



KOLOPUA APARTMENTS

5-4344 KUHIO HIGHWAY, PRINCEVILLE, HI 96722
TELEPHONE (808) 445-9032 FAX (808) 445-9032 TDD (877) 447-5991
EMAIL: ko-management@eahhousing.org

Creating community by developing, managing and promoting quality affordable housing since 1968.

Aloha Applicant:

We would like to thank you for your interest in Kolopua Apartments. Our goal is to provide quality affordable housing for the people of Hawaii in accordance with the Low Income Housing Tax Credit program and the HUD HOME program.

Enclosed you will find an Information Sheet, Resident Selection Plan, an Application for Housing, a Criminal Background and Consumer Credit Report Authorization Form, and a supplement to the Kolopua Apartments application. **We ask that you take a few moments to review all documents before you start to fill out the application.** The information contained therein should answer most questions you may have. If you have questions or are not sure what information to provide, please call our office and ask for assistance.

Completed applications will be date and time stamped when they are received, and will be processed on a first come, first served basis. Incomplete applications will not be processed and will be returned to you.

It is imperative that you provide all of the information asked for on the application to help avoid unnecessary delays in processing. Please note that simply completing an application does not guarantee that you will be placed on the wait list.

You will receive a written response in the mail from our management staff to advise you of the status of your application.

Once again, thank you for your interest in Kolopua Apartments. If you have any questions, please don't hesitate to give us a call.

Sincerely,

EAH Housing
Management Agent, Kolopua Apartments

Applications will be accepted at

Kolopua Apartments
5-4344 Kuhio Highway
Princeville, HI 96722



EAH is an "Equal Opportunity" housing provider and does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.





KOLOPUA APARTMENTS

5-4344 KUHIO HIGHWAY, PRINCEVILLE, HI 96722
TELEPHONE (808) 445-9032 FAX (808) 445-9032 TDD (877) 447-5991
EMAIL: ko-management@eahhousing.org

Creating community by developing, managing and promoting quality affordable housing since 1968.

Information Sheet – Kolopua Apartments

| | |
|---|--|
| <u>Location:</u> | 5-4344 Kuhio Highway, Princeville, HI 96722 |
| <u>Date of Opening:</u> | Now Open |
| <u>Number of units:</u> | 44 multifamily units consisting of 1, 2 and 3 bedroom units. |
| <u>Income Limits for Applicants:</u> | Maximum annual household income must not exceed 60% of the Area Median Income. |
| <u>Handicapped/Disabled Applicants:</u> | Accessible units serving persons with mobility and/or sensory impairments are available. |
| <u>Security Deposit:</u> | A security deposit equivalent to one month's rent is required. |

QUALIFICATION

Kolopua Apartments, a workforce housing property, is financed using a combination of Internal Revenue Service Low Income Housing Tax Credits (LIHTC) and the HOME Investment Partnerships Program made available through the U.S. Department of Housing and Urban Development. The property income limits are 50%, and 60% of the area median income, adjusted by household size, for Kauai. The Area Median Income limits, published annually by HUD, will be used to determine if a household is eligible to reside at the property.

PREFERENCES

Kolopua Apartments is also subject to Ordinance No. PM-2012-403, relating to Zoning Designation in Princeville Kauai, which states that Residents shall be selected in accordance with the preferences described in the Ordinance. Preference will be given to applicants in the following order:

- 1 Employees of businesses within Princeville Phase I or Phase II;
- 2 Employees who work within the Hanalei Tax Zone (Hanalei, Princeville, Kilauea); and
- 3 Employees who work within the Kawaihau Tax Zone (Anahola, Kealia, Kapaa).

Applicants will need to provide evidence of their preferred status in the form of paystubs or other reasonable proof of employment at the time of application. Applicants with a valid, verified preference will have priority over applicants without a verified preference. Therefore, applicants with a verified preference that are lower on the waiting list will be offered an apartment first to satisfy the preference order as described in Ordinance No. PM-2012-403.

If at any time there is no applicant with a valid and verified preference on the waiting list, then no unit in the Project shall be held vacant awaiting such applicant, but shall be rented promptly to an approved applicant without a preference.

Applicants with a valid and verified preference will be moved to the top of the waiting list above persons without a preference.

The preferences so described will at all times be consistent with the requirements of Section 42 and future interpretations or guidance from the IRS and will not in any way jeopardize the project's eligibility under Section 42 of the Internal Revenue Code.



EAH is an "Equal Opportunity" housing provider and does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.



APPLICATION PROCEDURES / WAIT LIST

Signed and dated applications will be processed on a first-come, first-served basis. The application must be completed and signed by the head of household and all household members 18 years of age and older before it can be placed on the wait list. Incomplete applications will not be accepted. If an application is not completely answered, the date of it being received once fully completed will be the date that the application is considered accepted for rental purposes.

All applicants who submit a completed application will be placed on the wait list based on the unit size selected on the application. It should be noted that being placed on the wait list does not guarantee that you will get an apartment. Applicants with a verified preference that are lower on the waiting list will be screened first to satisfy the preference order as described in Ordinance No. PM-2012-403. Being placed on the wait list only signifies your place in line to have your application reviewed and your income certified when an apartment becomes available.

Selected applicants must be prepared to move into the apartment when notified of their selection. If they are unable to accept the apartment when it is available, they will be moved to the end of the Wait List or removed from the Wait List if it is the second refusal.

RENT STRUCTURE

Rent structure for Kolopua Apartments is as follows:

| Area Median Income % | Unit Size | Square Footage | *Rent | # of Units |
|----------------------|-----------|----------------|-----------------|------------|
| 50 / 60 | 1 | 676 | \$803 / \$943 | 1 / 15 |
| 50 / 60 | 2 | 837 | \$959 / \$1,126 | 1 / 14 |
| 60 | 3 | 1047 | \$1,288 | 12 |

*Rents are subject to change based on utility allowance adjustment and maximum allowable rents as established by HUD

CREDIT SCREENING and CRIMINAL BACKGROUND CHECKS

Applicants will be subject to credit worthiness screening as well as criminal background checks. Other criteria are also considered to determine if an applicant is qualified. A listing of criteria which will be considered and reasons for rejection of applications is contained in Kolopua Apartments Resident Selection Plan.

NON-SMOKING POLICY

Kolopua Apartments is designated as a Non-Smoking property. Smoking will be prohibited in all areas of the property including the interior of apartments, all indoor and outdoor common areas on the property which includes but is not limited to the community center and parking lots and private roadways

Residents are responsible to inform their guests of the Non-Smoking Areas. Residents will not permit the dwelling unit to be used for, or to facilitate, any smoking activity, regardless of whether the individual engaging in such activity is a member of the household or is a guest.

Any violation of the Non-Smoking Policy will be deemed a material breach of the Rental Agreement and grounds for immediate termination of the Lease/Rental Agreement by the Owner.

The Owner's adoption of a Non-Smoking Policy does not make the Owner the guarantor of the Tenant's health or that the Property will be free of smoke but the Owner shall take reasonable steps to enforce this policy.



EAH is an "Equal Opportunity" housing provider and does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.





KOLOPUA APARTMENTS
5-4333 KUHIO HIGHWAY, PRINCEVILLE, HI 96722
TELEPHONE (808)455-9032 FAX: (808)455-9032
TDD (877) 447-5991
ko-management@eahhousing.org

RESIDENT SELECTION PLAN

Kolopua Apartments is a 44 unit, multi-family community in Princeville, HI that provides housing for very low and low income households, without regard to race, color, sex, creed, religion, national origin, physical or mental disability status, familial status, age, ancestry, marital status, source of income, sexual orientation or HIV status.

Kolopua Apartments will make reasonable accommodations to individuals whose disability so requires. Reasonable Accommodation Request forms are available upon request from management. Kolopua Apartments is an Equal Housing Opportunity Housing Facility, admitting people in accordance with Local, State and Federal Housing laws, the Housing Policy for the County of Kauai, the HUD HOME program, and the Low Income Housing Tax Credit (LIHTC) Program.

NON-SMOKING POLICY

Kolopua Apartments is designated as a Non-Smoking property. Smoking is prohibited in all areas of the property including the interior of apartments, all indoor and outdoor common areas on the property.

It is the residents' responsibility to inform their guests of the Non-Smoking Policy. Any violation of the Non-Smoking Policy will be deemed a material breach of the Rental Agreement and grounds for immediate termination of the Lease/Rental Agreement.

Kolopua Apartment's adoption of a Non-Smoking Policy does not make the Owner the guarantor of the residents health or that the property will be free of smoke but management shall take reasonable steps to enforce this policy.

INCOME LIMITS

To qualify for a unit, the household's gross income may not exceed the maximum income limit per household size and may not be lower than the income minimum*

per household size. The income maximums and minimums are attached and are posted in the Kolopua Apartments Management Office.

**The apartment may be rented if proof is obtained indicating satisfactory and timely rental payment history for the past twelve (12) months in the amount equal to or greater than the rent charged for that unit size.*

APPLICATION FEES APPLY

An application fee of \$35 per adult household member will apply. Application fees will not be collected until an applicant is being considered for placement. The application fee is to help cover our cost of conducting the credit and criminal background inquiries.

APPLICATION PROCEDURES

Applications will **only** be distributed when the waiting list is open. Applications will **not** be distributed when the Waiting List is closed.

You can obtain an application by calling the Kolopua Apartments office at (808) 455-9032 or by downloading from the EAH website at www.eahhousing.org.

Each applicant must complete an application and be willing to submit to a credit history, rental history, and criminal background inquiry, as well as income and asset verifications.

All application entries are to be made in ink or typed. Corrections or changes are to be made by lining through the original entry and entering the correct data. Such changes must be dated and initialed by the person making the change.

Signed and dated applications will be processed on a first-come, first-served basis. The application must be completed and signed by the head of household and all household members over 18 before an applicant can be placed on the waiting list. If an application is not completely answered, the date of it being fully completed will be the date that the application is considered accepted for rental purposes.

PREFERENCES

Preferences will be used on a continuous basis in the selection of applicants. However, the policy of the Property is that a preference does not guarantee admission. Every applicant must still meet the Property's Resident Selection Plan standards for acceptance as a resident.

For units accessible to or adaptable for persons with mobility, visual or hearing impairments, households containing at least one person with such impairment will have first priority.

Residents shall be selected in accordance with the preferences described in Ordinance No. PM-2012-403. Preference will be given to applicants in the following order:

- a. First to employees of businesses within Princeville Phase I or Phase II;
- b. Second to employees who work within the Hanalei Tax Zone; and
- c. Third, to employees who work within the Kawaihau Tax Zone.

Applicants shall provide evidence of their preferred status in the form of paystubs or other reasonable proof of employment. Applicants with a valid, verified preference will have priority over applicants without a verified preference. Therefore, applicants with a verified preference that are lower on the waiting list will be offered an apartment first to satisfy the preference order as described in Ordinance No. PM-2012-403.

To implement these preferences, we will first select applicants with verified employment within Princeville Phase I or Phase II in lottery order. Next, we will select applicants with verified employment within the Hanalei Tax Zone in lottery order. Next, we will select applicants with verified employment within the Kawaihau Tax Zone in lottery order. Finally, we will select applicants without a preference in lottery order. If at any time there is no applicant with a valid and verified preference on the waiting list, then no unit in the Project shall be held vacant awaiting such applicant, but shall be rented promptly to an approved applicant without a preference.

Where preferences apply, applicants with a valid and verified preference will be moved to the top of the waiting list above persons without a preference.

The preferences so described will at all times be consistent with the requirements of Section 42 and future interpretations or guidance from the IRS and will not in any way jeopardize the project's eligibility under Section 42 of the Internal Revenue Code.

UNIT TRANSFER POLICY

A Unit Transfer List is maintained for those residents who have been approved for transfer on the basis of a disability or change in household status. Transfers for accessibility or medical reasons will have priority over those for changes in household composition. Residents on the Unit Transfer List will have priority over the applicants on the Waiting List.

In order to transfer to another building in the property, the family must meet the initial eligibility requirements of the LIHTC program or the transfer will not be allowed.

OCCUPANCY GUIDELINES

Occupancy guidelines are the criteria established for matching a household with the most appropriate size and type of apartment. The following occupancy guidelines will be followed to avoid over utilization of the units as follows:

| Bedroom Size | Household Maximum |
|---------------------|--------------------------|
| 1 | 3 |
| 2 | 5 |
| 3 | 7 |

To determine the proper bedroom size for which a household may qualify, the following household members are to be included:

1. All full-time members of the household, and
2. Live-in attendants.
3. Foster children
4. Unborn children
5. Children in the process of adoption.

NOTE: Live-in attendants are subject to the criminal and landlord provisions of this plan with the exception of criteria that determines ability to pay rent.

The fee to run a criminal background check is currently \$20 per live-in attendant.

VIOLENCE AGAINST WOMEN ACT OF 2013

The Violence Against Women Act ("VAWA") protects victims **against eviction or denial of housing based on domestic violence, dating violence, sexual assault and stalking.** In 2013, Congress expanded VAWA's housing protections by covering additional federal housing programs, including the Low-Income Housing Tax Credit program ("LIHTC"). VAWA offers the following protections:

1. An applicant's or program participant's status as a victim of domestic violence, dating violence, sexual assault and stalking is not a basis for denial of admission, if the applicant otherwise qualifies for admission.
2. This must support or assist victims of domestic violence, dating violence, sexual assault and stalking. It must protect victims, as well as members of

their family, from being denied housing or from losing their HUD assisted housing.

3. An incident or incidents of actual or threatened domestic violence, dating violence, sexual assault and stalking will not be construed as serious or repeated violations of the lease or other “good cause” for terminating the assistance, tenancy, or occupancy rights of a victim of abuse.
4. Criminal activity directly related to domestic violence, dating violence, sexual assault and stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of assistance, tenancy, or occupancy rights of the victim of the criminal acts.
5. Assistance may be terminated or a lease “bifurcated” in order to remove an offending household member from the home. Whether or not the individual is a signatory to the lease and lawful tenant, if he/she engages in a criminal act of physical violence against family members or others, he/she stands to be evicted, removed, or have his/her occupancy rights terminated. This action is taken while allowing the victim, who is a tenant or a lawful occupant, to remain.
6. The provisions protecting victims of domestic violence, dating violence, sexual assault and stalking engaged in by a member of the household, may not be construed to limit Kolopua Apartments, when notified, from honoring various court orders issued to either protect the victim or address the distribution of property in case a family breaks up.
7. The authority to evict or terminate assistance is not limited with respect to a victim that commits unrelated criminal activity. Furthermore, if Kolopua Apartments can show an actual and imminent threat to other tenants or those employed at or providing service to the property if an unlawful tenant’s residency is not terminated, then evicting a victim is an option, the VAWA notwithstanding. Ultimately, Kolopua Apartments will not subject victims to more demanding standards than other tenants.

The VAWA protections shall not supersede any provision of any federal, state, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault and stalking. The laws offering greater protection are applied in instances of domestic violence, dating violence, sexual assault and stalking.

The Notice of Occupancy Rights and Certification form will be provided to applicants when assistance is being denied or at the time of move-in.

GROUND FOR REJECTION

1. Total family income exceeds the applicable income limits published by HUD or does not meet the minimum income limits.
2. Household cannot pay the full security deposit at move-in.
3. Household refuses to accept the second offer of a unit.
4. Household fails to respond to interview letters or otherwise fails to cooperate with the certification process. Failure to sign consent forms.
5. ANY adult household members fail to attend eligibility interview.
6. Blatant disrespect or disruptive behavior toward management, the property or other residents exhibited by an applicant or family member any time prior to move-in (or a demonstrable history of such behavior).
7. Household is comprised entirely of full time students and does not meet the exception outlined in Section 42 of the IRC.
8. Applicant failed to provide adequate verification of income or we are unable to adequately verify income and/or income sources.
9. Providing or submitting false or untrue information on your application or failure to cooperate in any way with the verification process.
10. Unit assignment will NOT be the family’s sole place of residency. **Qualification for a unit includes occupying the unit on a continuous basis and as a primary residence. Residents may not be absent from the unit for more than 60 consecutive days, or for longer than 180 continuous days for medical reasons.**

LANDLORD REFERENCE

11. Negative landlord references that indicate lease violation, disturbing the peace, harassment, poor housekeeping, improper conduct or other negative references against the household.
12. Evictions reported in the last 5 years.
13. History of late payment of rent that demonstrates more than 2 late payments of rent in a six-month period for the past two years. More than 1 NSF in a one-year period.
14. Any evidence of illegal activity including drugs, gangs, etc.
15. Inappropriate household size for the unit available (see Occupancy Standards)

CREDIT

Please see attached credit criteria.

**** Applicants without a credit history will fail OnSite’s “Income to Debt Ratio” criteria and their application will be denied for housing.**

CRIMINAL

Please see attached criminal background criteria.

GRIEVANCE/APEAL PROCESS

Failure to meet one or more of the foregoing screening criteria may be grounds for rejection, however, each application is considered as a whole and the above factors are considered as part of a weighted formula. Should the applicants fail to meet the screening criteria, they will receive a notice in writing indicating that they have the right to appeal the decision. This notice must indicate that the applicant has 14 days to dispute the decision.

An appeal meeting with the Property Supervisor will be held within 10 business days of receipt of the applicant’s request.

Within five days of the appeal meeting, the property will advise the applicant in writing of the final decision regarding eligibility. Apartments will not be held for those applicants in the appeal process.

ADMINISTRATION OF WAITING LIST

The property is required to maintain a waiting list of all applicants that submit a completed application. Applicants must be placed on the waiting list and selected from the waiting list even in situations where there are vacancies and the application is processed upon receipt. This procedure is necessary to ensure the complete and accurate processing of all documentation for all applicants.

The property has one waiting list that is established and maintained in chronological order based on the date and time of receipt of the Preliminary Application. The waiting list contains the following information for each applicant:

1. Applicant Name
2. Address and/or Contact Information
3. Phone Number(s)
4. Unit Type/Size

5. Household Composition
6. Preference/Accessibility requirements
7. Income level
8. Date/ Time of Application

Applicants must report changes in writing to any of the information immediately.

Applicants will have the opportunity to decline the first apartment offered and retain their place on the waiting list. Should the applicant decline the offer of the next available unit, they will be removed from the waiting list.

PURGING THE WAITING LIST

The waiting list will be purged annually. Each applicant will receive a letter from the property, which will request updated information and ask about their continued interest. This letter must be returned within the specified time or their application will be removed from the waiting list. It is the responsibility of the applicant to maintain a current address with the office in order to receive waiting list correspondence. Any correspondence returned undeliverable will result in application being removed from the waitlist.

OPENING/CLOSING OF WAITING LIST

Kolopua Apartments will monitor the vacancies and waiting list regularly to ensure that there are enough applicants to fill the vacancies. Once the wait on the waitlist has been determined to exceed a 12 month wait, the waitlist will be closed

The waiting list may be closed for one or more unit sizes when the average wait is longer than 12 months. When the waiting list is closed, Kolopua Apartments will advise potential applicants that the waiting list is closed and refuse to take additional applications. Kolopua Apartments will publish a notice stating that the waiting list is closed in a publication likely to be read by potential applicants. The notice will state the reasons for Kolopua Apartment’s refusal to accept additional applications.

When Kolopua Apartments agrees to accept applications again, the notice of this action will be announced in a publication likely to be read by potential applicants in the same manner as the notification that the waiting list was closed.

Advertisements will include where and when to apply and will conform to the advertising and outreach activities described in the Marketing Plan for Kolopua Apartments.

AVAILABILITY OF RESIDENT SELECTION PLAN

The Resident Selection Plan is available in the management office. Changes to the Plan will be sent via U.S. mail to all persons on the active Waiting List. When the Waiting List opens, the Resident Selection Plan will be distributed with applications and are available by request from management.

ANNUAL/INTERIM RECERTIFICATION REQUIREMENTS

All residents must be re-certified annually. Residents are also required to report all interim changes to management that occur between annually scheduled re-certifications.

UNIT INSPECTION REQUIREMENT

Before signing the lease, Kolopua Apartments and the resident must jointly inspect the unit. The resident has five days to report any additional deficiencies to Kolopua Apartments to be noted on the move-in inspection form.

Annual unit inspections are performed by Kolopua Apartments. Agencies providing funding have the right to inspect the unit to ensure the property is physically well maintained and that the residents are provided with decent, safe and sanitary housing.

Residents will receive prior written notification for all unit inspections.

When a resident moves out, a final inspection will be completed. Residents are encouraged to attend the move-out inspection. However, if the resident does not wish to participate in the final inspection, Kolopua Apartments management may conduct the inspection alone.

PETS

No pets of any description are allowed on the property. SERVICE or ASSISTIVE animals are not considered pets and are not required to comply with the provisions of the Pet Policy. Service or Assistive animals are those animals specifically required to assist individuals with documented disabilities. Please notify Management if you require a Service or Assistive animal.

EQUAL HOUSING OPPORTUNITY

Kolopua Apartments 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.



EAH, INC.
A NONPROFIT HOUSING CORPORATION



Since 1968 Creating Community by Developing, Managing and Promoting Quality Affordable Housing.

INCOME MINIMUMS AND MAXIMUMS

Maximum household income based on published LIHTC and HOME Income Limits for 2018 (subject to change)

| | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person |
|---------------|----------|----------|----------|----------|----------|----------|----------|
| 50% of Median | \$30,850 | \$35,250 | \$39,650 | \$44,050 | \$47,600 | \$51,100 | \$54,650 |
| 60% of Median | \$37,020 | \$42,300 | \$47,580 | \$52,860 | \$57,120 | \$61,320 | \$65,580 |

Minimum monthly income is equivalent to 2.5 times the monthly rent:

| | 1 Bedroom | 2 Bedroom | 3 Bedroom |
|---------------|-----------|-----------|-----------|
| 50% of Median | \$2007 | \$2397 | N/A |
| 60% of Median | \$2357 | \$2815 | \$3220 |

NOTE: Applicants who have Section 8 are exempt from the minimum income requirement.

FAMILY COMMUNITIES

| Normal Applications | | Importance |
|---|---------------------|------------|
| <i>Ability to Pay Rent</i> | | |
| Minimum monthly gross income-to-rent ratio = 2.5 <small>Assets may not contribute to the qualifying income</small> | | Extremely |
| Monthly minimum net income (after rent and debt obligations) should exceed a fixed amount: \$800.00 | | Extremely |
| <i>Credit History</i> | | |
| Maximum percentage of past due negative accounts: number of derogatory accounts: 25.0% | | Moderately |
| Maximum balance of unpaid collections (includes past due accounts): \$1,000.00 | | Moderately |
| Bankruptcy permitted: More than 3 years ago | | Very |
| <i>Residency History</i> | | |
| No landlord tenant court records or unpaid landlord collections: Any number ever | | Pass/Fail |
| <i>Criminal History: Felony Convictions</i> | | |
| Total Considered Felony Convictions | No more than 2 | Pass/Fail |
| Alcohol | No more than 2 ever | Pass/Fail |
| Bad Check | None ever | Pass/Fail |
| Criminal - Other | None ever | Pass/Fail |
| Drug - Manufacturing/Distribution | None ever | Pass/Fail |
| Drug - Meth Manufacturing | None ever | Pass/Fail |
| Drug - Use | None ever | Pass/Fail |
| Fraud | None ever | Pass/Fail |
| Government Obstruction | None ever | Pass/Fail |
| Kidnapping | None ever | Pass/Fail |
| Motor Vehicle | No more than 2 ever | Pass/Fail |

| | | |
|---|---------------------------|----------------|
| Property - Destruction Related | None ever | Pass/Fail |
| Property - Other | None ever | Pass/Fail |
| Property - Theft Related | None ever | Pass/Fail |
| Prostitution | None in the last 10 years | Pass/Fail |
| Sex Offense - Coerced | None ever | Pass/Fail |
| Sex Offense - Willful | None ever | Pass/Fail |
| Society - Other | None ever | Pass/Fail |
| Violent - Fatal | None ever | Pass/Fail |
| Violent - Non-Fatal | None ever | Pass/Fail |
| Weapons | None ever | Pass/Fail |
| Drug - Marijuana Use | - | Not Considered |
| License | - | Not Considered |
| Wildlife | - | Not Considered |
| <i>Criminal History: Misdemeanor Convictions</i> | | |
| Total Considered Misdemeanor Convictions | No more than 2 | Pass/Fail |
| Bad Check | No more than 1 ever | Pass/Fail |
| Criminal - Other | No more than 1 ever | Pass/Fail |
| Drug - Manufacturing/Distribution | No more than 1 ever | Pass/Fail |
| Drug - Meth Manufacturing | No more than 1 ever | Pass/Fail |
| Drug - Use | No more than 1 ever | Pass/Fail |
| Fraud | No more than 1 ever | Pass/Fail |
| Government Obstruction | No more than 1 ever | Pass/Fail |
| Kidnapping | No more than 1 ever | Pass/Fail |
| Property - Destruction Related | No more than 1 ever | Pass/Fail |
| Property - Other | No more than 1 ever | Pass/Fail |

| | | |
|--------------------------------------|---------------------|----------------|
| Property - Theft Related | No more than 1 ever | Pass/Fail |
| Prostitution | No more than 1 ever | Pass/Fail |
| Sex Offense - Coerced | No more than 1 ever | Pass/Fail |
| Sex Offense - Willful | No more than 1 ever | Pass/Fail |
| Society - Other | No more than 1 ever | Pass/Fail |
| Violent - Fatal | No more than 1 ever | Pass/Fail |
| Violent - Non-Fatal | No more than 1 ever | Pass/Fail |
| Weapons | No more than 1 ever | Pass/Fail |
| Alcohol | - | Not Considered |
| Drug - Marijuana Use | - | Not Considered |
| License | - | Not Considered |
| Motor Vehicle | - | Not Considered |
| Wildlife | - | Not Considered |
| May not be a registered sex offender | | Pass/Fail |

The credit decision settings above are configured by the property manager. Based on these settings and other credit data, On-Site Manager, Inc. will calculate a score between 0 and 10 for the application. This score describes the degree to which the applicant meets the criteria. The meaning of the scores is described below:

| Score | Recommendation | Explanation |
|------------|----------------|---|
| 0.0 - 6.9 | Decline | Fails to meet the credit decision settings above. |
| 7.0 - 10.0 | Accept | Meets or exceeds credit decision settings above. |

| | | |
|---|------------------------------|-----------------------------|
| Have there been any changes in household composition in the last 12 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, explain: | | |
| Do you anticipate any changes in household composition in the next twelve months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, explain: | | |
| Is there someone not listed above who would normally be living with the household? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, explain: | | |
| Will ALL of the persons in the household be or have been <i>full-time students during five calendar months of this year or plan to be in the next calendar year</i> at an educational institution (other than a correspondence school) with regular faculty and students? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

IF YES, ANSWER THE FOLLOWING QUESTIONS:

| | | |
|---|------------------------------|-----------------------------|
| Are any full-time student(s) married and filing a joint tax return? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are any full-time student(s) a TANF or a title IV recipient? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are any full-time student(s) a single parent living with his/her child(ren) who is not a Dependant on another's tax return and whose children are not dependents of anyone other than a parent? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is any student a person who was previously under the care and placement of a foster care program (under Part B or E of Title V of the Social Security Act)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

C. INCOME

List ALL sources of income as requested below. If a section doesn't apply, cross out or write NA.

| Household Member Name (List the name of the recipient) | Source of Income | Current Gross Monthly Amount |
|---|--|------------------------------|
| | Social Security | \$ |
| | Social Security | \$ |
| | SSI Benefits | \$ |
| | SSI Benefits | \$ |
| | Pension (list source) | \$ |
| | Address: | |
| | City, State, Zip: | |
| | Pension (list source) | \$ |
| | Address: | |
| | City, State, Zip: | |
| | Pension (list source) | \$ |
| | Address: | |
| | City, State, Zip: | |
| | Veteran's Benefits (list claim #) | \$ |
| | Unemployment Compensation | \$ |
| | | |
| | Unemployment Compensation | \$ |
| | | |
| | Title IV/TANF (Welfare) | \$ |
| | | |
| | Contributions to the Household (monetary or not) | \$ |

Application

| Household Member Name (List the name of the recipient) | Source of Income | Gross Monthly Amount |
|---|--|----------------------|
| | Full-Time Student Income (18 & Over Only) | \$ |
| | Full-Time Student Income (18 & Over Only) | \$ |
| | Financial Aid (grants & scholarships exceeding of the amount of tuition may have to be included in total income) | \$ |
| | Interest Income (source) | \$ |
| | Interest Income (source) | \$ |
| | Long Term Medical Care Insurance Payments in excess of \$180/day | \$ |
| | Scheduled payments from Investments | \$ |

| | | |
|--|---|--|
| | Employment amount | \$ |
| | Employer: | |
| | Position Held | |
| | How long employed: | |
| | Employment amount | \$ |
| | Employer: | |
| | Position Held | |
| | How long employed: | |
| | Employment amount | \$ |
| | Employer: | |
| | Position Held | |
| | How long employed: | |
| | Employment amount | \$ |
| | Employer: | |
| | Position Held | |
| | How long employed: | |
| | Alimony | |
| | Are you entitled to receive alimony? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If yes, list the amount you are entitled to receive. | \$ |
| | Do you receive alimony? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If yes list amount you receive. | \$ |
| | Child Support | |
| | Are you entitled to receive child support? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If yes list the amount you are entitled to receive. | \$ |
| | Do you receive child support? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If yes, list the amount you receive. | \$ |
| | Other Income | \$ |
| | Other Income | \$ |
| | Other Income | \$ |
| TOTAL GROSS MONTHLY INCOME (Add the monthly amounts listed above) | | \$ |
| TOTAL GROSS ANNUAL INCOME (Gross monthly amounts listed above x 12) | | \$ |
| Do you anticipate any changes in this income in the next 12 months? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, explain: | | |
| TOTAL GROSS ANNUAL INCOME FROM PREVIOUS YEAR | | \$ |

| | | | | |
|--|-------|---------------|-------------------------|--------------------|
| Is any member of the household legally entitled to receive income assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Is any member of the household likely to receive income or assistance (monetary or not) from someone who is not a member of the Household (as listed on page 2, etc.)? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| If yes to any of the above, explain: | | | | |
| | | | | |
| Is the income received? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| D. ASSETS | | | | |
| If your assets are too numerous to list here, please request an additional form. If a section doesn't apply, cross out or write NA. | | | | |
| Checking Accounts If none, check here <input type="checkbox"/> | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | | | | |
| Savings Accounts If none, check here <input type="checkbox"/> | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | | | | |
| Trust Account If none, check here <input type="checkbox"/> | # | Bank | Balance \$ | |
| | | | | |
| Certificates of Deposit If none, check here <input type="checkbox"/> | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| Credit Union If none, check here <input type="checkbox"/> | # | Bank | Balance \$ | |
| | # | Bank | Balance \$ | |
| | | | | |
| Savings Bonds If none, check here <input type="checkbox"/> | # | Maturity Date | Value \$ | |
| | # | Maturity Date | Value \$ | |
| | # | Maturity Date | Value \$ | |
| Life Insurance Policy If none, check here <input type="checkbox"/> | # | | Cash Value \$ | |
| Life Insurance Policy If none, check here <input type="checkbox"/> | # | | Cash Value \$ | |
| Mutual Funds If none, check here <input type="checkbox"/> | Name: | #Shares: | Interest or Dividend \$ | Value \$ |
| | Name: | #Shares: | Interest or Dividend \$ | Value \$ |
| | Name: | #Shares: | Interest or Dividend \$ | Value \$ |
| Stocks If none, check here <input type="checkbox"/> | Name: | #Shares: | Dividend Paid \$ | Value \$ |
| | Name: | #Shares: | Dividend Paid \$ | Value \$ |
| | Name: | #Shares: | Dividend Paid \$ | Value \$ |
| Bonds If none, check here <input type="checkbox"/> | Name: | #Shares: | Interest or Dividend \$ | Value \$ |
| | Name: | #Shares: | Interest or Dividend \$ | Value \$ |
| Investment Property | | | | Appraised Value \$ |

| | |
|--|--|
| Real Estate Property: Do you own any real property? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes , Type of property | |
| Location of property | |
| Appraised Market Value | \$ |
| Mortgage or outstanding loans balance due | \$ |
| Amount of annual insurance premium | \$ |
| Amount of most recent tax bill | \$ |

| | |
|---|--|
| Does any member of the household have an asset(s) owned jointly with a person who is NOT a member of the household? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, describe: | |
| | |
| Do they have access to the asset(s)? | |

| | |
|--|--|
| Have you sold/disposed of any property in the last 2 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes , List type of property | |
| Market value when sold/disposed | \$ |
| Amount sold/disposed for | \$ |
| Date of transaction (month, day, and year) | |
| Have you disposed of any other assets in the last 2 years (Example: Given away money to relatives, set up Irrevocable Trust Accounts)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes , describe the asset | |
| Date of disposition | |
| Amount disposed | \$ |
| Do you have any other assets not listed above (excluding personal property)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please list: | |
| | |
| | |

| E. ADDITIONAL INFORMATION | |
|--|--|
| Are you or any member of your family currently using an illegal substance? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you or any member of your family ever been convicted of a felony? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, describe | |
| | |
| Have you or any member of your family ever been evicted from any housing? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, describe | |
| | |
| Have you ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, describe | |
| Will you take an apartment when one is available? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Briefly describe your reasons for applying: | |

| F. REFERENCE INFORMATION | |
|---------------------------------|-------|
| Current Landlord | Name: |

| | | |
|----------------------------------|--------------|-----------------------|
| | Address: | |
| | Home Phone: | |
| | Bus. Phone: | |
| | Rent amount: | |
| | How Long? | From: _____ To: _____ |
| Prior Landlord | Name: | |
| | Address: | |
| | Home Phone: | |
| | Bus. Phone: | |
| | Rent amount: | |
| | How Long? | From: _____ To: _____ |
| Personal Reference #1: | | |
| Address: | | |
| Relationship: | | Phone #: |
| Personal Reference #2: | | |
| Address: | | |
| Relationship: | | Phone #: |
| EMERGENCY CONTACT PERSON: | | |
| In case of emergency notify: | | |
| Address: | | |
| Relationship: | | Phone #: |

G. HOUSING REQUIREMENTS

| |
|---|
| Do you have a statement, from your physician, which requires you to have a handicap-accessible unit? <input type="checkbox"/> Yes <input type="checkbox"/> No. |
| If there are no handicap units available, are you still interested in renting another apartment that is <i>not</i> handicap-accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No |

H. VEHICLE AND PET INFORMATION (if applicable)

List any cars, trucks, or other vehicles owned by you. Onsite parking is not guaranteed and may be assigned upon lease commencement.

| | |
|----------------------|------------------|
| Type of Vehicle (1): | License Plate #: |
| Year/Make: | Color: |
| Type of Vehicle(2): | License Plate #: |
| Year/Make: | Color: |

| | |
|----------------------|--|
| Do you own any pets? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, describe: | |

ACKNOWLEDGMENT, AUTHORIZATION, AND AGREEMENT

I/we authorize EAH, Inc. (the Managing Agent) and/or the property owner to verify my past and present employment earnings records, bank accounts, stock holdings, and any other assets needed to process my rental application. I further authorize EAH, Inc. and/or the property owner to order a consumer credit report and verify other credit information. I/we hereby give my/our permission for you to verify the information provided above, including but not limited to criminal background screening.

CERTIFICATION: I/we certify that the information in this application is true and correct as of the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties, but not limited to, fine or imprisonment or both. I/we acknowledge that my/our income will be verified every year for re-certification purposes. Misleading, willful, false statements, misrepresentations or incomplete information in this application will be grounds for rejection of this application.

I/We hereby certify that I/We Do/Will Not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. Applicants are not allowed to reapply with a change in household constituency until one year after the original application date. I/We understand that my eligibility for housing will be based on applicable income limits and by management’s selection criteria. 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 are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older, must sign application.

SIGNATURE (S):

| | |
|--------------------------|-------|
| _____ | _____ |
| (Signature of Tenant) | Date |
| _____ | _____ |
| (Signature of Co-Tenant) | Date |
| _____ | _____ |
| (Signature of Co-Tenant) | Date |
| _____ | _____ |
| (Signature of Co-Tenant) | Date |

THE FILING OF THIS APPLICATION IN NO WAY GUARANTEES YOU AN APARTMENT. PLEASE DO NOT MAIL MORE THAN ONE APPLICATION PER HOUSEHOLD. IF MORE THAN ONE APPLICATION IS RECEIVED, APPLICATIONS WILL BE PLACED AT THE END OF THE APPLICANT LIST.



Send application to the following address:

Kolopua Apartments
5-4344 Kuhio Hwy.
Princeville, HI 96722
Phone: (808) 445-9032



SUPPLEMENT TO APPLICATION FOR KOLOPUA APARTMENTS

This document is part of the application and must be submitted with the application.

Preference Certification for Kolopua Apartments –Kauai County Ordinance No. PM2012-403

Kolopua Apartments is subject to Ordinance No. PM-2012-403, relating to Zoning Designation in Princeville Kauai, which states that Residents shall be selected in accordance with the preferences described in the Ordinance. Preference will be given to applicants in the following order:

- 1 Employees of businesses within Princeville Phase I or Phase II;
- 2 Employees who work within the Hanalei Tax Zone (Hanalei, Princeville, Kilauea); and
- 3 Employees who work within the Kawaihau Tax Zone (Anahola, Kealia, Kapaa).

Applicants will need to provide evidence of their preferred status in the form of paystubs or other reasonable proof of employment at the time of application. Applicants with a valid, verified preference will have priority over applicants without a verified preference. Therefore, applicants with a verified preference that are lower on the waiting list will be offered an apartment first to satisfy the preference order as described in Ordinance No. PM-2012-403.

| | |
|--------------------------|---|
| <input type="checkbox"/> | My/Our household contains an employee of a business located in Princeville Phase 1 or Phase 2 |
| <input type="checkbox"/> | My/Our household contains an employee of a business within the Hanalei Tax Zone |
| <input type="checkbox"/> | My/Our household contains an employee of a business within the Kawaihau Tax Zone |
| <input type="checkbox"/> | My/Our household <u>DOES NOT MEET</u> any of the preferences listed above |

RELEASE OF INFORMATION

I/We do hereby authorize EAH Inc. (the Managing Agent) and/or the property owner to obtain information or materials deemed necessary to determine my/our eligibility for housing. I/we authorize EAH Inc. and/or the property owner to verify my/our past and present employment earnings records, bank accounts, stock holdings, and any other assets needed to process my/our rental application. I/we further authorize EAH Inc. and/or the property owner to order a consumer credit report and verify other credit information. I/we hereby give my/our permission for EAH Inc. and/or the property owner to verify the information provided above, including but not limited to criminal background screening.

UNDER PENALTIES OF PERJURY, I CERTIFY THAT THE INFORMATION PRESENTED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY/OUR KNOWLEDGE. THE UNDERSIGNED FURTHER UNDERSTANDS THAT PROVIDING FALSE REPRESENTATIONS HEREIN CONSTITUTES AN ACT OF FRAUD. FALSE, MISLEADING OR INCOMPLETE INFORMATION WILL RESULT IN THE DENIAL OF APPLICATION OR TERMINATION OF THE LEASE AGREEMENT.

| | | |
|------------------------------|---------------------------|------|
| Printed Name of Resident | Signature of Resident | Date |
| Printed Name of Co- Resident | Signature of Co- Resident | Date |
| Printed Name of Co- Resident | Signature of Co- Resident | Date |
| Printed Name of Co- Resident | Signature of Co- Resident | Date |

PENALTIES FOR MISUSING THIS CONSENT: Title 18, Section 1001 of the U.S. 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 and any owner (or any employee of HUD 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 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 or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at **208 (a) (6), (7) and (8).** Violations of these provisions are cited as violations of 42 U.S.C. Section **408 (a) (6), (7) and (8).**





KOLOPUA APARTMENTS

5-4344 KUHIO HIGHWAY, PRINCEVILLE, HI 96722
TELEPHONE (808) 445-9032 FAX (808) 445-9032 TDD (877) 447-5991

Creating community by developing, managing and promoting quality affordable housing since 1968.

This document is part of the application and must be submitted with the application.

CRIMINAL BACKGROUND & CONSUMER CREDIT REPORT AUTHORIZATION

I/We _____ the undersigned, hereby authorize Kolopua Apartments to verify my references and background, to include a consumer credit report from the main credit reporting agencies (Experian, Equifax, or Trans Union) and criminal background check (Hawaii Criminal Justice Data Center) on all persons over the age of eighteen intending to reside at the property. This information will be used to determine eligibility, and assess credit worthiness. I also authorize Kolopua Apartments to verify other pertinent data including prior addresses, aliases, and landlord verifications.

Kolopua Apartments intends to contact the credit reporting agency indicated below. The Fair Credit Reporting Act grants all consumers the right to request a free copy of the credit report within 60 days. If such a request is made, the consumer credit reporting agency must provide requested information within 30 days. To obtain a copy of reports issued contact:

On-Site Manager Inc.
P.O. Box 1514
Los Altos, CA 94023-1514
Ph: (866) 266-7483 Fax: (877) 329-6674

The consumer reporting agency provides data, but does not make decisions to accept or deny applications. It is based upon many factors including the data received in credit reports, that management makes decision on occupancy. The consumer has the right to dispute the accuracy or completeness of information contained in the credit report. All inquiries or disputes should be communicated directly to the consumer credit reporting agency.

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date



EAH is an "Equal Opportunity" housing provider and does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.

