

Housing Authority of Jackson County

2251 Table Rock Road, Medford, OR 97501

PH/TDD: 541-779-5785 Fax: 541-857-1118

www.hajc.net

TENANT SELECTION CRITERIA

ROGUE RIVER ESTATES

1395 POPLAR DRIVE, MEDFORD, OR 97504

Applications are to be returned to the on-site office at the above addresses, or to the Housing Authority of Jackson County, 2251 Table Rock Road, Medford, OR 97501 in person, by mail, or by fax. Applications are accepted on a first come, first serve basis. Incomplete applications will be returned to the applicant by mail.

Rogue River Estates is a Section 42 Low Income Housing Tax Credit (LIHTC) property with rental assistance provided by the US Department of Housing and Urban Development (HUD) under management by the Housing Authority of Jackson County. As such, all applicants must meet the LIHTC, HUD and Housing Authority criteria in order to be eligible for tenancy.

All applicants will be required to be interviewed and allow the Housing Authority to verify all income, assets, and background information such as credit and criminal checks before being approved for tenancy or placement on the waiting list, if one exists at the time of application. If an applicant requires reasonable accommodations, such as modifications to the unit or a change in occupancy guidelines due to a verifiable disability, please inform management at the time of application and such modifications will be made if reasonable.

If a waiting list exists, all applications will be logged by date and time received and by income level. If there is an available unit at the time of application, the screening process will begin immediately upon receipt of the application. The applicant will be notified in writing within 10 days as to whether the application has been accepted for residency, placed on the waiting list, or rejected per LIHTC, HUD, and/or Housing Authority guidelines.

The following criteria is required for residency:

- Must meet the income guidelines listed below
- Head of Household must be elderly (62 years of age or older) and/or disabled
- Must have favorable landlord references.
- Must complete the interview process and allow the Housing Authority to verify all information necessary to determine eligibility for the LIHTC and HUD guidelines
- Must have positive credit and criminal records
- All members of the household, if over 18 years of age, may not be full-time students
- Must have the legal capacity to enter into a lease agreement
- Must meet the occupancy guidelines listed below for the apartment size applied for

Maximum annual income guidelines are as follows:

1 Person	2 People	3 People	4 People	5 People
\$29,220	\$33,360	\$37,560	\$41,700	\$45,060

Occupancy Guidelines: STUDIO = 1 person 1 BR = 1-3 people 2 BR = 2-5 people

The Housing Authority of Jackson County (HAJC) does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. The following persons have been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988):

Cara Carter or Riley Pierce
2251 Table Rock Road
Medford, OR 97501
Ph/TTY: (541) 779-5785



RENTAL APPLICATION
HOUSING AUTHORITY OF JACKSON COUNTY
 2251 Table Rock Road Medford, OR 97501
 Phone: 541-779-5785 fax: 541-857-1118
ROGUE RIVER ESTATES

FOR OFFICE USE ONLY

Date Received: _____
 Time Received: _____
 Property: _____

Please note: You must complete the entire application and sign it in order for it to be processed. If an item is not applicable, please write N/A (not applicable)

NAME OF APPLICANT _____
 MAILING ADDRESS _____
 CITY, STATE & ZIP _____
 HOME PHONE _____ MESS PHONE _____
 EMAIL _____

HOUSEHOLD COMPOSITION List below all members of the household who will be residing in the apartment. List the name of the applicant first, including his/her first name, middle name, and last name.

Household Members: List all persons who will be living in the assisted unit with you. List yourself first.					
Legal Name	Sex	Relation to Head	Birth Date	Disabled Y/N	Social Security
1.		Self			
2.					
3.					
4.					
5.					

Are any of the above listed household members full-time students, and if so, who? _____
 Are any of the above household members subject to a lifetime sex offender registration requirement in any state? Yes _____ No _____
 List every state you've lived in _____

*This is for statistical information only. 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.
 How did you hear about us? Referred by another agency? (Please list) _____ T.V. _____ Radio _____
 Word of Mouth _____ Newspaper _____ Community Resource Listing or Flyer _____ Internet _____ Other _____

Income

\$ / Mo. (before tax)	SOURCE (Work, AFS, Child Support, Unemployment Insurance, SSI, SSDI, etc.)

Total Assets (dollar amount for bank accounts, property, etc.) \$ _____

Do you require a unit with special features? Not Applicable Grab Rails No stairs
 Wheelchair Accessible Hearing Impaired Smoke Detector Other _____

Title 18, Section 1001 of the US Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure of improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208 (f)(g) and (h). Violation of these provisions are cited as violations of 42 U.S.C. 408 f, g and h.

Signature _____ Date _____

