

## LIMITED PET RULES, REGISTRATION AND AGREEMENT (NO PET DOGS OR CATS ALLOWED)

**Property Name:** Meadows Annex Apartments

This property DOES NOT allow dogs or cats as pets in their units. The following are rules for animals other than dogs or cats that are allowed at this property. All pets must be registered and approved by management PRIOR to bringing a pet onto the property.

1. **DEFINITION** – At this property, tenants (pet owners) are permitted to keep common household pets other than DOGS or CATS in their dwelling unit in accordance with these pet rules. Only domesticated birds, rodents (mice, gerbil, hamster, and guinea pig), small rabbits, ferrets, fish or turtles are allowed as a common household pet. Common household pets do not include reptiles of any kind (except turtles) or insects. Management can refuse to register a pet if it is not an allowed common household pet or deemed to be a dangerous animal.
2. **SERVICE ANIMAL EXEMPTION** - Service animals used to assist persons with disabilities are excluded from the requirements of the pet policy, pet rules and pet deposit. This prohibition does not preclude management from enforcing service animal rules at the property (if applicable) and/or state and local laws, if they apply.
3. **DENSITY AND SIZE** - No more than two (2) common household pets (as defined above) are allowed in the dwelling unit. Only one (1) aquarium is allowed and it cannot exceed twenty (20) gallons.
4. **INOCULATIONS AND LICENSING** - If the pet is required to be inoculated licensed in accordance with state and local law, the pet owner is required to provide written evidence that all inoculations have been given and/or all licenses have been issued to the pet prior to bringing the pet onto the premises. Once registered with management, the owner must update the registration at least annually, including an updated certification of and required licensing and/or inoculations for the tenant's file.
5. **SPAYING OR NEUTERING** – No common household pets (as defined above) will be allowed to breed while being kept in the unit. Breeding of pets will be considered a lease violation and could result in management requiring the removal of the pet and no future approval of any pets for the household.
6. **SANITARY STANDARDS** - Pet owners are required to remove and properly dispose of all pet waste. Pet waste *must* be contained in a paper or plastic bag first, and then placed in a garbage can or dumpster. Pet waste, litter, wood shavings or other pet waste materials *must not* be flushed down the toilets. Tenants are required to clean pet waste and/or clean the contents or water of aquariums or cages at least twice per month or more often to maintain sanitary standards in the unit.
7. **PET RESTRAINT** - When not actively handling the animal, mammals and birds must be caged at all times in cages approved by management. Fish and turtles must be continually contained in their aquarium. No pet is allowed free in the units or allowed to roam outside the unit.
8. **STANDARDS OF PET CARE** - The pet owner is responsible for controlling the noise and odor caused by the pet. No pet will be allowed to be in the unit unattended for more than 24 hours.
9. **VISITING ANIMALS** - Tenants or guests must not bring unregistered animals onto the premises for visits or pet sitting without management approval. Tenants shall not care for pets of others in their apartment. Service animals are exempt from the pet rules at this property and are allowed to accompany disabled visitors during their visit only and must leave when the visitor leaves. It is recommended that visitors requiring service animals identify an animal as a service animal to management when bringing onto the property.
10. **DAMAGES** - Any damages to the unit caused by the pet will be the responsibility of the tenant. Management reserves the right to charge the tenant either during tenancy or at move out for any damage to the unit caused by the pet.







## RENTAL APPLICATION

Name of Property Meadows Annex Apartments Phone 509-457-6463 TDD 711 (for hearing impaired)

Address 1014-1016 S 9<sup>th</sup> St. Yakima, WA 98902 Office: 718 N. 6<sup>th</sup> Ave. #109

*This property will deny the application of any applicant who does not provide complete and accurate information on this form and the attachments. Please complete ALL of the areas below completely and accurately. If an item does not apply, please write "not applicable" or "none". EACH ADULT OVER 18 should complete a separate application with all household members listed.*

**Tenant and Spouse/Co-Tenant:**

Name:	Birth Date	Gender	Social Security Number

**Other Household Members** (Full or part time)


Birth Date	Gender	Social Security Number

**Present Address - NAME OF PROPERTY** \_\_\_\_\_

Street Address	City	State / Zip	Your Phone Number and Alt Phone# (cell)	How long lived there?

**Current Landlord Name/address/phone number:**

Name	Street Address	City	State/Zip	Phone Number

 **Is your current residence a federally financed or federally subsidized property?**  Yes  No

**Previous Addresses (Must fill in last two previous addresses- no less than last 24 months)**

**# 1 Previous Address REQUIRED**

Street Address	City	State / Zip	Phone Number

How Long?	From:	To:	Amount of Rent
			\$

**Previous Landlord Name/address/phone number:**

Name	Street Address	City	State/Zip	Phone Number

**# 2 Previous Address REQUIRED**

Street Address	City	State / Zip	Phone Number

How Long?	From:	To:	Amount of Rent
			\$

**Previous Landlord Name/address/phone number:**

Name	Street Address	City	State/Zip	Phone Number



<b>All Income Sources (Last 12 months and projected) - See attached income/asset statement definitions</b>			
Income Source (Employer/Agency)	Phone#	Gross Monthly	Net Monthly
		\$	\$
		\$	\$
		\$	\$

**Credit Reference (Include all installment payments) Use additional pages if necessary**

Name	Account Number	Monthly Pmt	Balance Due
		\$	\$
		\$	\$

**Automobiles: Please list automobiles you will be parking on our site. Use additional pages if necessary**

Make/Model	Year	License Tab#	Driver's License #

**Bank Assets/Investments/Real Estate holdings - See attached income/asset statement definitions**

Bank Accounts or other Liquid Assets	Street Address	City, State, Zip	Type of Account	Approximate Balance/Value
				\$
				\$
				\$

**Character References: (Please fill out at least 2. Do not list relatives. See manager for criteria)**

Name	Street Address	City	State/Zip	Yrs Known	Phone Number

1. Have you, or anyone named on this application, ever been charged, arrested or convicted of any crime including a drug-related crime or a crime involving violence against others?  Yes  No If yes, who? \_\_\_\_\_ where? \_\_\_\_\_ (State) Explain (use additional pages if necessary) \_\_\_\_\_
2. Have you, or anyone named on this application ever been cited, evicted or termination of tenancy proceedings started for criminal activity (including drug related activity), fraud, non-payment of rent, non-compliance with lease/rule provisions or failure to cooperate in recertification procedures?  Yes  No If yes, explain: \_\_\_\_\_
3. Are you or anyone named on this application a registered or non-registered sex offender?  Yes  No
4. Do you or anyone named on this application have a history of using illegal drugs or abusing alcohol?  Yes  No If yes, explain: \_\_\_\_\_
5. Do you or anyone named on this application currently use illegal drugs or abuse alcohol?  Yes  No If yes, explain: \_\_\_\_\_
6. Is anyone named on this application a student (part or full-time) including a Student Enrolled in an Institute of Higher Education? If yes, indicate whom and further verification is required  Yes  No If yes, who and where attending \_\_\_\_\_
7. Please list all the states in which you or anyone listed on this application have lived, taken out credit or have held licenses to drive including DL#'s (use additional pages if necessary) \_\_\_\_\_
8. Have you or anyone named on this application ever been known by any other name or taken out credit under another name?  Yes  No If yes, explain: \_\_\_\_\_
9. Do you, or anyone named on this application request the features of a wheelchair accessible or adapted unit, downstairs vs. upstairs apartment (if available) or site or policy accommodation or modification based on a medical condition or disability?  Yes  No If yes, what is requested? \_\_\_\_\_
10. Do you own any of the following? (some may be prohibited or require prior management written approval/agreement)  
 washer/dryer  waterbed  aquarium  portable dishwasher  freezer  air conditioner  space heater



**Please Read:** In compliance with the Fair Credit Reporting Act, we are informing you that information as to your household member's rental history, character references (if applicable), public records, criminal history and credit history is being verified. We understand that any misrepresentation will be sufficient cause for dismissal or voiding of the application. We understand that we must contact the rental office every six (6) months in order to remain on the waiting list. Failure to update will result in removal of my/our name(s) from the waiting list. We further understand that, upon acceptance of this application for tenancy, we must provide releases and/or verification of ALL income and assets and household composition (including custody or guardianship of minor children) and consent to release for wage and/or income matching by HUD or the owner/agent. We also agree to signify all terms of occupancy by signing the Lease Agreement, Rules and Regulations of the property and a Tenant Certification for Calculation of Rent form HUD 50059. The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), by Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit proof of valid social security number of each household member. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities. Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interests, and to verify the accuracy of the information you provide. This information may be released to appropriate federal, state, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law.

Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.

**If you are rejected you have the right to appeal the decision within (14) days of the receipt of the rejection notice by contacting the management of this property in writing or requesting a meeting. A copy of the Grievance and Appeal Procedure is posted in the site office. You may request a copy of this appeal procedure by contacting the site office below.**

**Persons with disabilities have the right to request reasonable accommodations to participate in the informal hearing process**

**Meadows Annex 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. The person (agency) named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988). **Kelly Dargatzis, 643 Union St NE, Suite 200, Salem, OR 97301, 503-949-4874 (Name, address phone and TDD 711 for hearing impaired).** We do business in accordance with the Federal Fair Housing Act and provide persons with disabilities reasonable accommodation upon request. Persons with language barriers may request or arrange interpretation alternatives or services.

How did you hear about our Property? \_\_\_\_\_

**Signatures (Required).** I certify the accuracy and completeness of information provided:

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



Co-Head/Spouse Signature \_\_\_\_\_

Each adult should complete a separate application but sign each other's application as Co-Head or Spouse

**Attachments:** Please return ALL forms with your completed application.

1. Application Cover Letter - Explains eligibility, application process, wait list process and selecting applicants
2. Income/Asset Statement- to be completed in full by each adult of the household

**Managers Use: (OFFICE USE ONLY)**

DATE OF RETURNED APPLICATION \_\_\_\_\_ TIME \_\_\_\_\_ Manager Initials \_\_\_\_\_