-5 below:

- | | | |
|--|-----|----|
| 1. Are the students married and entitled to file a joint tax return? (Required documentation: marriage certificate or tax return) | YES | NO |
| 2. Is at least one student a single parent with child(ren) and this parent is not a dependent of someone else, and the child(ren) are not a dependent of someone else other than a parent? (Required documentation: divorce or child custody agreement or parent's most recent tax return) | YES | NO |
| 3. Is at least one student receiving Temporary Assistance to Needy Families (TANF)? (Required documentation: verification of assistance) | YES | NO |
| 4. Does at least one student participate in a program receiving assistance under the Job Training Partnership Act, Workforce Investment Act, or under similar federal, state or local program? (Required documentation: verification of participation) | YES | NO |
| 5. Does the household consist of at least one student who was previously under foster care? (Required documentation: verification of participation) | YES | NO |

Full-time student households that are income eligible and satisfy one of the 5 above conditions or exceptions are tax credit eligible. If questions 1 -5 are marked NO, or verification is missing or does not support the exception, the household is considered an ineligible student household.

Under penalties of perjury, I/we certify that the information presented in the Annual Student Certification is true and correct and accurate to the best of my/our knowledge and belief. I/we agree to notify management immediately of any changes in the student status of any household member. The undersigned further understands that providing false information or making false representations constitutes an act of fraud. False, misleading or incomplete information may result in the termination of the lease agreement.

All household members 18 years of age or older must execute and date.

Signature Date Signature Date

Signature Date Signature Date