

# STATEMENT OF QUALIFICATIONS Gulfstream at Dania Beach May 01, 2025

When you meet the application standards you will have the peace of mind of knowing that you will be joining other residents who have also met strict standards.

If your application meets all the following criteria, you will be approved. If it does not, you may be approved with conditions, which may require you to pay an additional security deposit, or obtain a guarantor (in communities where permitted). If you do not meet the requirements set forth, your application will be denied.

**NOTE:** We do business in accordance with the Fair Housing Act. It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin, and any other characteristic protect by federal, state, or local law.

#### **APPLICATION SCREENING REQUIREMENTS**

<u>A complete application:</u> All applicants over the age of 18 must complete an application, and all occupants over the age of 18 must sign the lease along with the lease holder(s). Any person under the age of 18 must be listed as an occupant on the lease.

**Two (2) forms of identification:** We require at least one valid government-issued photo identification document (ID) for all applicants over the age of 18. If your social security card is marked **VALID FOR WORK ONLY WITH DHS AUTHORIZATION** and you report income, you must provide the authorization card as well. Social Security cards are required for all HOME Assisted units. Identification must be valid for the term of your lease.

Verifiable rental history: The standard approval process requires verifiable rental history for the last two (2) years. It is your responsibility to provide necessary information that allows us to contact your past landlord(s) for this information. You must have a history of paying your rent on time, have given proper notice, have no dispossessory warrant(s) filed, and must not owe any money to your landlord. If we are unable to verify your previous landlord(s) and/or references, or if you have no rental history, we reserve the right to charge additional security deposit and/or deny your application if the other criteria set forth are not met. Verifiable for these purposes means THIRD PARTY verification from someone other than a relative. We will consider a mortgage as rental history, if it has been active within the past two (2) years. However, if the mortgage is late or in default, you will be asked to give the reason why, show documentation to support the reason, and may be required to pay additional security deposit providing the other criteria set forth are met.

Income eligibility: To become eligible for approval you must meet the monthly requirement set forth by this community which is 2.25 times the tenant paid rent per month. Some examples include employment verification, the collection of six (6) to 10 consecutive paystubs depending on program requirements, the collection of SSI, SSD, SSA confirmation letters, the collection of legal settlement and divorce agreements, any other legal paperwork reflecting income (i.e. Child Support documentation, the



collection of bank statements (when applicable), and the collection of IRA, 401K, or other asset statements). A complete list of income documentation will be provided to you by the property staff once the initial interview for application is complete.

TRG Management evaluates and qualifies all applications based on the criteria established by Affordable housing programs, which encompass, but are not limited to, the Low Income Housing Tax Credit (LIHTC), Tax-exempt Multifamily Revenue Bonds, HOME, SHIP, and Live Local funding. These programs mandate that all applicants meet the necessary income and asset verification requirements to ensure program eligibility. Verifications needed may vary based on program requirements. Federal Tax returns, bank statements, pay check stubs, employment verifications can be required.

For applicants that are reporting income from a contributor (a person who makes regular monthly contributions to the applicant), the following applies:

- 50% of income or less from contribution A notarized affidavit from the contributor (form
  to be provided by office) AND six (6) months bank statements showing the amount of the
  contribution as a deposit. If the applicant cannot provide bank statements proving the
  contribution, then the contributor must be added as a GUARANTOR for the leaseholder.
- More than 50% of income from a contribution Supply the above documentation, PLUS the contributor must become a GUARANTOR for the leaseholder and earn at least FOUR (4) times the monthly rent, have verifiable impeccable credit, and score automatic approval (no conditions). Criminal history of guarantors will not be considered. Guarantors must complete a Guarantor Pre-Leasing Application and pay the applicable application fee. Guarantors must also sign a Lease Contract Guaranty which must be signed in the office or notarized. Guarantors must sign a new Lease Contract Guaranty with each renewal.

<u>Credit History:</u> Credit accounts should have satisfactory ratings and all utility accounts must be current with no balance owing. If credit has been slow but all other qualifications for residency have been met, the application may be conditionally approved with payment of an additional security deposit.

If the bankruptcy has been dismissed or discharged, we may require further information for review but may still approve your application and/or may require additional security deposit.

<u>Criminal background:</u> Criminal background will be reviewed for all adult members of the household who have satisfactorily met all above income, credit, and rental history criteria.

- A history of any criminal conviction is not a denial of a rental application in all cases; criminal history is evaluated based on the nature and time of the conviction, as well as any relevant mitigating information provided by the applicant. Criminal history screening will not consider arrests, charges, expunged convictions, convictions revered on appeal, offenses where adjudications was withheld or deferred, pardoned convictions, vacated convictions, and sealed juvenile records. If current charges are pending results, charges will need to be finalized prior to approval unless charges are not a denial under screening criteria.
- Felony conviction for 1) the manufacture, sale, or distribution of a controlled substance; 2) arson; or 3) homicide will, in most cases, result in a denial of the application. Current registration as a sexual offender will result in automatic denial of the application.
- If the criminal history screening produces any relevant conviction, you will be given notice
  of the specific information from the screening that creates the concern, and will have an
  opportunity to provide any additional information for us to consider in the evaluation of
  your application.
- Unclassified Reports: All unclassified reports will require investigation either through public records to determine status: felony or misdemeanor. It is the burden of the applicant to

provide acceptable documentation on unclassified reports.

TRG Affordable Qualifying Criteria pg. 2

#### **PROPERTY SPECIFIC INFORMATION:**

<u>Maximum Occupants:</u> Studio – Two (2) Persons, One Bedroom – Two (2) Persons, Two Bedroom – Four (4) Persons.

Pet Policy: We allow up to two (2) pets per apartment. Dogs must be 25 lbs. or less. If more than one pet, combined weight must not exceed 50 lbs. We do not allow breeds that are classified as aggressive, as pets including but not limited to: American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, Bull Terrier, Rottweiler, Chow Chow, Great Dane, Doberman Pincher, German Shepherd, Caucasian Ovcharka, Dogo Argentino, Saint Bernard, Fila Brasileiro, Perro De Presa Canario, Akita Inu, Husky, Bull Mastiff. All pets must be listed on your application and registered with the office. We also require that immunizations are up to date and a photo of your pet for the file. Additional information and requirements are available on the Animal Addendum and may be reviewed prior to moving in by request. We comply with all fair housing laws regarding Assistance Animals. No animal is permitted on the premises without prior written authorization from management

Please refer to this community's Statement of Qualifications addendum for additional qualifying standards and fees/deposits.

I acknowledge the receipt of this screening/application criteria document:			
Applicant Signature			
Print Name			
Date			





## STATEMENT OF QUALIFICATIONS ADDENDUM GULFSTREAM AT DANIA BEACH

#### 05/01/2025

#### Fees/Deposits:

- Application Fee: \$85.00 per adult over the age of 18(Non-Refundable)
- Application Deposit- \$500.00 (may or may not be refundable please refer to application)
- Applications approved with conditions will be subject to an additional Security Deposit in an amount equal to one month's rent.

Rent Range (s	bject to change)
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2 Bedroom 50% Rent: \$1,207.00

2 Bedroom 60% Rent: \$1,466,00

### MINIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

2 Bedroom 50%: \$32,589.00 2 Bedroom 60%: \$39,582.00

## MAXIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

1 Person: 50% \$40,350.00 2 Persons: 50% \$46,100.00 3 Persons: 50% \$51,850.00 4 Persons: 50% \$57,650.00

1 Person: 60% \$48,420.00 2 Persons: 60% \$55,320.00 3 Persons: 60% \$62,220.00 4 Persons: 60% \$69,180.00

## I acknowledge the receipt of the document:

Applicant Signature:	
Print Applicant Name:	
Today's Date:	





#### **RENTAL APPLICATION FOR RESIDENTS AND OCCUPANTS**

(Each co-applicant and each occupant 18 years old and over must submit a separate application.) Date when filled out:



All applicants who indicate that they are not U.S. citizens will be asked to complete the supplemental questions in this Rental Application, unless otherwise noted. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap or familial status. The purpose of the supplemental questions is:

- 1. to give you the option to furnish information about an emergency contact person for you in your home country;
- 2. to verify that you are lawfully in the United States;
- 3. to determine whether your right to be in the U.S. expires during your Lease Contract term; and
- 4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing your responses to the supplemental questions with anyone except government officials who might inquire about you.

APPLICANT INFORMATI	ON		
Full Name (Exactly as it appears	s on Driver's License or Govt. ID card)		
Former Name (if applicable)		Gender (Optional)	
Birthdate	Social Security #	Driver's License #	State
Government Photo ID card #	-	Туре	
Home Phone Number	Cell Phone Number	Work Phone Number	
Email Address			
Supplemental Questions questions if you are not a U	Required Not Required (If the S. citizen. If no box is checked, the	"Required" box is checked, please answer following questions are not required and ar	the following
Have you ever been asked or o  If yes, please state when and wh. Are you a U.S. citizen?  yes Approximately how long have y Place of Birth Please check the U.S. Citizens!   Form I-551 Permanent Reside   Form I-566 Employment Authori   USCIS receipt for replacement  If you are relying on Form I-94, Country issuing your passport:  Expiration Date:  Do you have a visa?  yes  Visa Expiration Date:  We may ask to make a photoco  Marital Status:  single  m	at country or countries (list all):  no you been in the United States?  Country or countries  nip and Immigration Services (USCIS) do int Card [Alien Registration Receipt Card] (for zation Document (form includes photo and fing form does not include photo or fingerprint). It is of one of the above documents, with verific we will ask to see your passport and visa  no If yes, what type? student work  py of any of the USCIS documents check earried widowed separated an active-duty servicemember as defined in	ment to leave the U.S. or any other country?   ars Months of which you are a citizen (list all): cument that entitles you to be in the United State or includes photo and fingerprint). Card Number: gerprint). Expiration Date: Card Number: approprint). Expiration Date: Form Number: attion by USCIS of your entitlement above. a, and you will need to answer the guestions below Your Passport Number:    visitor   other (specify):  red above and, if needed, your passport and visal  Do you or any occupant smoke?   Dyes   Do	ves □ no s: Der: □
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			

OTHER OCCUPANTS	29		
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Servicemember Status: Are y	ou an active-duty servicemember as defined		
Supplemental Question	IS Required Not Required If the	e "Required" box is checked, please answer th cked, the following questions are not required	e following
Has this occupant ever been If yes, please state when and v	asked or ordered by a representative of a what country or countries (list all):	ny government to leave the U.S. or any other country	
Is this occupant a U.S. citizer Approximately how long has Place of Birth	this occupant been in the United States?		
	Country or countries	s of which occupant is a citizen (list all):	
D Form 1 554 Daniel D. Citizen	isnip and immigration Services (USCIS) de	ocument that entitles the occupant to be in the Unite	d States:
Form I-551 Permanent Resi	dent Card [Alien Registration Receipt Card] (	form includes photo and fingerprint). Card Number:	
Form I-94 Global Entry Form	orization Document (form includes photo and file	ngerprint). Expiration Date: Card Number	
LISCIS receipt for replacement	ent of one of the above documents, with verif	Expiration Date:Form Number:	
If relving on Form I-94, we wi	If ask to see occupant's passport and vis-	ication by USCIS of your entitlement above.  In and you will need to answer the questions below.	
Country issuing passport:	den to oce occupant's passport and visa	Passport Number:	
Expiration Date:		T assport Number.	
Does occupant have a visa?	yes 🔲 no If yes, what type? 🔲 student	□ work □ visitor □ other (specify):	
Visa Expiration Date:			
We may ask to make a photo	copy of any of the USCIS documents chec	ked above and, if needed, occupant's passport and	visa.
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #	-	Type	
Servicemember Status: Are ye	ou an active-duty servicemember as defined		
Has this occupant ever been a If yes, please state when and w Is this occupant a U.S. citizen	asked or ordered by a representative of an hat country or countries (list all):		
Place of Birth			
	Country or countries	of which occupant is a citizen (list all):	
D. Carry J. 554 D	snip and immigration Services (USCIS) do	cument that entitles the occupant to be in the Unite	d States:
☐ Form I-551 Permanent Resid	lent Card [Alien Registration Receipt Card] (f	orm includes photo and fingerprint). Card Number:	
☐ Form I-766 Employment Autho	orization Document (form includes photo and fir	gerprint). Expiration Date: Card Number	
USCIS receipt for real seems	(form does not include photo or fingerprint).	Expiration Date:Form Number:	
If relving on Form L-04, we will	nt of one of the above documents, with verifin	cation by USCIS of your entitlement above.  , and you will need to answer the questions below.	
Country issuing passport:	ask to see occupant's passport and visa		
Expiration Date:		Passport Number:	
Does occupant have a visa? [	yes 🔲 no If yes, what type? 🗋 student [	Work Divisitor Dather (specific)	
Visa Expiration Date:		work distort dispectly).	
We may ask to make a photoc	opy of any of the USCIS documents chec	ked above and, if needed, occupant's passport and	visa
		,,	7104.
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Servicemember Status: Are yo	u an active-duty servicemember as defined i	n Florida Statute § 250.01? ☐ ves ☐ no	
Supplemental Questions	Required Not Required (If the	"Required" box is checked, please answer the ked, the following questions are not required a	following
las this occupant ever been a	isked or ordered by a representative of an nat country or countries (list all):	y government to leave the U.S. or any other country	? yes no
Approximately how long has t	his occupant been in the United States? _	Years Months	
Place of Birth		of which occupant is a citizen (list all):	
	hip and Immigration Services (USCIS) 4-	or which occupant is a citizen (list all): cument that entitles the occupant to be in the United	
Form I-551 Permanent Pasid	ent Card (Alien Registration Resist Co. 2.4	cument that entitles the occupant to be in the United parm includes photo and fingerprint). Card Number:	States:
Form I-766 Employment Autho	rization Document (form includes photo and for	orm includes photo and fingerprint). Card Number: gerprint). Expiration Date: Card Number:	
■ Form I-94 Global Entry Form	(form does not include photo or fingerprint). I	Expiration Date: Form Number:	
USCIS receipt for replacemen	nt of one of the above documents, with verific	ation by USCIS of your entitlement above.	

OTHER OCCUPANTS (conti	nueaj		
If relying on Form I-94, we will ask	to see occupant's passport	and visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date:	in the second se		
Does occupant have a visa?  yes	🖫 no. If yes, what type? 🛄 :	student 🗋 work 🔲 visitor 🔲 other (specify):	
Visa Expiration Date:			
We may ask to make a photocopy	of any of the USCIS docume	nts checked above and, if needed, occupant's passport and visa.	
Full Name		Relationship	
D. (D.)	-		
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #			
	methy adultication of the	Туре	
		defined in Florida Statute § 250.01? ☐ yes ☐ no	
questions if this occupant is no	Required I Not Require	d (If the "Required" box is checked, please answer the folio is checked, the following questions are not required and ar	wing
If yes, please state when and what co	or ordered by a representation	tive of any government to leave the U.S. or any other country? 🗋 y	es 🔲 no
Is this occupant a U.S. citizen?	ves 🗀 no		
Approximately how long has this o	ccupant been In the United	States? Years Months	
Place of Birth		ountries of which occupant is a citizen (list all);	
Please check the U.S. Citizenship a	and Immigration Services (U	SCIS) document that entitles the occupant to be in the United State	
☐ Form I-551 Permanent Resident C	ard [Alien Registration Recein	t Card] (form includes photo and fingerprint). Card Number:	
☐ Form I-766 Employment Authorization	on Document (form includes pho	oto and fingerprint). Expiration Date: Card Number:	
☐ Form I-94 Global Entry Form (form	does not include photo or fing	perprint). Expiration Date: Form Number:	
☐ USCIS receipt for replacement of o	one of the above documents, v	with verification by USCIS of your entitlement above	
If relying on Form I-94, we will ask	to see occupant's passport :	and visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date:			
Visa Expiration Date:	☐ no If yes, what type? ☐ s	tudent 🗋 work 🗋 visitor 🔲 other (specify):	
	of any of the USCIS decume	nts checked above and, if needed, occupant's passport and visa.	
may can to make a photocopy (	any or the oscis documer	ns checked above and, it needed, occupant's passport and visa.	
F. 11 M.			
Full Name		Relationship	
Dete of Birth	Social Security #		
			State
Date of Birth		Driver's License #	State
Government Photo ID card #			State
Government Photo ID card #	·	Туре	State
Government Photo ID card # Servicemember Status: Are you an a	active-duty servicemember as	Type  defined in Florida Statute § 250.01?  yes  no	. d
Government Photo ID card # Servicemember Status: Are you an a	active-duty servicemember as	Type  defined in Florida Statute § 250.01?  yes  no	. d
Government Photo ID card # Servicemember Status: Are you an a Supplemental Questions questions if this occupant is no Has this occupant ever been asked	active-duty servicemember as Required	Type  defined in Florida Statute § 250.01? ☐ yes ☐ no  d (if the "Required" box is checked, please answer the following questions are not required and are	wing
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OTHER OCCUPANTS (continued		S. F. N. P. Wells	P715.2	V-
Please check the U.S. Citizenship and Ir	nmigration Services (US	CIS) document that er	titles the occupant to	be in the United States:
☐ Form I-551 Permanent Resident Card [/	Alien Registration Receipt (	Cardl (form includes ph	oto and fingernrint). Ca	ard Number:
☐ Form I-766 Employment Authorization Do	cument (form includes photo	and fingerprint), Expirat	ion Date:	Card Number:
Form I-94 Global Entry Form (form does	s not include photo or finge	rprint), Expiration Date:	F	orm Number:
USCIS receipt for replacement of one of	f the above documents, wit	th verification by USCIS	of your entitlement ab	ove
If relying on Form I-94, we will ask to see	e occupant's passport ar			estions below.
Expiration Date:				
Does occupant have a visa? ☐ yes ☐ n Visa Expiration Date:	o if yes, what type? I stu	udent 🔲 work 🔲 visii	or 🔲 other (specify)	
We may ask to make a photocopy of any	of the USCIS document	s charked shows and	if monday and and	
RESIDENCY INFORMATION			п повиви, оссирать	s passport and visa.
Current Home Address (where you live no	ow)			Po vou □ vent e
City		State	Zip Code	Do you ☐ rent o ☐ own?
Dates:			\$	
From	То		Monthly	Payment
Apartment Name				
Landlord/Lender Name			Phone	
Pennan faul ac				
Reason for Leaving				
(The following is only applicable if at curren.	t address for less than 6 m	nonths.)		
Previous Home Address				
City		State	7: 0.1	Do you ☐ rent or ☐ own?
Dates:		State	Zip Code	□ own:
From	То		Monthly I	Payment
Apartment Name				
Landlord/Lender Name			Discourse	
			Phone	
Reason for Leaving				
EMPLOYMENT INFORMATION	A September 1			
	****			THE SHARE STATES
Present Employer		Address		
City		State	Zip Code	Work Phone
Dates;			s	WOLK FILDING
From	То		Gross Mo	nthly Income
Position				
Supervisor Name				
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	employer for less than 6 ff	ionins.)		
Previous Employer		Address		
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Dates:			\$	Trank Theme
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Position				
Supervisor Name			Phon	e
ADDITIONAL INCOME				
(Income must be verified to be considered)	THE ST AND STREET, MANY NAMED IN	STM TO	W 100 7 200 100 200 200 200 200 200 200 200 200	1,350) 6,7-35
Туре	Source		\$	
			Gross Monthly	Amount
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CREDIT HISTORY (if applicable)	1000			
f applicable, please explain any past credit p	roblem:			

DENTAL (ODINAL)		T H Marks	
RENTAL/CRIMINAL HISTORY (Check only if applicable)			15. PECC
Have you or any occupant listed in this Applic	cation ever:		
been evicted or asked to move out?     moved out of a dwelling before the end of declared bankruptcy?     been sued for rent?     been sued for property damage?     been convicted (or received an alternative)	ve form of adjudication equiva		felony, misdemeanor involving a controlled substance,
Please indicate the year, location and type of	of property, or a sex crime? of each felony, misdemeanor i ed by dismissal or acquittal, W	nyolving a controlled o	ubstance, violence to another person or destruction of more facts before making a decision. You represent the
REFERRAL INFORMATION			
How did you find us?  Online search. Website address:			
Referral from a person, Name:  Social Media, Which one?			
Other			
EMERGENCY CONTACT			
Emergency contact person over 18, who will r	not be living with you:		2000
Name		Relationship	
Address		City	
State Zip Code	Home Phone #		Cell Phone #
Work Phone #	Email Address		
VEHICLE INFORMATION (if applical	hlal	A.L	
List all vehicles owned or operated by you or any		s, motorcycles, trailers, et	(c.).
	-		,-
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
			Oldio
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
PET INFORMATION (if applicable)			
You may not have any animal in your unit witho animal addendum, which may require additions	out management's prior authori al deposits, rents, fees or other	zation in writing. If we a	llow your requested animal, you must sign a separate
Name	Tuno		
Gender	Type		Breed
OVINGO	Weight Assistance Animal Status:	Dives Dino	Color
Age		_,	
Name	Туре		
Gender	Weight		Breed
	Assistance Animal Status: [	⊒yes ⊒no	Color
Age			

#### **APPLICATION AGREEMENT**

The following Application Agreement will be signed by you and all co-applicants prior to signing a Lease Contract. While some of the information below may not yet apply to your situation, there are some provisions that may become applicable prior to signing a Lease Contract. In order to continue with this application, you'll need to review the Application Agreement carefully and acknowledge that you accept its terms.

- Lease Contract Information. The Lease Contract contemplated by the parties will be the current Lease Contract. Special information and conditions
  must be explicitly noted on the Lease Contract.
- 2. Approval When Lease Contract Is Signed in Advance. If you and all co-applicants have already signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease Contract, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 3. Approval When Lease Contract Isn't Yet Signed. If you and all co-applicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease Contract when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 4. If you Fail to Sign Lease Contract After Approval. Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
- 5. If You Withdraw Before Approval. If you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.
- 6. Approval/Non-Approval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail, or by e-mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.
- 7. Refund after Non-Approval. If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
- 8. Extension of Deadlines. If the deadline for signing, approving, or refunding under paragraphs 4, 6, or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
- 9. Keys or Access Devices. We'll furnish keys and/or access devices only after: (1) all parties have signed the Lease Contract and other rental documents; and (2) all applicable rents and security deposits have been paid in full.
- 10. Service-member Status: If you or any co-applicant are an active-duty service-member as defined in Florida Statutes § 250.01, we will provide you with a written approval or denial of the application within seven (7) days after submission and, if denied, the reason for denial.
- 11. Application Submission. Submission of a rental application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease Contract.

#### **DISCLOSURES**

- Application Fee (Non-Refundable). You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph
   Payment of the application fee does not guarantee that your application will be accepted. The application fee partially defrays the cost of administrative paperwork. It is non-refundable.
- 2. Application Deposit (may or may not be refundable). In addition to any application fee(s), you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed; OR, it will be refunded under paragraph 7 of the Application Agreement if your application is not approved; OR, it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraphs 4 or 5 of the Application Agreement.
- 3. Fees Due. Your Rental Application will not be processed until we receive your completed Rental Application (and the completed Rental Application of all co-applicants, if applicable) and the following fees:
  - Application fee (non-refundable): \$ 85.00
  - 2. Application deposit (may or may not be refundable): \$ 500.00
- 4. Completed Application. Your Rental Application for Residents and Occupants will not be considered "completed" and will not be processed until we receive the following documentation and fees:
  - Your completed Rental Application;
  - 2, Completed Rental Applications for each co-applicant (if applicable);
  - 3. Application fees for all applicants;
  - Application deposit for the Unit.
- 5. Notice to or from Co-Applicants. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
- 6. SHIP Disclosure Statement. If this property or you are a tenant who may be receiving funds from the Florida State Housing Initiatives Partnership program (SHIP), then this application is subject to the Florida's public records laws, Chapter 119, Florida Statutes. Most of the information that you provide may be required to be released if there is a public records request. If you believe that you qualify to have your information protected, you must notify us in writing of the specific law or statute that protects your information. All non-exempt information will be released in response to a public records request.

SPECIAL PROVISIONS	
	NATURE T

AUTHORIZATION AND ACKNOWLEDGMENT	
AUTHORIZATION   authorize Gulfstream DB LLC	
(name of owner/agent) to obtain reports from any consumer or criminal record reporting agencies before, du lease by the above owner to me and to verify, by all available means, the information in this application, incl history and other information reported by employer(s) to any state employment security agency. Work histor Application. Authority to obtain work history information expires 365 days from the date of this Application.  Payment Authorization I authorize Gulfstream DB LLC	uding criminal background information in
(name of owner/agent) to collect payment of the application fee and application deposit in the amounts speci.  Non-Sufficient Funds and Dishonored Payments.  If a check from an applicant is returned to us by a bank or other entity for any reason, if any credit card or debor if we are unable, through no fault of our own or our bank, to successfully process any ACH debit, credit card of the control of the cont	it cord payment from anylingth to us is selected
ACKNOWLEDGMENT You declare that all your statements in this Application are true and complete. You authorize us to verify the sar question(s) or give false information, we may reject the application, retain all application fees and deposits as and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits rel prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any tagencies and other rental housing owners regarding your performance of your legal obligations, including bot your compliance with the Lease Contract, the rules, and financial obligations.	liquidated damages for our time and expense, ating to the application or Lease Contract, the
Appilcant's Signature Date	
FOR OFFICE USE ONLY	
Apt. name or dwelling address (street, city)	Unit # or type
Person accepting application	Phone
Person processing application	Phone
Applicant or Co-applicant was notified by \( \begin{array}{cccccccccccccccccccccccccccccccccccc	☐ acceptance or ☐ non-acceptance on
(Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in per Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):	rson or by telephone, five days if by mail.)
Name(s)	
Name of owner's representative who notified above person(s)	
ADDITIONAL COMMENTS	<b>(X)</b>

#### General Instructions:

This form is to be complete by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing & Urban Development. Owner & agents are required to offer the applicant/tenant the option to complete this form. This form is to be completed at initial application or at lease signing. In-Place tenants must also be offered the opportunity to complete the form as part of their next interim or annual recertification. Once the form is completed it need not be completed again unless the Head of Household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner/agent may place a note in the file stating that the applicant/tenant refused to complete the form. Parent/Guardians are to complete the form for children under the age of 18.

The Office of Housing as been issued permission to use this form to gather race & ethnic data in assisted housing programs. Completed documents for the entire household should be filed together & placed in the Household's file.

	Use: House	PART XI - STATIS  hold elected not to participate.	VALUE IN THE			
New Households		The state of the participate.				
Prior Housing Informati	on					
(Answer for household hea	d)					
Monthly rent payment	_					
Monthly house payment	_					
ZIP Code	_					
All Households					usehold Information	
Current Employment (Answer for household head)		Primary Transportation Mode (Answer for household head)		A member of the (Check all that A		
Occupation		Motor vehicle		Receives Medic	• //	
ZIP Code		Public				-
211 0000		transportation		Receives Medic Is a Person With		
		Other	<del></del>	*		
Total Carlotte			Tota	I Number of	Total Number of	
Racial Categories* (Selec	t All That Apply		House	hold Members	Hispanic or Latine	
American Indian or Alaska			Pe	r Category	Household Members	
Asian	1400140					
Black or African American						
Native Hawaiian or Other		0.5				
White	racine Island	ei .				
American Indian or Alaska	Mating	MIN -				
	inative and v	v nite				
Asian and White						
Black or African American						
American Indian or Alaska		Black or African American				
Asian and Black or African Other mutiple race combin						
Major Life Activities Hispanic or Latino Not-Hispanic or Latino	workir A pers regard A pers	son of Cuban, Mexican, Puerto Rica dless of race. The term "Spanish or son not of Cuban, Mexican, Puerto F	, concentrating, i in, South or Ceni igin" can be used	eading, interact tral American, or t in addition to "	ing with others, learning, sleepir other Spanish culture or origin,	ng and ,
merican Indian r Alaska Native	A pers who m A pers	illess of race, son having origins in any of the origi naintains tribal affiliation or commun son having origins in any of the origi ample, Cambodla, China, India, Jap im.	ity attachment, nal neonles of th	e Far Fast Sou	theast Asia, or the Indian author	41
lack or African American	A pers	son having origins in any of the black	racial groups of	Africa. A		
ative Hawaiian	A pers	uch as "Haitian" can be used in addi son having origins in any of the origin	ition to "Black" or nal peoples of H	"African Americ awaii. Guam Sa	an."	
r Other Pacific Islander	Pacific	: Islands,				
/hite	North .	on having origins in any of the origin Africa.	nai peoples of El	rope, the Middl	e cast or	
oluntary. ITUD may not collect the formation is authorized by the U. evelopment Technical Amendment cording the 50059 Data Requirer plication interview or lease signi wher/agent to collect the needed it usehold's file. Parents or guardic propriate system upgrades have	is information, S. Housing Act nuts of 1984. Th nents to HUD. ng. In-place ter nformation on a ans are to comp	nated to average 10 minutes per responseded, and completing and reviewing the and you are to required to complete this tof 1937 as amended, the Housing and its information is needed to be in compl. Owners/agents must offer the opportuniants must complete the format as part all members of the household. Complete the self-certification for children unted, owners/agents will be required to rinformation is considered non-sensitive	collection of infor s form, unless it d Urban Rural Reco- iance with OMB ity to the head and of their next interined documents show near the age of 18	mation. This info isplays a currently very Act of 1983 nandated changes I co-head of each n or annual recert ild be filed togeth. Once system dev	rmation is required to obtain benefy valid OMB control number. This and housing and Community to Ethnicity and Race categories for household to "self certify" during to ification. This process will allow the er for each household and place in relopment funds are provided and	its and or the
					ning below certify that I	[/W≏
The state of the s		on listed above			G voice voicing that I	. ,,,
We, Have provided the						
Have provided the Elected not to prov	ide the int	formation listed above				
Have provided the Elected not to prov	ide the int		ıy knowledg	e.		
Have provided the Elected not to prov	ide the int	formation listed above	ıy knowledg	e.		
Have provided the Elected not to prov	ide the int	formation listed above	ıy knowledg	e.		



## MARITAL & ESTRANGEMENT DECLARATION

Sworn Declaration of Marital Status and Declaration of Estrangement Addendum to the Application

Property Name: Gulfstream Apartment

Property Name:Guiis	stream Apartment	
Please complete either "A",	"B", "C", "D" or "E" below as appropriate regarding	your marital status:
PART A:		
I	distribution of the transfer	1.0
attached a copy of my divorce decree	, duly state that I am currently legally separat, current legal separation agreement, or letter from my	ed from my spouse and have / attorney.
PART B:		
Ţ		
any legal action regarding my marital	_, duly state that I am currently separated from my status. I hereby state that the following conditions at	spouse but have NOT taken pply:
MY REASONS FOR NOT PURSUIN	NG LEGAL ACTION ARE AS FOLLOWS:	
For example: restraining order, fear of reta	liation, incarceration, religious beliefs, or other reason expla	iined.
If separated but not divorced, for the l. I am separated and estrange	ne above reason, please read and complete the estra d from my spouse	angement section below:
Full Name of Estranged Spouse:		=
I further certify that I do not intend 2. If reconciliation occurs, my sp at lease twelve months have else	I to reconcile with my spouse.  Ouse will not be permitted to reside with me in the above - apsed since the beginning of the initial lease term.	referenced development, unless
3. If reconciliation occurs prior to with me in the above – reference	expiration of the twelve – months time frame cited above, ced development, our entire household must re – qualify as a	and my spouse wishes to reside a new household.
in the next 12 months.  I have children with my next 12 months and I have	w to address potential child support for the next 12 separated spouse and <u>I do not</u> anticipate filing for or separated spouse and <u>I do</u> anticipate filing for or receive attached verification of the anticipated child suith my separated spouse and will not be receiving any	receiving child support
PART C:		
I,,	duly state that I am widow/widower	
PART D:		
I,,	have never been married.	
PART E:		
I,, and my sp	ouse, will both reside in the above	ve referenced development.
PRIOR approval with management. Under penalty of perjury, I certify that the	ving situation. This includes, but is not limited to, change I will not allow my spouse or any other individual to me information presented in this declaration is true and accurate providing false representations herein constitutes and act	ove into my residence, without
Signature of Applicant/Resident	Printed Name of Applicant/Resident	Date
Signature of Applicant/Resident	Printed Name of Applicant/Resident	Date

# Applicant Addendum Questionnaire Applicant Name:

YES	<u>NO</u>	
o	o	1. Do you have full custody of your child(ren)? (If no, obtain proof of amount of time child{ren} will be living in unit.)
		Explanation:
o	٥	2. Are there any absent household members who under normal conditions would live with you? (For example, a spouse away in the military or child away in school.)
		Explanation:
o	0	3. Do you expect any changes to your household composition in the next 12 months?  Explanation:

#### **Income Information**

Income is counted for anyone 18 or older (unless legally emancipated). However, if the income is unearned income such as a grant or benefit, it is counted for all household members including minors.

Include all income anticipated for the next 12 months.

Do YOU receive OR expect to receive income from any of the following sources?

YES o	<u>NO</u> o	4.	Employment wages or salaries? (Inc.	lude overtime, tips, bonuses, commissi	ions and payments received in cash
			Company Name:	Address:	Monthly Gross Amount
			Telephone Number	Fax Number	HR Contact Name
0	o	5.	Self-employment? (Include overtime, tip: Type of Business	s, honuses, commissions and payments <u>NET Income</u>	received in cash.)
0	o	6.	Regular pay as a member of the Ar	med Forces/Military? <u>Gross Amount</u>	
0	o	7.	Unemployment benefits? Or works	man's compensation?  Workman's Compensation	
o	O	8.	Public Assistance, General Relief, A (TANF)? Type of Assistance	AFDC or Temporary Assistan	nce for Needy Families
o	0	9.	(a) Child support? (We must count count-ordered support we must also count support that is not continued to the count support of the count support that is not continued to the count support of the c	whether is received or not unless legal ourt-ordered rather received directly J <u>Pavor</u>	action has been taken to remedy. Fom payor.) <u>Amount</u>
		3			
o	o		(b) Alimony? If yes, Name of Payor and	d Amount	+
o If yes, obta paper			(c) If support/allmony is court-ordered b  Explanation:	ut not actually received, are you taki	ing legal action to remedy?
o	0	10.	Social Security, SSI or any other pa	yments from the Social Secur	rity Administration?

			Regular payments from a Veter	Source of Benefit	Monthly Amount
0	o	12.	Regular payments from a sever	ance package? Amount	
o	0	13.	Regular payments from any typ	oe of settlement? (For example, in Amount	surance settlements.)
o	o	14.	Regular gifts or payments from Source of Payment	anyone outside of the househ Monthly Amount	old?
O	0	15.	Regular payments from lottery Source of Payment	winnings or inheritances?	
o	o	16.	Regular payments from rental p	property or other types of Res Amount	ıl Estate transactions?
0	o	17.	Any other income sources or type Source of Payment	nes not listed? (Please include belo	vw)
o	o	18.	Do you expect any changes to you	our income in the next 12 mon	ths?
you D	OO NOT	recei	ent, please add your initials l	the sources listed above	
you D come a	OO NOT	recei /reside	ve any income from any of ent, please add your initials l	the sources listed above here	and you are a Zero
you D come a	OO NOT	recei /reside	ve any income from any of ent, please add your initials l  Asset Info	the sources listed above here rmation SSETS HELD BY ALL HOUSEHOLE	and you are a Zero
you D come a	OO NOT	recei /reside	ve any income from any of ent, please add your initials l	the sources listed above here rmation SSETS HELD BY ALL HOUSEHOLE	and you are a Zero
you Decome a	OO NOT pplicant/	recei /reside	ve any income from any of ent, please add your initials l  Asset Info	the sources listed above here rmation SSETS HELD BY ALL HOUSEHOLE hold:	and you are a Zero  Description of the second of the secon
you Decome a	PO NOT pplicant/	recei/reside	Explanation:  We any income from any of ent, please add your initials leader to the derived from the asset. INCLUDE ALL A  Do YOU  Checking or savings account? (C	the sources listed above here  rmation  SSETS HELD BY ALL HOUSEHOLE hold: hecking must have last 6 months ave Financial Institute	and you are a Zero  Description of the state
you E come approximately come approximately come approximately compared to the	PO NOT pplicant/ sets held and  NO 0	receif reside the incom	e derived from the asset. INCLUDE ALL A  Do YOU  Checking or savings account? (C  Type of Account	the sources listed above here  rmation  SSETS HELD BY ALL HOUSEHOLE hold: hecking must have last 6 months ave Financial Institute  treasury bills?	and you are a Zero  MEMBERS INCLUDING  rage balance, saving current)  Amount AND Interest Rat

Yes

 $\underline{\mathbf{NO}}$ 

Yes	No				
0	o	23.	Pensions, IRAs, Keogh or other Type of Account	retirement accounts? Financial Institute	Amount
o	o	24.	Whole life insurance policy? Insurance Carrier	Telephone Number	Amount
0	٥	25.	Real estate, rental property, land holdings? (This includes your personal residence, mo		
o	٥	26.	Personal property held as an inv (This includes paintings, coin or stamp coll include your personal helongings such as y Item	ections, artwork, collector or show cars,	and antiques. This does not
o	o	27.	A safe deposit boxes?  Financial Institute	Amount	
0	0	100			
o	0	28. 29.	Do you have any cash on hand?		51
			Have you or any other household LESS than fair market value wit	hin the past 2 years?	away any asset(s) for
			Household Member:	Amount:	
			Explanation:		
			Student Status I	information:	
0	0	30.	Are you or anyone in your housel recent class schedule including the words " Household Member	hold a full-time student? (if yes, Full Time") Educational Institute	please provide a copy of the most
					-
o	0	31.	Are you or anyone in your house recent class schedule including the words ". Household Member	hold a part time student? (if yes, Part Time") <u>Financial Institute</u>	please provide a copy of the most
T FV		79	C:		15171 30 30
determine my cunderstand that I authorize my occupancy. I v	eligibility. I ut t such action: consent to ha will provide a quired for exp	inderstan may resu ive mana il necessa editing th	signature of signature of the provest of the best of the providing talse information or making it in criminal penalties.  gement verify the information contained in the rry information including source names, addrais process. I understand that my occupancy is s.  Please sign and of	d's eligibility for the Housing Credit Pro of my knowledge. I consent to release the false statements may be grounds for den is application addendum for purposes of esses, phone numbers, account numbers is contingent on meeting management's i	e necessary information to ial of my application. I also
Printed Na	me			Date	
C'i ann a t					
Signature					



## **Application Documents Required**

We value your time and interest, in order to process your application please bring in the following documents, as applicable to your household. All documents must be current (with in the past 90 days) and in English. If documents are in any other language, verification must be obtained.

Please bring the following documents when applying:						
	<b>Government Issued Identification</b>					
	Social Security card					
	Marriage certificate (if applicable)					
	Proof	of income (as applicable):				
		Employment - last 8 consecutive paystubs				
		Social Security Benefits - Award letter, Disability letter, or pension letter required				
		<b>Self-employment</b> - Accountant Profit/Loss statement required along with 2 years of fixed income tax returns				
		Child Support – Court order and 1 year of payment history				
	Asset	Verification:				
		Checking Accounts - Last 6 statements (6 months)				
		Savings account – Most recent bank statement (1 month)				
		Real Estate - Documentation of any real estate				
	П	transactions in the past 24 months  Patiroment Assount Current Varification of Value of				
		Retirement Account – Current Verification of Value of account (401k/IRA/403B, etc)				





## **Application Documents Required**

Valoramos su tiempo e interés, para procesar su solicitud, traiga los siguientes documentos, según corresponda a su hogar. Todos los documentos deben estar actualizados (en los últimos 90 días) y en inglés. Si los documentos están en cualquier otro idioma, se debe obtener la verificación en ingles.

Por favor traiga los siguientes documentos al devolver la solicitud:

Identificación emitida por el gobierno					
Tarjeta de Seguro Social					
Certificado de matrimonio (si corresponde)					
Comprobante de ingresos (según corresponda):  Empleo: últimos 8 recibos de pago consecutivos					
Beneficios del Seguro Social: se requiere una carta de adjudicación monetaria, una carta de discapacidad o una carta de pension					
☐ <b>Trabajo por cuenta propia</b> : se requiere un estado de pérdidas y ganancias del contador junto con 2 años de declaraciones de impuestos sobre ingresos fijos					
☐ <b>Manutención de los hijos</b> : orden judicial y 1 año de historial de pagos					
Verificación de activos:					
<ul> <li>Cuentas de cheques - Últimos 6 estados de cuenta (6 meses)</li> </ul>					
Cuenta de ahorros: estado de cuenta bancario más reciente (1 mes)					
Bienes Raíces - Documentación de cualquier transacción de bienes raíces en los últimos 24 meses					
Cuenta de jubilación - Verificación actual del valor de la cuenta (401k/IRA/403B, etc.)					

