

Kensington Apartment Communities
426 E. Nichols Canyon Road / 353 E. Cobble Creek Drive/
Cedar City, Utah 84721
(435) 865-1455

Visit our Website at: www.kensingtonapts.net

Dear Prospective Resident:

Thank you for your interest in our apartment community. We have enclosed an application packet for your review and completion.

LIHTC Resident Selection Criteria: Explanation of qualification and occupancy standards.

Tax Credit Rental Application: Complete all items on the application that applies to all household members. If an item does not apply, write N/A (not applicable). Incomplete applications will not be accepted and will be returned.

When the forms are properly completed, return them to the office along with a payment (check or money order) for \$20.00 for each household (spouse and co-spouse) or \$20.00 for each household member with different last names. This fee is necessary for the background checks required.

Applications received without the required fee will be returned.

If you have any questions, please contact our office at (435) 865-1455.

We look forward to hearing from you in the near future.

Sincerely,

Mary Jabens
Site Manager
Kensington Apartment Communities





Welcome to Kensington Apartment Communities!



Kensington Place/ East are a Section 42 Low Income Housing Tax Credit Program. (LIHTC) This program allows qualifying households a rent amount which is usually lower than the market rents for the area for comparable apartments.

The household's gross (before taxes) annual income at initial occupancy cannot exceed the income limits for the property. The income limits are based on a percentage of the median income determined annually by the Department of Housing & Urban Development.

Another factor in qualification is Single Full Time Students. They are not allowed in the LIHTC program. Some Single Full Time Students sponsored by State of Federal Programs may qualify. Please ask management if you have a question regarding the Single Full Time Student issue.

To determine if a household qualifies initially, and on an annual basis, all income and assets must be verified by management from the source. The management office handles this task, but it does require information provided by the applicant/resident prior to initial occupancy and at a minimum annually thereafter. Households are also responsible for reporting changes to their household size and changes in their income during their residency.

The chart below is based on the set percentage for Kensington Place/ East for 2007. For a quick check on eligibility refer to the amount of household members who will be occupying the unit then review the maximum gross household income which is allowed. Actual eligibility cannot be determined until income is actually verified by third party sources as required by LIHTC regulations.

# In Household	Max Gross Income	# In Household	Max Gross Income
1	\$21,450	5	\$33,055
2	\$24,475	6	\$35,475
3	\$27,555		
4	\$30,580		

2 Bedroom \$492.00 per month. Includes one covered parking stall.

3 Bedroom \$560.00 per month. Includes one covered parking stall.

Option of leasing cable T.V. for \$25.00/month.

All units feature dishwashers, large refrigerators, garbage disposals, spacious kitchen areas and cabinets, closets with built in shelving, gas heat, electric ranges, patios or balconies with extra storage, a community room with kitchen is available to our residents for those special events, and a courtyard with a children's play area will be enjoyed by everyone.



Kensington Apartments
Resident Selection Criteria
LIHTC Program



We provide equal housing opportunity. We do not discriminate in violation of the law or on the basis of any legally protected status.

Applicants must meet the following criteria in order to be considered as residents in the apartment community:

- Income shall be 2 ½ times the rent, except in those designated “Affordable Housing” complexes/units where maximum income may be limited. Any public assistance income including by not limited to: Food Stamps, Aid to families with dependent children, or any other regular source of income or support – public or private are included in qualifying for minimum income.
- All current and previous landlord references will be verified for at least two years.
 - ⇒ Failure to provide correct, verifiable references may result in the denial of the application.
 - ⇒ Failure to obtain verifiable references may result in the denial of the application.
 - ⇒ A minimum of two past rental landlords are required: names and phone numbers must be provided.
 - ⇒ Any reported eviction action will result in denial of application; any report of multiple late payments of rent or non-compliance with rental agreement may result in the denial of the application.
- A credit check through a major national credit reporting firm will be run.
 - ⇒ A debt-to-income ration of more than 30% may result in denial of application.
 - ⇒ An outstanding recorded or un-recorded judgment or multiple derogatory comments (must not be discriminatory) or collection accounts may result in denial of the application.
 - ⇒ Felony convictions by any household member within the last three (3) years will result in denial.
- Verification of income shall be made by:

⇒ Employment Verification.

⇒ Proof of self-employment shall be made by tax statement.

⇒ Non-employment income shall require verification (i.e. social security income, retirement income, etc.).

- Employment of less than 6 months may result in denial of application.
- Occupancy Standards:

BEDROOM SIZE

Two Bedroom

Three Bedroom

MAXIMUM HOUSEHOLD SIZE

4

6

REJECTION

Applicants **will not** be rejected on the basis of race, color, religion, sex, handicapped status, familial status, source of income or national origin. Any one or more of the following are grounds for rejection of an applicant.

- Refusal to allow verification of any information required by the applicant process.
- Failure to meet LIHTC income limits for the desired property.
- Number of “persons in household” exceeds allowable occupancy standards for the property.
- Applicant(s) provide false answers on the application or at the interview.
- Negative credit, personal, landlord or law enforcement references.
- The applicant has a history of chronic late or nonpayment of rent or other financial obligations.
- The applicant has a history of eviction, intentional damage, and/or violation of the terms of a past or present lease agreement (including, but not limited to) failure to maintain a unit in a sanitary condition, current use of illegal drugs, or conviction for drug manufacture, sale or distribution.
- The applicant(s) or “person in the household” would pose a direct threat to the health or safety of others or property.

Any rejection will be issued in a written statement to the applicant.

Date Received: _____
Time Received: _____



KENSINGTON APARTMENT COMMUNITIES

Kensington Place 426 E. Nichols Canyon Road / Kensington East 353 East Cobble Creek Drive • Cedar City, Utah

PH:(435) 865-1455 FX:(435) 865-1427
RENTAL APPLICATION

PLEASE PRINT.

APPLICANT:

FULL NAME: _____
First M Last Social Security Birth date Phone #

CO-APPLICANT:

FULL NAME: _____
First M Last Social Security Birth date Phone #

OTHER OCCUPANTS:

(1) _____
Name Birth date Age Social Security Relationship
(2) _____
Name Birth date Age Social Security Relationship
(3) _____
Name Birth date Age Social Security Relationship
(4) _____
Name Birth date Age Social Security Relationship

Indicate which type of unit you wish to apply for: [] 2 bedroom [] 2 bedroom Handicapped accessible
[] 3 bedroom [] 3 bedroom Handicapped accessible
Do you have a disability which requires a unit with special features? _____ If yes, what features do you require?
Do you have a disability which requires an auxiliary aid? _____ If yes, what features do you require?

STUDENT STATUS:

Are you or any member of your household a full-time student*? [] Yes [] No
If you answered "yes" above, list the names of all household members who are full-time students: _____

*Full-time student is defined as persons who have been, are, or will be attending school at an educational institution with regular faculty and students during five months of the current calendar year (including elementary, junior high and high school students).

If all household members are students as defined above, answer the following questions:
1. Do you receive assistance under Title IV of the Social Security Act? [] Yes [] No
2. Are you enrolled in a job training program receiving assistance under the Job Training Partnership Act or under other similar Federal, State or local laws? [] Yes [] No
3. Are you a single parent with children and are not a dependent (as defined under Section 152) of another individual? [] Yes [] No
4. Do you file a joint income tax return? [] Yes [] No

RENTAL HISTORY: (current and immediate prior landlord information for each adult household member is required)

Current _____ Monthly Rent: \$ _____ How Long: _____
Address: Street Name Apt. #
City Zip Code (required) Landlord's Name: _____
Landlord Phone Date moved-out Reason for moving
Previous _____ Monthly Rent: \$ _____ How Long: _____
Address: Street Name Apt. #
(if < 2 yrs.) Landlord's Name: _____
City Zip Code (required)
Landlord Phone Date moved-out Reason for moving

CREDIT REFERENCES:

Bank Name Account Number Credit Card Name Account Number
Driver's License: _____ State: _____ Expires: _____ Number of Cars: _____
Vehicle Make/Model: _____ Color: _____ Year: _____ License plate #: _____
Vehicle Make/Model: _____ Color: _____ Year: _____ License plate #: _____

OTHER INFORMATION:

HAVE YOU EVER: Filed for Bankruptcy? [] Yes [] No If yes, has it been discharged? _____
Been evicted from Tenancy? [] Yes [] No If yes, explain _____
Been convicted of a crime? [] Yes [] No If yes, explain _____
Emergency Contact: _____
Name Phone Relationship

IMPORTANT: YOU MUST LIST BELOW ALL INCOME ANTICIPATED TO BE RECEIVED BY ALL MEMBERS OF THE HOUSEHOLD WHO ARE 18 YEARS OF AGE OR OLDER DURING THE 12-MONTH PERIOD BEGINNING THE DATE OF THIS APPLICATION. IF YOU NEED ADDITIONAL SPACE TO INCLUDE ALL INCOME PLEASE ATTACH A CONTINUATION SHEET TO THIS APPLICATION.

EMPLOYMENT:

Check all applicable: ☐Employed full time ☐Employed part time ☐Self-Employed
 ☐Non-employed ☐Unemployed

Current Employer: _____ Position: _____ How Long: _____

Address: _____ Supervisor: _____ Phone: _____

Current Salary: \$ _____ per: hour week month year (circle one)

Do you expect to earn substantial overtime? [☐] Yes [☐] No If so, how much? _____

OTHER INCOME:

Note: Applicants must complete this section in order to determine qualification for residency within the Federal Low Income Housing Tax Credit Program. Although this information is voluntary under the Federal Fair Housing Act, failure to provide such income may result in non-qualification for residency for any rental unit in Affordable Housing Program. All income for all household members must be included.

Other Income Includes: Alimony, child support, welfare, unemployment, aid to dependent children, social security, annuities, insurance policies, retirement benefits, pensions and other regular periodic payments. Please consult the leasing personnel for complete: list of other income.

If none, check here: [☐] **No other sources of income**

(1) _____	_____	_____
Type of income	Annual amount	Contact address or phone
(2) _____	_____	_____
Type of income	Annual amount	Contact address or phone
(3) _____	_____	_____
Type of income	Annual amount	Contact address or phone

ASSETS: (for all household members)

Assets Include: Cash (wherever held), trust corpus, equity in real estate or capital investments, notes receivable, stocks, bonds, money market accounts, IRAs, retirement & pension funds, and luxury personal property (gems, jewelry, art, coin collections, etc.)

Assets Do Not Include: Necessary personal property such as clothing, furniture, daily-use autos, tools, dishes, etc. Also excluded is any special equipment for use by the handicapped, cash value of life insurance policies, and assets of a business.

Are the assets (as defined above) of the whole household less than \$5,000? [☐] Yes [☐] No

If yes, what is the anticipated earnings on all household assets for the next year? \$ _____

If no, please complete the following section:

Asset	Value	Anticipated Annual Earnings on Asset	1.
_____	_____	_____	
2. _____	_____	_____	
3. _____	_____	_____	

Have you sold or given as gifts any real property or other assets in the past two years? [☐] Yes [☐] No

If yes, explain and list current market value of asset: _____

I hereby apply to lease the above described premises on substantially the terms set forth herein. As an inducement to L.B. Hunt Management Group, Inc., Agent for the owner of the property, to accept this application, I warrant that all statements contained herein are true. I have been advised and understand that residency at Kensington Apartment Communities entails certain income restrictions and that residency is subject to qualification. I certify that if selected to move into this project, the unit I occupy will be my only residence. I understand that the above information is being collected to determine my eligibility for the Low-Income Housing Tax Credit (Section 42) units. I agree that in addition to execution of a Lease Agreement that I will execute a tenant certification attesting to the information contained herein which certification will be made under the penalty of perjury.

I hereby deposit \$ _____ as an earnest deposit to be refunded to me in full within ten (10) business days if this application is not approved and accepted. I hereby waive any claim to damages by reason of non-acceptance. Upon acceptance of this application, this deposit shall be applied to the move-in costs. When so approved and accepted, I agree to execute a lease agreement before possession is delivered and to pay the balance of the security and other move-in costs. ONCE APPROVED, IF I FAIL TO TAKE POSSESSION OF THE APARTMENT, THE DEPOSIT WILL BE FORFEITED. I understand that there is an additional \$20.00 per applicant **non-refundable application processing fee** which I am also responsible for paying at the time I submit this application.

By execution of this application, I hereby authorize L.B. Hunt Management Group, Inc., to verify all information provided on this application and to contact previous landlords and make such investigations into my credit history as they may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, rental history and consumer credit reports. I also authorize L.B. Hunt Management Group Inc., to release such information to appropriate Federal, State or local agencies.

There shall be no discrimination because of race, creed, color, religion, sex, age, handicap, national origin, familial status, or source of income.

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

Full-Time Student Status of Household Members

☐ Kensington Place Apts.

☐ Kensington East Apts.

Name: _____ **Unit #** _____

Complete the following information for all members of your household. All family members regardless of age or student status must be listed. Check yes or no under the Full-Time Student column for all family members. If the family member is a full-time student complete the educational institution column.

Full-time student is defined as persons who have been, are, or will be attending school at an educational institution with regular faculty and students during five months of the current calendar year. (This includes elementary, junior high, and high school students.)

Name	Relationship	Age	Full-Time Student		Educational Institution
			Yes	No	
	Head of Household				

If all members of the household are full-time students, answer the following questions

- A. Does at least one member of the household receive assistance under title IV of the Social Security Act. (for example, payments under AFDC)
Yes____ No____
- B. Is at least one member of the household currently enrolled in a job training program that receives assistance under the Job Training Partnership Act (JTPA) or is funded by a state or local public agency.
Yes____ No____
- C. Is the head of the household a single parent with children and neither the head of Household nor the children is dependent of another individual.
Yes ____ No____
- D. Are you married and have you filed a joint income tax return for the most recent filing Year? Household's that consist entirely of full-time students will be required to provide a copy of the most recent filing year federal income tax return.
Yes____ No____

I / We certify that the information shown above is true and correct.

_____ Head of Household	_____ Date	_____ Co-Head	_____ Date
_____ Other Adult	_____ Date	_____ Other Adult	_____ Date

Warning: Section 1001 of Title 18 of the U.S.Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any manner within the jurisdiction of a federal agency.