



Tenant Selection Policy

To consider **Whispering Hills** your home, this is the Selection Criteria you must meet:

IDENTITY AND AGE VERIFICATION

All applicants must be at least 18 years of age. A document verifying the age of each household member will be required. Acceptable age verification documents: Birth certificate, Baptismal Certificate, Valid Passport, Social Security Administration Benefit Letter that includes birth date, Naturalization Certificate

HOUSEHOLD COMPOSITION / UNIT ELIGIBILITY MUST FALL INTO THESE CATEGORIES

OCCUPANCY GUIDELINES

APARTMENT SIZE	MINIMUM OCCUPANTS	MAXIMUM OCCUPANTS
ONE BEDROOM	ONE	TWO
TWO BEDROOM	TWO	FOUR
THREE BEDROOM	THREE	SIX

Frequently asked question: Can one person have a 2 bedroom apartment?

Answer: No. The only exception to the above occupancy guidelines is those households that require a live in aide.

HOUSEHOLD MEMBERS INCLUDE: All persons who consider the apartment their primary residence. For example: children under joint custody must reside in the apartment at least 50% of the time or children away in foster care who will be returning to the household, members temporarily in the hospital or nursing home, unborn children, children being adopted or a future spouse or roommate.

YOUR ANNUAL INCOME MUST fall within the State established -HUD income levels. The annual income is the full amount, (GROSS), before any payroll deductions for all adults **NOT** the take home pay or net income. Adults are persons over the age of 18 years.

ANNUAL INCOME is inclusive and not limited to: employment, self-employment, tips, commissions, income from assets, Social Security and other benefits, payments in lieu of earnings, i.e., unemployment, disability compensation, worker's compensation and severance pay., child support/alimony, gifts, military pay, student financial assistance, etc.

If your annual income is lower than the required minimum income level for the specific number of household members for the specific bedroom size; you will not be eligible for an apartment. The only time this doesn't apply is if you can prove that you paid higher rent in the previous 12 months.

If your annual income exceeds the maximum income requirements for the specific number of Household members and bedroom size, you will not be eligible for an apartment.

STUDENT STATUS

As a LIHTC (Low Income Housing Tax Credit) community, student status in the household is an important matter for tax compliance. Due to this status, generally households made up entirely of **FULL TIME** students **DO NOT QUALIFY**. Student Status exceptions are as follows:

1. All adults are married and ENTITLED TO file a joint tax return.
2. All adult members are single parents with minor children, the adult is not a dependent of any third party, and the children are only claimed by a parent.

3. The household includes a member who receives assistance under Title IV Welfare a. (TANF).
4. The household includes a member who formerly received foster care assistance.
5. The household contains a member, who gets assistance under the Job Training i. Partnership Act, (JTPA) or under other similar, Federal, State or local laws.
6. This information must be verified to ensure household qualifications.

CREDIT SCREENING

An application fee of \$50.00 for each applicant over the age of 18 years old must be submitted to begin the application process. This is to be paid to **Whispering Hills** in cleared funds, i.e. Money Order, Certified Bank/Cashiers Check will be accepted.

NO CASH OR PERSONAL CHECKS.

The applications will be accepted the following way:

Mailed or hand delivered to **Whispering Hills**, 465 North Main Street, Barnegat NJ 08005

To verify the credit of applicants over the age of 18, **Whispering Hills Apartments** uses a 3rd party credit verifier, The National Tenant Network (NTN). The NTN score must be 76 or higher to be acceptable, anything less will require a cosigner* with a score of 80 or higher, along with income which is equal to 4 times the monthly rent, to accept the application.

If neither of the above requirements are met, the application will be rejected. If the applicant does not get approved and chooses to get a cosigner, they must pay an application fee of \$50.00 (non-refundable) for the cosigner*.

*The cosigner's role has a financial responsibility if the lease holder falters in paying their rent. The cosigner will continue to be the cosigner for subsequent years or until the resident vacates.

*If you are informed that a cosigner is required to continue our application process, you have two (2) business days to return to the Leasing Office a signed/dated credit application completed by your selected cosigner. Along with this completed credit application, proper identification from your cosigner is required i.e. signed driver's license. If within this time period the Leasing Office does not receive the completed cosigner credit application you will be removed from our waiting list and the next applicant on the list will be contacted. If in the future you would like to submit a new preliminary application, please contact the Leasing Office to inquire about unit availability.

Applicants whose history indicates a pattern of inability to pay rent timely may be subject to rejection.

If the credit report is not acceptable due to an eviction, the previous landlord will be contacted to clarify if previous eviction was financially satisfied. If it is not satisfied, the applicant will be rejected.

Once the credit screening is approved, the household will receive a **Notice of Conditional Offer** and all applicants 18 and older will be required to complete a **NJ Supplemental Application**. This supplemental application will be used to start the process to screen for criminal history.

VAWA Violence Against Women Reauthorization Act of 2013 ("VAWA")

VAWA protects qualified tenants, participants, and applicants, and affiliated individuals, who are victims of domestic violence, dating violence, sexual assault, or stalking from being denied housing, evicted, or terminated based on acts of such violence against them.

APPLICATION DECISION

Once all applicants over the age of 18 meet both credit and background screening criteria, the application process will continue with the submission of our Application for Housing.

If An Application is Declined for a reason other than our withdrawal of a conditional offer due to criminal history: Applicants will be notified in writing of any application denial and given fourteen (14) days to respond in writing to request a meeting to discuss the rejection. Within 5 days after the scheduled meeting, written results regarding the appeal decision will be mailed to the applicant. All application fees are non-refundable.

If An Application is Cancelled: If for any reason you withdraw your application or notify us that you have changed your mind about renting an apartment, all application fees are non-refundable.

Failure to Execute the Lease: In the event that you fail to sign the Lease Agreement after application approval, all said fees and deposits are non-refundable.

If a unit is available for immediate occupancy and your application has been approved through our 3rd party verification company and NJHMFA, possession of the unit is required within 15 days of the approval date. If household cannot take possession of the available unit within this required time period, the application will be cancelled and new preliminary application for our waiting list will be required.

WAIT LIST

The Waiting List will **open** in Accordance with the Affirmative Fair Housing Marketing Plan and will occur when there aren't any specific unit types vacant, available to rent.

The Waiting List will be **closed** once the number of units on the Waiting List reaches 3 times the number of units on the property.

1. Application. Anyone who wishes to be placed on a waiting list must complete an application.
2. Receiving and recording the application. Upon receipt of an application for tenancy, the application will be recorded initialing the date and time received.
3. Data required on the wait list. The following data must be included in an application, which will be placed on the waiting list: Date/time submitted; Name of head of household; annual income level; identification of the need for an accessible unit, including the need for accessible features; unit size.
4. Selection. When a unit becomes vacant*, a selection will be based on the unit size available, preferences established for the property, income-targeting policies and requirements, and screening policies. Any current resident at **Whispering Hills** Apartments will take precedent over the applicants listed on the waiting list.
 - a. *If a telephone message has been left for you to start the application process for a vacant unit in our community, you have a period of two (2) business days to respond to our Leasing Office. If within this time period the Leasing Office does not receive a response regarding your interest in the available unit, you will be removed from the waiting list and the next applicant on the list will be contacted. If in the future you would like to submit a new preliminary application, please contact the Leasing Office to inquire about unit availability.
5. Confirmation. You will receive a letter from the office confirming your status on the waiting list.
6. Notification: Updating the leasing office with changes in address, income and or household composition is recommended.
 - i. -If household income changes, it is important to contact the Leasing Office as soon possible. In doing this it will ensure that your household is on the waiting list specific to your household income level.
 - b. -If would like change the size of the unit originally requested on your preliminary application, you must reapply and your application will be treated as new.
7. Update: List will be updated every 6 months, with correspondence. If you do not respond to our letter, you will be removed from the waiting list.

SPECIAL NEEDS SET ASIDE UNITS

Whispering Hills has (5) units set aside for applicants with Special Needs. These reserved units will be occupied by applicants referred to us by contracted supportive housing agencies located in Ocean County. Specific to the special needs set aside units; exceptions may be considered related to the credit screening criteria

TRANSFER POLICY

1. Current residents that request, in the form of a letter, a transfer to a different size unit due to a change in household composition, or to make a reasonable accommodation, will be considered a priority and will be placed on the wait list accordingly.
2. Current residents must remain in the income level in what was determined at the time of leasing. For example, if you leased at a 2 Bedroom Moderate level income and now require a 1 Bedroom, due to a change in household composition, the level remains the same; Moderate. Regardless of a decrease or increase in household income.

3. If a current resident needs to be placed in a smaller unit due to the death of a family household member, upon an available unit, the current resident must transfer.

REASONABLE ACOMMODATIONS

1. A reasonable accommodation is a structural change made to an existing unit occupied by a person with a disability (and disability is typically defined as an individual with a physical or mental impairment that substantially limits one or more major life activity) in order to afford such a person the full enjoyment of the premises.
2. A reasonable modification is a change, exception, or adjustment to a rule, policy or practice used in running a community.

TERMINATION OF LEASE

According to the signed lease, the current resident listed in the lease agreement will be responsible for the lease terms, which are (12) twelve months. If a 60 days notice is obtained, the lease holder is still responsible for the lease until Management can get the unit occupied.

PET POLICY

This is a NO pet policy apartment community. Service Animals are accepted with medical documentation only.



EQUAL HOUSING OPPORTUNITY

Whispering Hills and all its associates support the principle of equal housing opportunities and adhere to the Fair Housing Laws. The company does not discriminate in the daily management of the communities, leasing of apartment homes or in any business practices related to its services, on the basis of race, color, religion, national origin, sex, familial status, handicap or any other factor under protection by federal, state or local laws.

All applicants must agree to the following by signing this *Tenant Selection Policy/ Criteria Form*.

_____ (Initials) I agree to respond to a request for verification of information or to provide additional information or documentation necessary to complete the approval process, within the time specified by my community representative. I understand that if I do not respond within the time specified, my application may be canceled and I will no longer have an apartment on hold. In addition, I will forfeit all monies already paid to the community including all application fees.

_____ (Initials) I affirm that this information and the information I have provided on my application paperwork is accurate to the best of my ability. I understand that falsification of information on the application and/or during application interview will result in immediate application denial.

I hereby affirm that I have read and understand a copy of the **Tenant Selection Policy/ Criteria Form**.

I understand the application screening process in which **Whispering Hills** community will proceed to obtain and verify my credit information, criminal background history and other information that I have provided for the purpose of determining whether or not I meet the criteria in order to rent an apartment.

Applicant Signature

Print Name

Date

Applicant Signature

Print Name

Date

Applicant Signature

Print Name

Date

FOR OFFICE STAFF ONLY: VERIFY COMPLETION OF:

- | | | |
|--|--|--|
| <input type="checkbox"/> Equal Housing Opportunity | <input type="checkbox"/> Selection Policy/Criteria Affirmation | <input type="checkbox"/> Preliminary Application |
| <input type="checkbox"/> NTN Form | <input type="checkbox"/> Application Fee | <input type="checkbox"/> MDRR |
| <input type="checkbox"/> NJ Fair Chance in Housing Act | Leasing Staff Name/Date _____ | |





FOR OFFICE ONLY:
DATE: _____
TIME: _____
NO. _____

PRELIMINARY APPLICATION FOR AFFORDABLE HOUSING

Please read enclosed directions carefully. Incomplete applications will be returned.

PLEASE PRINT- HEAD OF HOUSEHOLD INFORMATION

First, Last Name		Email Address:
Address, City, State, Zip Code		County:
Home Phone Number:	Cell Phone Number:	Alternate Phone Number:

How many bedrooms are you interested in: 1 2 3

Does anyone in the household receive housing assistance? Yes No

1. HOUSEHOLD COMPOSITION (LIST ALL PERSONS TO LIVE IN HOME) AND INCOME

Name(s) First & Last	Head of Household	Date of Birth	Gender (M/F)	Current Gross Annual Income*	Student (Y/N)
				\$	

*Income includes, but is not limited to Gross wages, salaries, tips, commission, child support, pensions, and social security & disability benefits.

2. ASSETS (SAVINGS, CDS, STOCK, REAL ESTATE, OTHER INVESTMENTS, ETC.)

Type of Asset	Current Market Value	Yearly Interest of Dividends*

*Include Interest and Dividends from assets such as Savings, Checking, CD's, Money Market accts, mutual funds, stocks and/or bonds.

I certify that the information provided herein is true and complete and that any misrepresentation of income or household size reported Herein shall be cause for program disqualifications. I also understand that this information is to be used only for determining my preliminary eligibility for referral to an affordable housing unit and does not obligate me in any way.

Print Name of Head of Household

Signature of Head of Household

Date



MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

The **New Jersey Law Against Discrimination**, *N.J.S.A.* 10:5-1 to -49, makes it unlawful to discriminate in the sale or rental of housing based on a person's race, creed, color, national origin, ancestry, nationality, affectional or sexual orientation, disability, gender, marital status, familial status (whether you have a child, a parent-child relationship with a minor, or you are pregnant), lawful source of income or rental subsidy used for rental payments.

The **New Jersey Division on Civil Rights** is the State agency that is authorized to enforce the Law Against Discrimination. Under the Division's **Multiple Dwelling Reporting Rules**, *N.J.A.C.* 13:10-1.1 to -2.6, the Division requires landlords to collect and record information about applicants for apartment rentals and tenants in apartment complexes throughout New Jersey. The **Multiple Dwelling Reporting Rule** requires landlords to provide a summary of this information to the Division and to retain the information on this form. **The information is used to prevent and eliminate discrimination in housing.**

Your cooperation in filling out this form will assist the Division in enforcing the Law Against Discrimination.

Please note that, although landlords must record certain information about the race and ethnicity of applicants and tenants, it is unlawful to record or ask applicants or tenants about other characteristics such as religion, gender, marital status or affectional or sexual orientation.

If you feel you have been denied housing or treated differently for one of the reasons listed above, you may contact the Division on Civil Rights at (609) 984-3138 for referral to a local Division office for additional information or assistance.

Visit the Division on Civil Rights Web site at: www.NJCivilRights.org

E

Tenants/applicants: Fold & tear along dotted line and retain top portion for your records

MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

If the tenant/applicant chooses not to complete this form, the landlord or the landlord's representative is required to conduct a visual observation of the tenant or applicant and then complete this form as accurately as possible.

This form is not intended to be a part of the rental application process and must be kept separate and apart from rental records.

Tenant Applicant Name: _____

Address: _____

City: _____ State: _____ Zip code: _____ Phone Number: _____

Race/Ethnicity: Please check all that apply to leaseholders (tenants) or applicants.

- Black or African American: a person having origins in any of the original peoples of Africa
- Hispanic or Latino: a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish origin or culture, or a person having a Spanish surname
- Asian: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- American Indian or Alaska Native: a person having origins in any of the original peoples of North or South America
- Native Hawaiian or Other Pacific Islander: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White or Caucasian: a person having origins in any of the original peoples of Europe, the Middle, or North Africa

Date: _____ Completed by: Tenant Applicant Landlord

If you have any questions regarding this inquiry please contact the Division on Civil Rights, Multiple Dwelling Unit at 609-984-3138 between the hours of 9:00 to 5:00 Monday through Friday, or e-mail the MDRR unit at DCRMDRR@njcivilrights.org DCR/HIU/MDRR/LS20



WHISPERING HILLS



FORMS CAN BE RETURNED OR MAILED TO:

BY MAIL: Whispering Hills

Leasing Office, 465 North Main Street, Barnegat NJ 08005

DROP OFF (M-F 10am – 2:00pm): Whispering Hills

Leasing Office, 465 North Main Street, Barnegat NJ 08005

- ✓ Preliminary Application
- ✓ Multiple Dwelling Report Form. Each household member must meet our age requirements
- ✓ \$50.00 Application fee (non-refundable) for each household member 18 years or older
i.e., (Money Order, Certified Bank/Cashiers Check) **only when prompted by Leasing Office.**

I /We understand the Selection Criteria, and the Forms that must be returned to Whispering Hills office staff.

*More importantly, this **DOES NOT** grant me an apartment until all the documents have been submitted to the leasing office in a timely manner and approval has been obtained from Windsor, the Tax Compliance group (LIHTC) and State approval, (NJHMFA). If you cannot submit documents in a timely fashion, you will be declined for an apartment.*

Applicant Signature	Print Name	Date
---------------------	------------	------

Applicant Signature	Print Name	Date
---------------------	------------	------

Applicant Signature	Print Name	Date
---------------------	------------	------

Applicant Signature	Print Name	Date
---------------------	------------	------

