

Kodiak Island Housing Authority

3137 Mill Bay Road, Kodiak, AK 99615 www.kodiakislandhousing.com Phone: 907-486-8111 Fax: 907-486-4432 Origination License #280607 Mortgage License #287823

Documents needed for Steller Heights Tri-Plex rental application:

Social Security Cards for all household members Legible picture ID for all adult applicants Pay stubs or earning statement for all working household members covering the past 45 days 2 months checking/savings statements or account transaction history Employment Verification – Hire Letter \$50.00 application fee (for credit report)

Applicant's Name (print legibly): _____





KIHA Use Only: Date & time signed application received by KIHA: Date: ______ Time: _____

Steller Heights APPLICATION PACKET

<u>Non-refundable application fee: \$50.00</u> <u>Smoke-Free and Pet-Free Campus</u>

INSTRUCTIONS: COMPLETE & RETURN THIS ENTIRE APPLICATION PACKET WITH YOUR \$50.00 APPLICATION FEE. DELIVER, FAX OR MAIL YOUR COMPLETED PACKET (including this page) TO: KODIAK ISLAND HOUSING AUTHORITY

Attn: Housing Advocate 3137 MILL BAY ROAD KODIAK, AK 99615

Telephone: (907) 486-8111

Fax: (907) 486-4432

Email: info@kiha.org

Office Hours: 8:00 AM – 12:00 PM & 1:00 PM – 4:30 PM | Monday – Friday (Except Holidays) (Closed 12:00 – 1:00 for lunch)

All vacancies are filled from a waiting list that is update regularly. Applicants must pass the admission criteria. References are required. A \$500.00 security deposit and first month's rent will be required prior to or at the time of move-in. Apartments are not furnished. No pets are allowed.

<u>Steller Heights Tri-Plex</u> Tri-Plex in Kodiak, AK. Heat, water, sewer, and garbage are included. Tenant pays for electricity and all else.

I am applying for the following apartment: select the apartment size(s) you desire. Rents take effect 1st of the month and include City Sales Tax. Please provide KIHA with a copy of your City of Kodiak sales tax exemption card if you are to be the head of household and are a Senior Citizen aged 65 or older.

____ 1 Bedroom (\$1400 includes City Sales Tax)

_____ 3 Bedroom (\$2500 includes City Sales Tax)





Security Deposit

A security deposit shall be collected from each tenant family, which is to be held on account until time of move-out as security against damages to the dwelling or unpaid rent. All security deposits are due and payable prior to occupancy, unless unusual circumstances warrant a payment plan, subject to KIHA approval. The security deposit shall be \$500.00.

RENTS

All rents are due and payable on the first day of each month. A late fee of \$50.00 for rent not paid by the 5th of each month. NSF Fee \$30.00 Tenants who are tax exempt will not be charged tax on their rent.

Online Payment Option

Visit our website for step-by-step instructions. <u>www.kodiakislandhousing.com</u> > Current Tenants > Make Payment





BRIEF STATEMENT OF STELLER HEIGHTS TRI-PLEX POLICY

- 1. Kodiak Island Housing Authority (KIHA) is an Equal Opportunity Housing provider. We do not discriminate against any person because of race, religion, sex, disability, familial status, or nation origin. KIHA complies with the Federal Fair Housing Act and all State and Local Fair Housing Laws.
- 2. Wait List: KIHA will maintain wait lists of applicants based on number of bedrooms. Apartments are offered as they become available. The Wait List is updated regularly. Failure to respond to a request for updated information may cause your name to be dropped from the Wait List.
- 3. **Occupancy Guidelines:** KIHA may restrict the number of people who may reside in an apartment. In determining these restrictions, we adhere to all applicable Fair Housing Laws.
- 4. Application Process: KIHA's Housing Advocate will conduct a preliminary evaluation of your completed rental housing application. KIHA will notify you in writing of a preliminary acceptance or denial of your application. If accepted, your name will be placed on a wait list based on the date and time your application was received by KIHA. Preliminary acceptance of your application only establishes a placement on our wait list and does not guarantee that we will offer an apartment to you.
- 5. **Qualified Applicant:** The initial determination of eligibility is based upon the following factors:
 - a. Criminal background check
 - b. Number of persons in the family (occupancy standards)
 - c. Credit report
 - d. Deemed as an Essential Worker to the Community

Additional information required for admission:

- Current probation status or a criminal history may cause your application to be denied. Failure to disclose such information will cause your application to be denied.
- Disclosure If you fail to fully disclose requested information, or if you deliberately misrepresent your situation, your application will be denied.
- Rental history/homeownership history You must have satisfactory rental references or documentation of credit worthiness.
- 6. Admission Criteria: KIHA will notify you either verbally or in writing when an apartment is expected to be available. We will require a face-to-face meeting, payment of the \$500.00 security deposit & the first month's rent prior to move-in. If applicable, you will also be required to show proof of establishment of the electricity account connection with Kodiak Electric Association.





KODIAK ISLAND HOUSING AUTHORITY APPLICATION FOR HOUSING

STELLER HEIGHTS TRI-PLEX

Instructions: Please print legible. Complete all information or indicate N/A if it does not apply. Failure to provide information may cause your application to be delayed or denied.

Applicant Information (Head of Household):

Full legal name:		
Sex: M F Social Security	· #:	Date of Birth:
Current mailing address:		
Current physical residence address:	:	
Daytime phone #:	Cell phone:	Work phone:
Name of current employer:		
Employer's phone number:		
Current landlord name:		
Current landlord telephone number:		
Name of your nearest living relative		
Telephone number of relative name	d above:	
List other names you have used in t	he past 10 years, including	nicknames:

Co-Applicant Information:

Full legal name:		
Sex: M F Social Security	#:	Date of Birth:
Current mailing address:		
Current physical residence address:		
Daytime phone #:	Cell phone:	Work phone:
Name of current employer:		
Employer's phone number:		
Current landlord name:		
Current landlord telephone number:		
Name of your nearest living relative:		
Telephone number of relative named	above:	
List other names you have used in th	e past 10 years, including	nicknames:





Have you or a member of your household ever been arrested, charged, or convicted of any crime other than a traffic violation? _____ YES _____ NO If yes, please explain the date and type of arrest and/or conviction: ______

Have you or a	member of yo	our household been evicted or had a lease terminated?	
YES	NO		
If yes, please e	explain when an	id why:	

Do you or a member of your household owe money to a current or past landlord, including any other Housing Agency or Housing Authority?

___YES _____NO

If yes, please state to whom you owe and explain: _____

Does anyone in your household have a disability that requires a unit with handicap accessibility features? _____YES ____NO

If yes, what features do you require?

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Do you have a relationship with any Kodiak Island Housing Authority employee?

____ No Relationship ____ Associated ____ Close Relative ____ Employee ____ Family

CERTIFICATION, CONSENT AND AUTHORIZATION:

I certify that the above information is true and correct. I understand that my current and former landlords and references will be contacted. I authorize Kodiak Island Housing Authority to obtain a credit report or other form of verification regarding the information I have provided. I consent to and authorize Kodiak Island Housing Authority to verify any and all information provided here.

I agree that Kodiak Island Housing Authority may terminate any agreement with me, including an application and/or a lease agreement, if I have made a false statement or am aware of a false statement in this application. I authorize a photocopy of my signature below to be used and accepted as though it were an original signature.

Applicant's Signature:	
Printed name of applicant:	Date signed:
Co-applicant signature:	
Printed name of applicant:	Date signed:

Kodiak Island Housing Authority does not discriminate against any person because of race, religion, sex, disability, familial status, or nation origin. We do business in accordance with the Federal Fair Housing Law. If you believe you have been discriminated against, you may contact the Fair Housing and Equal Opportunity toll-free hotline at 1-(800) 669-9777 {TTY users: 1-(800) 927-9275}, or online at www.hud.gov.





List all other	people who will	live in the	apartment with y	you. Print legibly:

First & last name	Date of Birth	Sex: M or F	Social Security Number	Relationship to the Head of Household

Applicant & co-applicant: Provide the following information regarding your previous
addresses and landlord. Begin with your last address & go back 3 years. Use additional
paper if necessary:

Dates of occupancy: From	to	Did you: Ow	/n	Rent
Address of property including city & State:		-		
Name of landlord or Mortgage servicer:				
Telephone number including area code:				
What was your name when you lived here				
Dates of occupancy: From	to	Did you: Ow	'n	Rent
Address of property including city & State:				
Name of landlord or Mortgage servicer:				
Telephone number including area code:				
What was your name when you lived here				
Dates of occupancy: From	to	Did you: Ow	'n	Rent
Address of property including city & State:				
Name of landlord or Mortgage servicer:				
Telephone number including area code:				
What was your name when you lived here				

Personal References for applicant: Provide the names and contact information for 3 people who can provide a personal reference for you:

Name:	Phone:
Complete Address:	
Relationship to me:	
Name:	Phone:
Complete Address:	
Relationship to me:	
Name:	Phone:
Complete Address:	
Relationship to me: _	





PRIVACY POLICY

We collect non-public personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us or others; and
- Information we receive from others, such as a consumer reporting agency, court records, and employers

We do not disclose non-public personal information about you to anyone, except as authorized by you or permitted by law.

If you decide to close your account(s) or become an inactive client, we will adhere to the privacy policies and practices as described in this notice.

To maintain security of client information, we restrict access to your person and account information to those employees who need to know that information to provide you with our products and/or services. We maintain physical, electronic, and procedural safeguards that comply with federal standards to guard your non-public personal information.

Your confidence in us is important and we want you to know that your personal and account information is safe. If you have any questions or concerns, please contact us:

Kodiak Island Housing Authority 3137 Mill Bay Road Kodiak, AK 99615 Telephone: (907) 486-8111 or Toll Free: 1-(800) 478-5442 www.kodiakislandhousing.com

I/we have received a copy of this Privacy Policy.

Dated:

To: All Kodiak Island Housing Authority Customers