

## APPLICATION FOR MEMBERSHIP

### MEMBER SELECTION CRITERIA

The Member Selection Criteria at Concord Village requires applicants to supply all available references which will verify their qualification for membership and demonstrated ability to pay carrying charges on time, take proper care of the property and adhere to community rules. Such references will include but are not limited to:

- A complete three (3) year Residential History.
- A complete three (3) year Employment/Income History.

A complete copy of the Member Selection Criteria is available in the Concord Village Management Office upon request.

Concord Village gives preferences to persons who have been displaced by government action or presidentially declared disaster. Please inform staff of this if you meet this preference status.

### \*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Applicant Name: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_  
# of persons in household: \_\_\_\_\_ Is this household disabled?: \_\_\_\_\_  
Date and time application received: \_\_\_\_\_  
Name of staff member receiving application: \_\_\_\_\_ Initials: \_\_\_\_\_

**Application acceptance checklist** (All items below must be checked off for applicant to be put on the Wait List):

Application filled out completely:	_____
Application signed by all adult applicants:	_____
Application reviewed with applicant:	_____
Household appears to qualify for membership:	_____
Applicant informed of	_____
1. Sex Offender Policy	_____
2. Criminal Background Check	_____
3. Credit Check	_____
4. Pet Guidelines	_____
5. Estimated wait list time	_____
Applicant provided copy of Wait List Letter:	_____
Applicant informed of minimum equity buy-in amount and subscription fees:	_____

### TO BE FILLED OUT UPON RESALE

Unit/ Address purchased: \_\_\_\_\_ Date Purchased: \_\_\_\_\_

Notes: \_\_\_\_\_

# PERSONAL INFORMATION

Applicant's Name: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Work/Alternate: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Apt.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_ year (s) \_\_\_\_\_ month (s).

Have you previously resided or applied to purchase at Concord Village? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## HOUSEHOLD COMPOSITION AND CHARACTERISTICS

List the Head of Household and all other household members who will be living in the unit. Give the relationship of each additional member to the Head of Household.

No.	Full Name	Social Security #	Birthdate	Age	Sex	Relationship
Head						
2						
3						
4						
5						
6						
7						
8						

## PERSONAL REFERENCES

List the names, addresses, and phone numbers of two friends or relatives who know you and generally know how to contact you.

1. Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Do you know anyone who lives or has lived at Concord Village? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## CURRENT INCOME

For each type of income that you currently receive, give the amount that you expect to receive from that source in the future. Include Employment, AFDC, Social Security, SSI, unemployment, child/spousal payments, etc.

Employer:	Start Date:
Address:	Phone:
City, State, Zip:	\$ _____ month
Supervisor:	Case #:
Employer:	Start Date:
Address:	Phone:
City, State, Zip:	\$ _____ month
Supervisor:	Case #:

## PRIOR INCOME/EMPLOYMENT

List any employers or other sources of regular income that you have received during the last three years. DO NOT INCLUDE ANY SOURCES LISTED IN CURRENT INCOME.

Employer:	Start Date:	End Date:
Address:	Phone:	
City, State, Zip:	\$ _____	month
Supervisor:	Case #:	
Employer:	Start Date:	End Date:
Address:	Phone:	
City, State, Zip:	\$ _____	month
Supervisor:	Case #:	

## RESIDENTIAL HISTORY

List a complete history of where you have lived for the last THREE (3) years, including family members. Start with your current residence.

Community Name (if appl.):	Start Date:	End Date:
Address:	Phone:	
City, State, Zip:	Apt. #:	
Contact Information:	Rent Paid:	
Community Name (if appl.):	Start Date:	End Date:
Address:	Phone:	
City, State, Zip:	Apt. #:	
Contact Information:	Rent Paid:	
Community Name (if appl.):	Start Date:	End Date:
Address:	Phone:	
City, State, Zip:	Apt. #:	
Contact Information:	Rent Paid:	

## BANKING/ASSET INFORMATION

1. List all checking and savings accounts (including IRA's, Keogh's, money market, CD's, etc.) of all household members including accounts that have been disposed of during the last two years.

Family Member	Bank Name	Type Account	Address	Account #	Current Balance

2. List the value of all stocks, bonds, trusts, mutual funds, or other assets: \_\_\_\_\_

3. Do you own a home, land, or other real property? ( ) No ( ) Yes

If "Yes" explain: \_\_\_\_\_

4. Do you own property assets (i.e.: gold, collector cars, etc.)? ( ) No ( ) Yes

If "Yes" explain: \_\_\_\_\_

5. Have you sold or given away any home, real property or other assets in the last two years?

( ) No ( ) Yes If "Yes" explain (Include estimated Fair Market Value): \_\_\_\_\_

6. Do you receive any child support? ( ) No ( ) Yes

If "Yes" Amount: \$ \_\_\_\_\_ per week/month/year?

Child Support Provider's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

- A. Have you ever been evicted from an apartment or are you currently in the process of eviction?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- B. Have you ever had a home foreclosure or are you currently in the process of foreclosure?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- C. Have you ever been convicted of a felony crime or are you currently charged with a felony crime?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- D. Are you or any member of your household subject to a lifetime state sex offender registration program in any state?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- E. Are you or have you ever been addicted to any controlled substances (illegal drugs)?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- F. Are you or have you ever been involved with manufacturing, distribution or use of a controlled substance?  
 No  Yes, If "Yes" explain: \_\_\_\_\_
- G. Automobile: Make/Model: \_\_\_\_\_ Year: \_\_\_\_\_  
License Plate No.: \_\_\_\_\_ Color: \_\_\_\_\_

H. In Case of Emergency Please notify:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I hereby acknowledge the above information to be correct to the best of my knowledge and I authorize Concord Village to contact any of the above-references to ascertain my eligibility to purchase. I further understand that Concord Village may, at their discretion, choose to initiate additional reference checks and agree to provide such information upon request. I also authorize Concord Village to obtain and execute a credit, criminal background and sex offender check.

NOTICE: I FULLY UNDERSTAND THAT TITLE 13, SECTION 1001 OF THE UNITED STATES CODE STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES. I THEREFORE CERTIFY THAT THE FOREGOING INFORMATION IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INQUIRIES TO BE MADE TO VERIFY THE ABOVE STATEMENTS.

Head of Household: \_\_\_\_\_ Date: \_\_\_\_\_  
Spouse/Co-Head/Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Other Adult Family Member(s): \_\_\_\_\_ Date: \_\_\_\_\_

# CONCORD VILLAGE INC.

## Income & Occupancy Requirements

### Income Limits\* 5-31-11

Number of Persons	Maximum Annual Income
1	43,600
2	49,800
3	56,050
4	62,250
5	67,250
6	72,250
7	77,200
8	82,200

### Occupancy Limits\*

Number of Bedrooms	Minimum Number of Persons	Maximum Number of Persons
1	1	2
2	2	4
3	3	6
4	4	8

\*All income and occupancy limits are set according to current HUD guidelines and requirements.

# CONCORD VILLAGE INC.

## Acknowledgement of Pre-Qualification Status

I/We understand that should my/our application packet be deemed "pre-qualified", I/we will be offered the opportunity to be placed on the appropriate Waiting List. I/We further understand that a status of "pre-qualified" does not constitute approval of said application.

A status of "pre-qualified" is intended only to indicate that, to the best of management's knowledge, there are no immediate and obvious issues that would preclude the applicant from being approved after the application is fully processed. Preliminary calculations are done to determine if, based on the applicant's estimations of income and assets, the household income appears to qualify for residency. All other areas of the application are reviewed to determine if any questions are answered with information that would cause the applicant to not be qualified for membership. Should an applicant not receive a designation of "Pre-qualified", that applicant will not be offered an opportunity to be placed on the Waiting List.

Full processing of the application is completed only when the applicant reaches the top of the Waiting List and management has a unit to offer to the applicant. At that time, the application is fully processed and is either approved and deemed "Qualified" or declined and deemed "Unqualified". Only "Qualified" applicants will be offered membership and unit occupancy.

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Applicant Signature

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Date

## Waiting List Requirements for Concord Village

1. All eligible and acceptable applicants for whom the right size unit is not available will be offered the opportunity to be placed on a Waiting List.
2. An application must be filled out and returned to the manager before any applicant is added to the Waiting List. The manager will review the application for accuracy and note if there are any factors that would make the applicant ineligible. Assuming the application is filled out properly and there are no factors present that would make the applicant ineligible, the manager will then note the date and time of the submission on the application and place the application on the Waiting List.
3. As soon as an applicant is placed on the Waiting List he/she will be informed **in writing** of the following:
  - The applicant will be contacted by phone when an appropriate unit becomes available.
  - Approximately how long it will take for a unit to become available:
  - \_\_\_\_\_
  - The applicant is required to inform the property of any changes in current address and current telephone number.
  - The applicant is required to contact the property at least once every six months in order to remain on the Waiting List. The phone number for the office is (480) 946-4271.
4. When a unit becomes available, the next applicant on the Waiting List is contacted. Initial contact is attempted by phone or e-mail. If the applicant is not available, a message will be left for that applicant requesting a call back within 5 working days. A written notification of unit availability is also sent to the applicant also requesting contact with the manager within 5 working days. If no contact is received within 5 working days, the next name on the Waiting List will be contacted and so on until we receive a positive response from an applicant. The unit will be offered to the first applicant who is contacted by management in the course of contacting, in order, the next person on the Waiting List and responds that he/she wishes to take the unit.
5. If the applicant on the Waiting List refuses or is unable to accept a unit offer on two separate occasions, his/her name will be either removed from the Waiting List or moved to the bottom of the Waiting List at his/her request. Once that person gets to the top of the Waiting List again and again refuses or is unable to accept a unit offer on two separate occasions again, his/her name will be permanently removed from the Waiting List. If the applicant fails to contact the manager upon notification of unit availability, his/her name will be removed from the Waiting List. The applicant will also be removed from the Waiting List if mail sent to the applicant's address is returned as undeliverable.
6. Requests for immediate transfers between units, requiring placing that member at the top of the Waiting List, are granted upon request due to a change in household composition resulting in the household being under-housed and/or exceeding the 2-persons per bedroom standard, or as a reasonable accommodation to a household member's disability and/or medical needs. This accommodation does not require that the Waiting List be open. Appropriate third party verification of the disability and medical need will be required by management to support the accommodation request. HUD and management are the sole judges of what constitutes appropriate third party verification. Members who request a transfer for any other reason may be added to the bottom of the Waiting List providing that specific Waiting List is open.

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Applicant Signature

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Date