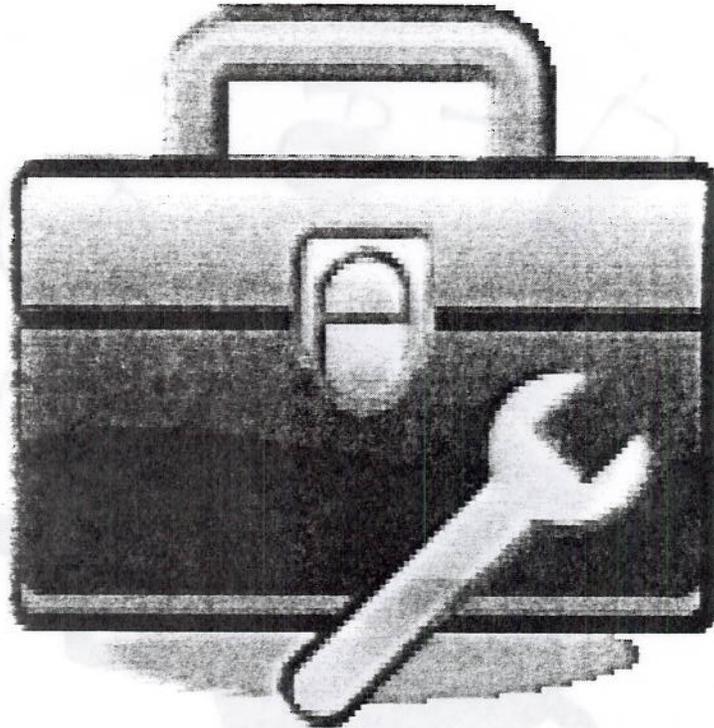


# TOOLS & TECHNIQUES

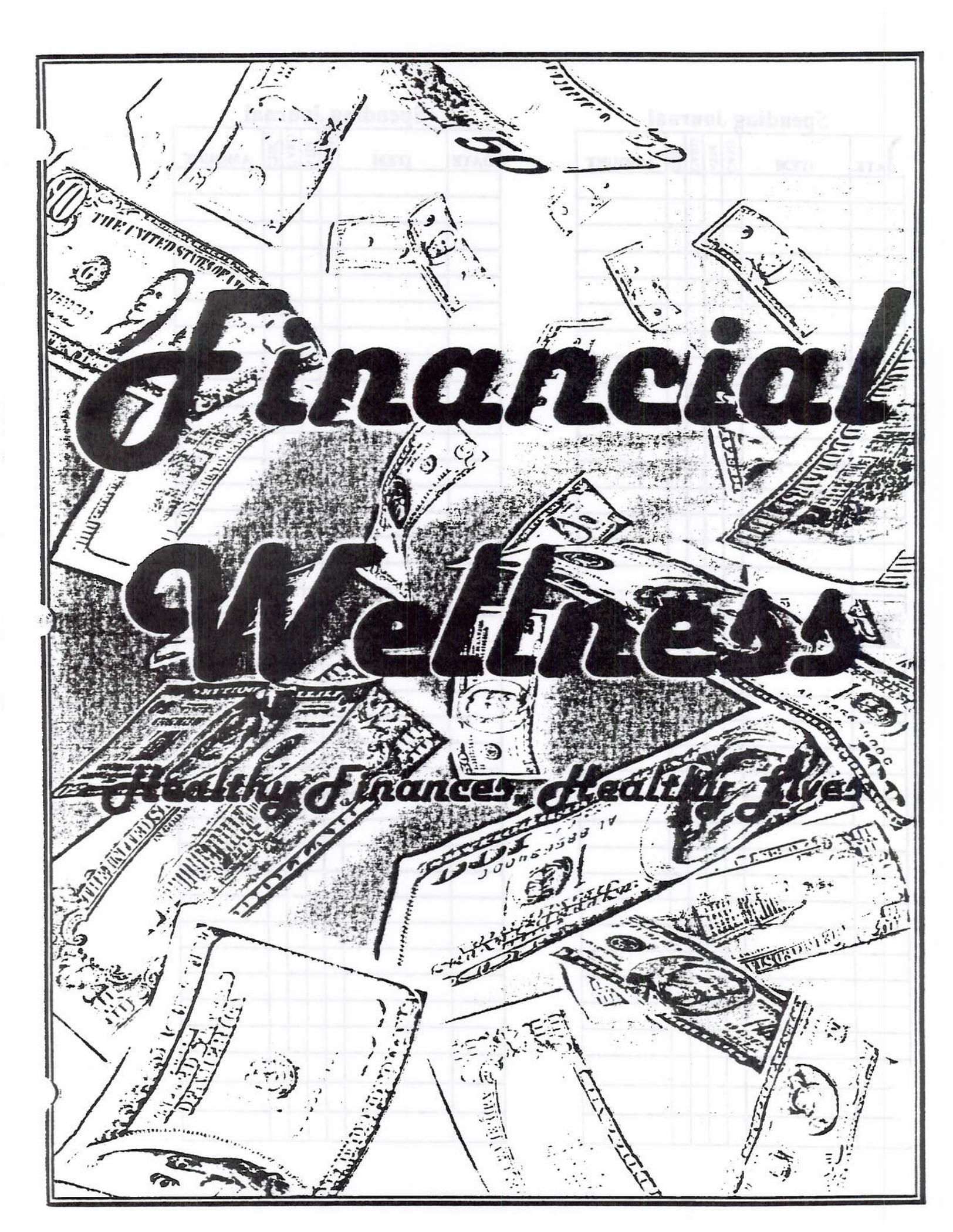


- Money Management
- Working with Landlords
- Fair Housing

# MONEY MANAGEMENT



- Spending Journal
- Personal Budget
- Monthly Budget



**Financial**

**Wellness**

*Healthy Finances, Healthy Lives*



**FINANCIAL EDUCATION SERVICES**

**FINANCIAL WELLNESS – HEALTHY FINANCES, HEALTHY LIVES**

**PERSONAL BUDGET**

Name: \_\_\_\_\_

Month: \_\_\_\_\_ Year: \_\_\_\_\_

Item	Debit	Credit	Total	Balance
<b>Balance Forward</b>				
<b>Deposits</b>				
SSI			\$ -	\$ -
SSA			\$ -	\$ -
VA			\$ -	\$ -
Other			\$ -	\$ -
Other			\$ -	\$ -
<b>Sub-Total</b>		\$ -	\$ -	\$ -
<b>Expenses</b>				
Rent			\$ -	\$ -
Gas			\$ -	\$ -
Water & Power			\$ -	\$ -
Local Phone			\$ -	\$ -
Long Distance Phone			\$ -	\$ -
Cellular Phone			\$ -	\$ -
Cable			\$ -	\$ -
Other Credit Card			\$ -	\$ -
Other			\$ -	\$ -
Other			\$ -	\$ -
Other			\$ -	\$ -
<b>Sub-Total</b>	\$ -		\$ -	\$ -
Savings			\$ -	\$ -
<b>Sub-Total</b>	\$ -		\$ -	\$ -
Allowance 1			\$ -	\$ -
Allowance 2			\$ -	\$ -
Allowance 3			\$ -	\$ -
Allowance 4			\$ -	\$ -
Allowance 5			\$ -	\$ -
<b>BALANCE</b>	\$ -		\$ -	\$ -

# Monthly Budget

For \_\_\_\_\_

Dates \_\_\_\_\_

## EXPENSES

### HOUSEHOLD

Rent/Mortgage \$ \_\_\_\_\_  
 Utilities (electric, gas, trash, water) \$ \_\_\_\_\_  
 Cable/Satellite TV and Internet \$ \_\_\_\_\_  
 Telephone and Long Distance \$ \_\_\_\_\_  
 Cell Phone \$ \_\_\_\_\_  
 Other Household Expenses \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### FOOD

Groceries \$ \_\_\_\_\_  
 Lunches and Snacks \$ \_\_\_\_\_  
 Eating Out \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### TRANSPORTATION

Car Payment \$ \_\_\_\_\_  
 Insurance \$ \_\_\_\_\_  
 Gasoline \$ \_\_\_\_\_  
 Maintenance and Repairs \$ \_\_\_\_\_  
 Public Transportation \$ \_\_\_\_\_  
 Other (parking, tolls) \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### HEALTHCARE

Doctor \$ \_\_\_\_\_  
 Dentist \$ \_\_\_\_\_  
 Prescriptions \$ \_\_\_\_\_  
 Medical Insurance \$ \_\_\_\_\_  
 Other Healthcare Expenses \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

## INCOME

Take Home Pay \$ \_\_\_\_\_  
 Allowance \$ \_\_\_\_\_  
 Gifts \$ \_\_\_\_\_  
 Part-time Jobs and Chores \$ \_\_\_\_\_  
 Other Sources \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### LOOKING GOOD

Clothes and Shoes \$ \_\_\_\_\_  
 Toiletries \$ \_\_\_\_\_  
 Laundry and Cleaners \$ \_\_\_\_\_  
 Hair Care \$ \_\_\_\_\_  
 Other Looking Good Expenses \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### JUST FOR FUN

Movies/Games/Concerts \$ \_\_\_\_\_  
 Dates/Trips \$ \_\_\_\_\_  
 Music Purchases \$ \_\_\_\_\_  
 Books/Magazines/Newspaper \$ \_\_\_\_\_  
 Hobbies \$ \_\_\_\_\_  
 Other \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

### MISCELLANEOUS

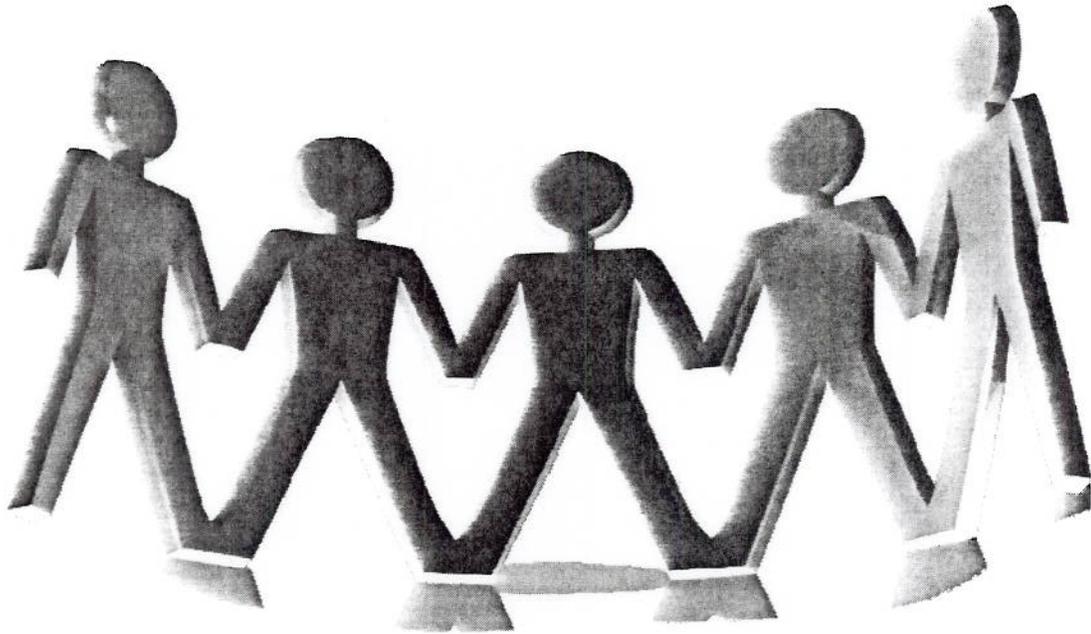
Credit Card \$ \_\_\_\_\_  
 Savings and Investments \$ \_\_\_\_\_  
 Education (tuition, books, fees) \$ \_\_\_\_\_  
 Gifts and Charity \$ \_\_\_\_\_  
 Pets \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

## GRAND TOTAL

**TOTAL ALL INCOME** \$ \_\_\_\_\_  
 Subtract - \_\_\_\_\_  
**TOTAL ALL EXPENSES** \$ \_\_\_\_\_  
**BOTTOM LINE** \$ \_\_\_\_\_

- Divide annual income and expenses by 12 to get a monthly figure.
- Some expenses (like utilities) will change throughout the year, so use a monthly average.

# **WORKING WITH LANDLORDS**



- Exhibits for Overcoming Housing Barriers  
Developing an Individualized Housing Plan
- Exhibits for Overcoming Housing Barriers  
The Application Process
- Exhibits for Finding Affordable Apartments



Overcoming Housing Barriers—  
*Developing a Individualized Housing Plan*  
Monday, June 14, 2010  
Los Angeles County Department of Mental Health  
Housing Specialist Training Institute

### **Addressing the Multiple Challenges**

- **Prior eviction/poor credit history**
- **Criminal background**
- **Drug/substance abuse**
- **Insufficient income**
- **Lack of life skills**

### **The Consumer's Housing Goals**

### **Treatment Team Approach**

### **Tenant College -- The role of transitional housing**

Carmen Hill, MBA, President,  
CitiHousing Real Estate Services  
[citihousing20@aol.com](mailto:citihousing20@aol.com)

Overcoming Housing Barriers—  
Developing an Individualized Housing Plan  
Monday, June 14, 2010  
Los Angeles County Department of Mental Health  
Housing Specialist Training Institute

Addressing the Multiple Challenges

**Exhibits for Overcoming Housing Barriers—  
Developing an Individualized Housing Plan**

- o Insufficient income
- o Lack of life skills

The Consumer's Housing Goals

Treatment Team Approach

Tenant College – The role of transitional  
housing

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# NEEDS ASSESSMENT

Client Name \_\_\_\_\_ Date \_\_\_\_\_ Case Manager \_\_\_\_\_

## Housing Goal/Needs

### Comments

Unit Size

Area

## Income

General Relief

SSI/SSDI

Employment

*Job Training*

*Formal Education*

No Income

## Health Issues

Alcohol Abuse

Drug Abuse

Mental Health

Hygiene/Health Education

Physical Condition/Illness

## Children

Number of Children under 18

Custody/Child Support Issues

Parenting classes

## Socialization

Leisure Activities/Interests

Attendance at Community Meetings

## Money Management

Credit History

Rental History

## Transportation Issues

Own a Car

Bus Pass/Access/Get-About

## Criminal History

Incarceration

Probation/Parole

Felony

County of Los Angeles Department of Mental Health  
Homeless and Housing Division  
HOUSING READINESS EVALUATION

This evaluation screens for readiness to live independently. It can also be used as a tool to help consumers identify the needed skills, and set goals and objectives towards housing/independent living. Certain skills have a high correlation with being able to maintain housing/independence. With the exception of #8, "YES" answers are associated with these skills.

REFERRAL AGENCY: \_\_\_\_\_ LENGTH OF CONTACT WITH CONSUMER: \_\_\_\_\_  
 CLIENT'S NAME: \_\_\_\_\_ MIS#: \_\_\_\_\_  
 REFERRED BY: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

	YES	NO
<b>1. CLIENT RECEIVES MENTAL HEALTH SERVICES</b>		
Case Management		
Psychiatric Care		
Prescriptions		
Other Supportive Services		
<b>2. CLIENT KEEPS APPOINTMENTS</b>		
<b>3. COMPLIES WITH TREATMENT</b>		
<b>4. CLIENT HAS MONEY MANAGEMENT SKILLS</b>		
<i>If "no", how is this being addressed? (Circle all that apply)</i>		
Case Management      Community Living Program      Other		
Money Management Program      Emerging Skill      Explanation Written On Back      No Plan		
<b>5. CLIENT HAS HOUSEKEEPING SKILLS</b>		
<i>If "no", how is this being addressed? (Circle all that apply)</i>		
Case Management      Community Living Program      Other		
Money Management Program      Emerging Skill      Explanation Written On Back      No Plan		
<b>6. CLIENT'S INTERPERSONAL SKILLS ARE APPROPRIATE FOR COMMUNITY LIVING</b>		
<i>If "no", how is this being addressed? (Circle all that apply)</i>		
Case Management      Community Living Program      Other		
Money Management Program      Emerging Skill      Explanation Written On Back      No Plan		
<b>7. CLIENT HAS LEISURE-TIME MANAGEMENT SKILLS</b>		
<i>If "no", how is this being addressed? (Circle all that apply)</i>		
Case Management      Community Living Program      Other		
Money Management Program      Emerging Skill      Explanation Written On Back      No Plan		
<b>8. SUBSTANCE ABUSE/HISTORY OF SUBSTANCE ABUSE</b>		
<b>9. SOBRIETY IS BEING ADDRESSED (USE BACK TO EXPLAIN)</b>		
<b>10. PARENTING SKILLS ARE ADEQUATE</b>		
<i>If "no", how is this being addressed? (Circle all that apply)</i>		
Case Management      Community Living Program      Other		
Money Management Program      Emerging Skill      Explanation Written On Back      No Plan		
<b>11. THERE IS A FINANCIAL PLAN TO PAY FOR RENT</b>		
Employment		
SSI/SSD		
General Relief		
Other Subsidy		
<b>12. CLIENT UNDERSTANDS TERMS OF RESIDENCY</b>		
<b>13. CLIENT'S HEALTH PERMITS LIVING INDEPENDENTLY</b>		

# Get the credit you deserve!!

Order free copy of your credit report:

800-322-8228

[www.annualcreditreport.com](http://www.annualcreditreport.com)

NAME	TASK	COMPLETION DATE

HOUSING

# FRESH START HOUSING PROGRAM

Personal Plan to Secure Permanent Housing

Client \_\_\_\_\_

ECHO Code \_\_\_\_\_

Case Manager \_\_\_\_\_

Date \_\_\_\_\_

The objectives for the next three (3) month period from: \_\_\_\_\_ to: \_\_\_\_\_ are:

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_
- 5.) \_\_\_\_\_

### SPECIFIC TASKS/RESPONSIBILITIES

What we plan to do to meet these objectives/achieve goals are:

NAME	TASK	APPROXIMATE DATE OF COMPLETION

We commit to working toward meeting the objectives listed above. \_\_\_\_\_

Housing Services  
Tenant Workshops

Tenant College

How to find an apartment

Topic will be divided into four workshops lasting 1 hour each. The workshops will consist of the following topics; Where to look for vacancies, How to complete a rental application, What to do & don't do while meeting with a perspective landlord, and Understanding a Rental Agreement.

Money Management

Topic will be divided into four workshops lasting 1 hour each. The workshops will consist of the following topics; Opening a bank account, Money saving tips, Paying yourself, and Saving for the future.

Dealing with Neighbors/Problems

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Reporting a problem, What to do & don't do when having a problem, and Managing with the stress.

When Reporting the Need for Repairs

Topic will be divided into four workshops lasting 1 hour each. The workshops will consist of the following topics; What is considered an emergency, When to report the problem, How to report the problem, What to do if the problem is not fixed.

When Moving out of an Apartment

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Giving a 30 day notice, Turning in the keys, and Getting your deposit back.

Move-In Assistance

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; How to apply, Requirements & How to meet them, & How to use the assistance.

Household Goods & Services

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Who qualifies & the requirements, How to apply for funds, How to use the funds.

Section 8 Housing Programs

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Shelter plus Care, Portable Section 8, and Housing Projects.

Tax Credit Housing

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Locating tax-credit housing, Requirements & meeting them, and How to apply for housing.

Checking your Credit Report

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; Getting a free credit report, Reading a credit report, and reporting discrepancies.

Other Affordable Housing

Topics will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; ACOF, SRO's, and Tax-Credit units.

How to Clean your Apartment

Topic will be divided into three workshops lasting 1 hour each. The workshops will consist of the following topics; How often to clean, How to clean the apartment, and What products to use & don't use.

How to Deal with the Stress of Day to Day Living

Topic will be divided into four workshops lasting 1 hour each. The workshops will consist of the following topics; Breathing Exercises, Listening to Music, Body & Mind Relaxation Techniques, and Anxiety Reduction.

Moving into an Apartment

What to do when moving into an apartment

Security Deposits

The laws governing security deposits.

# HOUSE RULES

1. This is an addendum to and becomes part of the rental agreement between Owner and Resident.
2. No persons, pets, or animals of any kind are permitted to occupy the premises other than those listed on the original rental agreement without the express prior written consent of owner or his agent.
3. Any resident who drinks excessively, uses premises for illegal activity or commits a nuisance will be subject to eviction.
4. No unnecessary noise due to loud talking, radios, televisions, stereos or musical instruments is permitted.
5. Hours for playing the above with the consideration of other residents are \_\_\_\_\_ a.m. to \_\_\_\_\_ p.m.
6. No rollerskating, skateboarding or riding bikes on the premises.
7. Laundry facilities are to be used only during the hours of \_\_\_\_\_ a.m. to \_\_\_\_\_ p.m. Please use machine as instructed and do not overload.
8. Management is not responsible for damage or theft of personal property. Tenant shall obtain own insurance for this purpose.
9. Resident is responsible for cost of repairs to plumbing, plumbing fixtures and appliances should damage be caused from negligence or misuse. Foreign items causing stoppage of waste, jamming of mechanisms is considered improper use and repair costs shall be paid for by resident.
10. Personal items such as bicycles, tools, brooms, toys, etc. shall be kept out of view. No rugs, towels, articles of clothing or any such items shall be hung on the exterior of the building, on balconies or in hallways. No mops, brooms or rugs are to be shaken from same, or from open windows.
11. Highly combustible items such as gasoline are prohibited and shall not be used or stored anywhere on premises.
12. Damage to the apartment and/or building and it's equipment and furnishings, above and beyond ordinary wear and tear, shall be paid for by resident.
13. Do not make any alterations in any way, (i.e., painting, hanging pictures, changing locks), without the prior written permission of owner or agent. Resident will be responsible for the cost of damages beyond ordinary wear and tear.
14. Residents are responsible for the conduct and cleanup of their invitees and guests.  
Residents are to park vehicles in space assigned to them by owner agent. Any unauthorized parking on premises is subject to towing at vehicle owner's expense. No extensive repair or washing of vehicles is allowed on the premises.
15. Your rental shall be kept in good and clean condition and free from any objectionable odors.

PLEASE FOLLOW THE ABOVE RULES AND REGULATIONS TO HELP KEEP COMMON AREAS CLEAN AND TO MAINTAIN A PEACEFUL, SAFE AND PLEASANT ENVIRONMENT FOR YOURSELF AND YOUR NEIGHBORS.

THANK YOU FOR YOUR CONSIDERATION AND PLEASE CALL IF WE CAN BE OF ANY HELP.

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Resident: \_\_\_\_\_ Date: \_\_\_\_\_





Overcoming Housing Barriers Part II—

*The Application Process*

Monday, June 14, 2010

Los Angeles County Department of Mental Health  
Housing Specialist Training Institute

### **Application Process**

- **Rental application—how to get an application accepted**
- **Mock Interview—how to answer the landlord's tough questions**

Carmen Hill, MBA, President,

CitiHousing Real Estate Services

[citihousing20@aol.com](mailto:citihousing20@aol.com)

Overcoming Housing Barriers Part II—  
The Application Process  
Monday, June 14, 2010  
Los Angeles County Department of Mental Health  
Housing Specialist Training Institute

## **Exhibits for Overcoming Housing Barriers— The Application Process**

- o Rental application—how to get an application accepted
- o Mock interview—how to answer the landlord's tough questions

[citihousing20@aol.com](mailto:citihousing20@aol.com)  
Citihousing Real Estate Services  
Carmen Hill, MBA, President

Application Rejected

APPLICATION TO RENT OR LEASE

Sample

APPLICANTS

PLEASE PRINT

FIRST	MIDDLE	LAST	BIRTH DATE	SOCIAL SECURITY	DRIVER'S LICENSE
Francine	Ann	Lewis	5-22-51	SST	CDL
OTHER NAMES USED WITHIN LAST 5 YEARS			HOME PHONE	BUSINESS PHONE	
None			909-364-8990	-	

ADDITIONAL OCCUPANTS

ALL OTHER PROPOSED OCCUPANTS	AGE	RELATIONSHIP TO APPLICANT
None		

EMPLOYMENT

	CURRENT EMPLOYMENT	PREVIOUS EMPLOYMENT	PREVIOUS EMPLOYMENT
EMPLOYED BY	None		
ADDRESS			
EMPLOYER PHONE			
OCCUPATION			
POSITION			
NAME OF SUPERVISOR			
DATES OF EMPLOYMENT	FROM TO	FROM TO	FROM TO
INCOME PER MONTH	SST \$ 721	\$	\$

RESIDENCE

	CURRENT RESIDENCE	LAST PRIOR	PRIOR
STREET ADDRESS	312 Park Ave	Homeless	
CITY	Pomona		
STATE AND ZIP	CA		
DATES OF STAY	1/1/02 to Present		
LAST RENT PAID	\$ 350	\$	\$
OWNER/MANAGER and PHONE NUMBER	Carol 909-360-1080		
REASON FOR LEAVING	This a board+care		

VEHICLES

AUTOMOBILES	MAKE	MODEL	COLOR	YEAR	LICENSE NO.
	Chaviv		Black	1985	CL 48751
MOTORCYCLES					



**CREDIT INFORMATION**

NAME OF BANK/S & L		BRANCH OR ADDRESS	ACCOUNT NO.	APPROX. BALANCE	
None			CHECKING:	\$	
			SAVINGS:	\$	
			CHECKING:	\$	
			SAVINGS:	\$	
CREDIT REFERENCES	ACCOUNT NO.	ADDRESS/CITY	PHONE	PRESENT BALANCE	MONTHLY PAYMENTS
None					

**PERSONAL REFERENCES**

IN CASE OF EMERGENCY NOTIFY	ADDRESS/CITY	PHONE	RELATIONSHIP
Carol Jones	TRiCity Mental Health	909-364-8100	Case mgr.
CLOSE FRIEND			
None			
NEAREST RELATIVE LIVING ELSEWHERE			

**GENERAL INFORMATION**

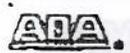
- Mother's Maiden Name Alexander
- When have you received welfare or Unemployment Insurance? No
- Do you have any water filled furniture or do you intend to use any water filled furniture in this apartment? No
- Do you have any pets? No If so, how many and what? \_\_\_\_\_
- Have you ever been evicted for non-payment of rent or any other reason? Yes
- Why are you leaving your present residence? Board and care - would like an apt - too noisy there
- Please explain any "yes" answers to General Information: car broke down and after getting it fixed owner would not accept rent

Applicant represents that all information given on this application is true and correct and hereby authorizes verification of all references and facts, including but not limited to obtaining Unlawful Detainer and Credit Reports. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.

The undersigned hereby applies to rent/lease Apartment No. \_\_\_\_\_ at \_\_\_\_\_ for \$ \_\_\_\_\_ per month and upon OWNER'S approval agrees to enter into a Rental Agreement and/or Lease and pay all rent and security deposits required before occupancy.  
 An Application fee of \$ \_\_\_\_\_ is hereby submitted for the cost of Credit Reports and processing this application.

Additional Information \_\_\_\_\_

Dated: \_\_\_\_\_ Applicant Franco Hernandez  
 Applicant \_\_\_\_\_



**SAMPLE OF SCREENING PROCEDURES USED BY LEASING AGENT  
FOR HUD APARTMENTS**

**You should ask them...**

**If they, or anyone who would be living with them, has ever been convicted of a crime?**

**If, so - for what?**

**You should ask them...**

**If they, or anyone who would be living with them, is currently a member of a Gang?**

**If so, you CAN tell them that you're sorry, However, you don't rent to gang members**

**Let them know that ...**

**You work very closely with Code Compliance and the Police Department**



**Applicant Screening...**

- ✓ Criminal Background checks, Credit reports, & Eviction checks
- ✓ Employment & Residence checks
- ✓ References - Call to verify they exist

**Are Criminal Background Checks Legal? YES!**

- When the information is obtained from a reliable source.
- When the information is limited to a reasonable time-frame.

**Accepting Applications**



**You are only required to ACCEPT the rental application:**

**There is NO requirement to PROCESS it, especially if the information provided clearly disqualifies the application on its face.**



**When they fill out the application:**

**It's preferable to have them fill it out in the office where you can watch them (whenever possible)**

**When they fill out the Application:**

**Explain that you MUST meet with EVERY applicant who will be living in the unit.**

**Make sure they provide the make, model, color & plate number of any vehicles they will park on the property, (if you don't have this section on your current application, revise it or create an addendum).**

**After they fill out the application:**

**Shock them...**

**Go over the application with them immediately, & confirm verbally all of the information they've provided**



**When you show your rental unit...**

- ✓ Applicants should show interest in the living quarters & ask questions.
- ✓ If no interest is shown in any part of the unit or its surroundings, this is a

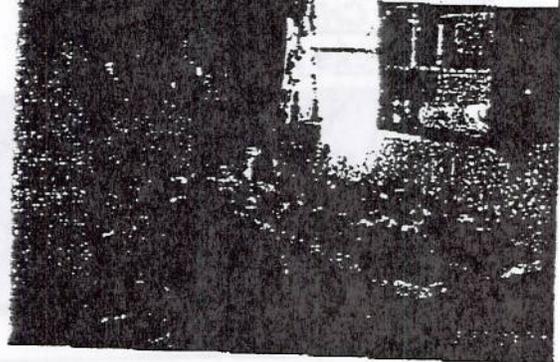
**RED FLAG!**

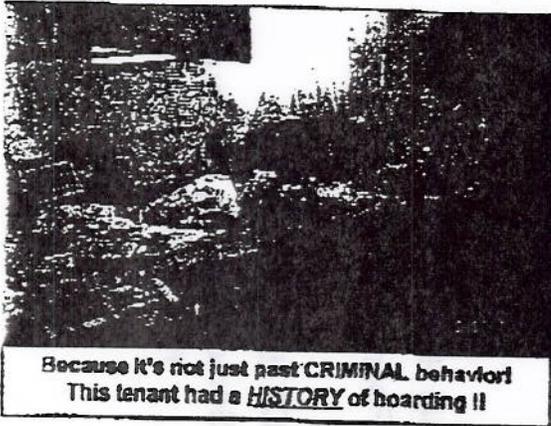
**When they leave the application to be processed...**

**Walk them out to their vehicle**

**See how they treat their own property; what makes you think that they will treat your apartment any better?**

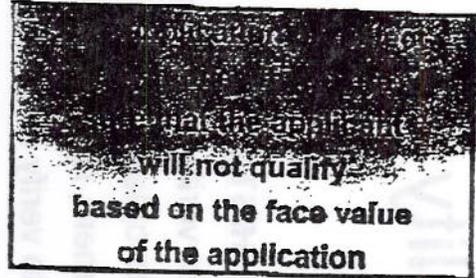
**Why is screening past behavior so important?**





Because it's not just past **CRIMINAL** behavior!  
This tenant had a **HISTORY** of hoarding !!

## Do not process:



will not qualify  
based on the face value  
of the application

### Checking Driver License & Social Security Cards

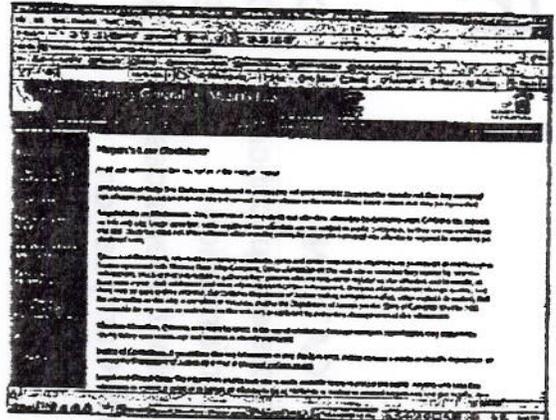
- ✓ Does it appear to be a valid ID or does it look suspicious?
- ✓ Get the DMV brochure on valid Driver Licenses & keep it handy for your reference
- ✓ Check the signature; is it the same as on the application?
- ✓ Check the photo; is it of the applicant?
- ✓ Compare the D/L #, name, address & DOB to the info on the application.
- ✓ Ask about any discrepancies & make notes of the responses.

### Banking Verification

- ✓ Ask the applicant to provide a few of his/her recent bank statements.
- ✓ Is the bank account in the name of the applicant?
- ✓ Check the beginning & ending balances, and the deposits (shows their "cash-flow" to match up with the claimed earnings).
  - ✓ Check for any NSF activity.
- ✓ Verify the address on the bank statements is the same as given on the application.

### Credit & Eviction Reports

- ✓ You may prefer to use a Tenant Screening Agency (TSA).
- ✓ A competent TSA will be able to find out if there are present or prior eviction cases.
- ✓ Your TSA should provide you with a credit report issued by at **LEAST** one of the major, national credit reporting bureaus.
- ✓ Typically, it is more cost effective if ordering both the credit report & eviction search together.
- ✓ Do not rely on a report supplied by the applicant; it may be doctored.



# Reasons for ineligibility

## APPLICATION:

- Incomplete application
- False information
- Insufficient references
- Family Composition

## CREDIT HISTORY:

- Delinquent debts
- Excessive financial obligations
- Bankruptcy

## RENTAL HISTORY:

- Unable to verify references
- Unable to obtain landlord reference
- Garnishment, repossession, law-suit, etc
- Unable to verify residence
- Unsatisfactory previous occupancy

## INCOME:

- Unable to verify employment
- Unable to verify income
- Income over the maximum income limit
- Insufficient income

## CRIMINAL RECORD:

- Conviction within the last (2) years for any crimes involving physical violence to persons or property or illegal drug activity of any kind

## IN HOME VISIT:

- Floor House Inspection

## OTHER:

- Senior housing community – no minors are permitted

From a property management company's operations manual for a HUD-subsidized building

## APPLICATION TO RENT OR LEASE

**APPLICANT** Each Applicant over the age of 18 must complete their own application form

**PLEASE PRINT**

First, Middle, Last Name	Date of Birth	Social Security #	Driver's License #
Other Names Used In the Last 10 Years	Home Phone	Work Phone	Cell Phone

**ADDITIONAL OCCUPANTS** List everyone, who will live with you:

First, Middle, Last Name	Relationship To Applicant

### EMPLOYMENT

	Current Employment	Prior Employment
Employer		
Address		
Employer Phone		
Job Title		
Name of Supervisor		
Dates of Employment	From:            To:	From:            To:
Income Per Month	\$	\$

### RESIDENCE

	Current Residence	Previous Residence	Previous Residence
Street Address			
City			
State & Zip			
Dates of Stay			
Owner/Manager and Phone number			
Reason For Leaving			
Last Rent Paid	\$	\$	\$

### VEHICLES

Automobiles	Make	Model	Color	Year	License No.
Motorcycles					

### PERSONAL REFERENCES

In Case Of Emergency, Notify	Address/City	Phone	Relationship
Close Friend			
Nearest Relative Living Elsewhere			



**CREDIT INFORMATION** Please list all your financial obligations

Name of Bank or Savings & Loan		Branch or Address		Account No.	Balance
				Checking	\$
				Savings	\$
Credit Accounts	Account No.	Address/City	Phone	Balance	Due Monthly

**GENERAL INFORMATION** Circle answer that applies

- Do you smoke? YES NO
- Do you have any pets? YES NO
- Have you ever filed for bankruptcy? YES NO
- Do you have any musical instruments? YES NO
- Do you have any water-filled furniture or do you intend to use water filled furniture in the apartment? YES NO
- Have you ever been convicted for selling, possessing, distributing or manufacturing illegal drugs or convicted of any other crime? YES NO
- Have you ever been evicted for non-payment of rent or any other reason? YES NO

Please explain any "yes" answers to the above questions:

---



---

Why are you leaving your current residence?

---

The applicant hereby applies to rent/lease Apartment # \_\_\_\_\_ at \_\_\_\_\_ for \$ \_\_\_\_\_ per month, and upon owner's approval agrees to enter into a Rental Agreement and/or Lease and pay all rent and security deposits required before occupancy.

An application fee of \$ \_\_\_\_\_ is hereby submitted for the cost of processing this application, to obtain credit history and other background information.

**Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords and employers, and personal references. Applicant hereby authorizes owner/agent to obtain Unlawful Detainer, Credit Reports, Telechecks, and/or criminal background reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Signature required)



FOR OFFICE USE ONLY:

Applicant name: \_\_\_\_\_  
Reviewed by: \_\_\_\_\_  
Date: \_\_\_\_\_



**Application for Admission (TCAC)**  
**One Application per Household**  
**(Duplicate submissions will be considered as grounds for denial.)**

Equal Housing Opportunity: \_\_\_\_\_ will comply with the provision of any federal, state, or local law prohibiting discrimination in housing on the basis of race, color, creed, ancestry, national origin, sex, sexual orientation, and familial status, source of income, age, disability, AIDS, or AIDS relation condition. TDD Telephone device for the hearing impaired (888) 877-5379 or California Relay Service.

To the applicant: Please fill out this form completely. All references will be checked and if any information is found to be false or incomplete, the application may be rejected. Use additional pages if more space is needed.

**Part I. APPLICANT INFORMATION**

1. Applicant: \_\_\_\_\_
2. Date of birth: \_\_\_\_\_
3. Social Security number: \_\_\_\_\_
4. Present address and telephone number  
Number and Street \_\_\_\_\_ Apt. # \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Cell Number \_\_\_\_\_
5. Mailing address, if different: \_\_\_\_\_
6. How long have you lived at your present address? \_\_\_\_\_
7. Unit size requested (please check one):  2 bedrooms,  3 bedrooms,  4 bedrooms
8. Do you or any member of your household have a disability that requires an accommodation? Yes  No   
Type of accommodation? \_\_\_\_\_

9. Other Household Members. List all the persons who are applying to live in the unit below.

	Name	Relationship to Applicant	Date of Birth	Age	Social Security Number
1					
2					
3					
4					
5					
6					
7					
8					
9					

9. Do you or any members of your household have pets (including fish, birds, rodents or reptiles)? Yes \_\_\_ No \_\_\_

Type: \_\_\_\_\_

**Part 2. HOUSEHOLD INCOME, ASSETS, AND SUBSIDIES**

10. Income. List all sources of income for all members of the household below. Please check "YES" or "NO".

<u>YES</u>	<u>NO</u>		<u>YES</u>	<u>NO</u>	
_____	_____	Employment	_____	_____	AFDC/GA ("Welfare")
_____	_____	Self-Employment	_____	_____	Unemployment Compensation
_____	_____	Social Security/ SSI	_____	_____	Pension/ Retirement Fund
_____	_____	Scholarship/Student Aid	_____	_____	Disability/Death Benefits
_____	_____	Insurance Policy	_____	_____	Severance Pay
_____	_____	Annuities	_____	_____	Strike Benefits
_____	_____	Alimony or Child Support	_____	_____	Regular Contribution or Gift (for rent, utilities, groceries, car
_____	_____	Award			Payment, insurance, etc. )
_____	_____	Other			

HOUSEHOLD'S TOTAL ANNUAL INCOME \$ \_\_\_\_\_

11. Assets.

- A. Check "YES" if any family member has one or more of that type of asset.
- B. Check "NO" if no family member has that type of asset.
- C. Check "DIVESTED" if any family member has disposed of that type of asset for less than fair market value within the past 24 months.

YES	NO	DIVESTED	
_____	_____	_____	Saving Account
_____	_____	_____	Checking Account
_____	_____	_____	Trust
_____	_____	_____	Real Estate, Rental Property, Rent
_____	_____	_____	Money Market Fund
_____	_____	_____	Stocks, Bonds, Treasury Bills, Certificate or Deposit Ira or Keogh
_____	_____	_____	Retirement or Pension Fund
_____	_____	_____	Inheritance, Lottery Winnings, Insurance Settlement Due
_____	_____	_____	Capital Gains, Capital Investments
_____	_____	_____	Personal Property held as an investment (Gems, Autos, Art, Etc.)
_____	_____	_____	Other: _____

HOUSEHOLD'S TOTAL ASSETS: \$ \_\_\_\_\_

Have you transferred any assets in the past 2 years in excess of \$1,000 to anyone? ( ) Yes ( ) No  
If yes please explain: \_\_\_\_\_

12. Subsidy. Do you have a Section 8 Certificate or other Rental Subsidy: [ ] Yes [ ] No

Type of unit: \_\_\_\_\_ Fair Market Rent \_\_\_\_\_

**Part 3. REFERENCES**

Use this space to list previous landlords for the last five years. If you have no previous landlord references, use this space to provide two other references and indicate their relationship to you. Also provide information about any prior evictions.

13. Current Landlord

Rental period covered:

Name \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Rent paid \$ \_\_\_\_\_ / mo.

Telephone \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Previous Landlord

Rental period covered:

Name \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Rent paid \$ \_\_\_\_\_ / mo.

Telephone \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

14. Termination of Tenancy. Have you or any member of your household ever been asked to leave any apartment in the past?

Yes  No

If yes, when? \_\_\_\_\_ And why? \_\_\_\_\_

15. Have you or any household member ever been convicted of a crime?

Yes  No If yes, explain: \_\_\_\_\_

16. Do you anticipate any changes in your household composition or income within the next twelve months?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes explain:

\_\_\_\_\_

17. Do you or any household members own a motor vehicle that you plan to park at the property? If so, what type and model of the vehicle(s):

Type	Model	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

#### Part 4. STUDENT INFORMATION

18. Any member of the household (over the age of 17) currently a full-time student, or planning to be one within the next 12 months? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, continue with the following questions: (You will need to provide verification of all items to which you answered YES)

YES	NO	
_____	_____	A. Are you married and currently filing a joint tax return?
_____	_____	B. Are you receiving AFDC/TANF (Aid to Families with Dependent Children)?
_____	_____	C. Are you enrolled in the Job Training Partnership Act (JTPA) or another similar local, county or state program?
_____	_____	D. Are you a single parent with children and neither you or the children are dependents on anyone else's tax return?
_____	_____	E. Will you be living with someone who is not a full-time student? If so who?

#### Part 5. OUTREACH

How did you hear about this property?

- Newspaper, name of newspaper \_\_\_\_\_
- Drive by signage \_\_\_\_\_
- Personal Reference \_\_\_\_\_
- Name of person \_\_\_\_\_
- Other, please specify: \_\_\_\_\_

**Part 6.EMPLOYMENT**

List current employment of all household members over the age of eighteen.

Household Member:  
Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Household Member:  
Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Household Member:  
Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Household Member:  
Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Household Member:  
Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Part 7. CERTIFICATION**

I/we certify that if selected to move into this project, the unit I/we occupy will be my/our primary residence.

I/we certify that the statements made in this application are true and complete to the best of my/our knowledge and belief.

I/we understand that false statements or information are punishable under federal law and are cause for denial of housing and will be grounds for immediate termination and cancellation of the rental agreement at the option of the landlord.

I/we understand that the above information is being collected to determine my/our eligibility for an apartment. I/we authorize the owner or his agent to verify all information provided on this application and to contact previous or current landlords, employers, or other sources for credit and verification information which may be released by appropriate federal, state, local agencies, or private persons to the owner/management.

I/we agree to allow management to perform a consumer credit check and a criminal background check on all adult household members. I/we agree to pay a credit check and criminal background-processing fee at the initial screening interview. This will be required prior to an applicant being processed.

I/we acknowledge receipt of the resident selection criteria for Puerto del Sol Apartment Homes. By signing below I



## Finding Affordable Rental Units

Tuesday, June 15, 2010

Los Angeles County Department of Mental Health  
Housing Specialist Training Institute

- Shared housing
- HUD Subsidized apartments (project based Section 8)
  - --[www.hud.gov](http://www.hud.gov) Click on Subsidized Apts
- City of Los Angeles Affordable Housing Roster
  - --[www.lahd.lacity.org](http://www.lahd.lacity.org)
- A Community of Friends (apts for homeless, mentally ill)
  - Contact Wm. Membreno 323-757-0679x 105
- Listings posted on [www.socialserve.com](http://www.socialserve.com)
- Tax credit apartments
  - Advertised in local newspapers
  - List published on internet
- [www.treasurer.ca.gov/ctcac/projects.xls](http://www.treasurer.ca.gov/ctcac/projects.xls)
- <http://treasurer.ca.gov/ctcac/owners.xls>
- Mom and Pop Landlords
  - For rent signs
  - Neighborhood newspapers

Landlord's perspective—panel of landlords that have rented to DMH consumers

Housing Specialist Training Institute  
Los Angeles County Department of Mental Health  
Tuesday, June 15, 2010  
Finding Affordable Rental Units

- Shared housing
- HUD subsidized apartments (project based Section 8)
  - --www.hud.gov Click on Subsidized Apts

## Exhibits for Finding Affordable Apartments

- City of Los Angeles Affordable Housing Roster
  - --www.lahd.lacity.org

- A Community of Friends (apts for homeless, mentally ill)
  - Contact Wm. Membrano 323-757-0879x 105

- Listings posted on www.socialserve.com

- Tax credit apartments
  - Advertised in local newspapers

- List published on internet
  - [www.treasurer.ca.gov/ctcac/projects.xls](http://www.treasurer.ca.gov/ctcac/projects.xls)

- <http://treasurer.ca.gov/ctcac/owners.xls>

- Mom and Pop Landlords
  - For rent signs

- Neighborhood newspapers

DMH consumers  
Landlord's perspective--panel of landlords that have rented to

*Want to live in a*

# HOUSE

**\$500** or less  
per month

with a

# Garden

What you need:

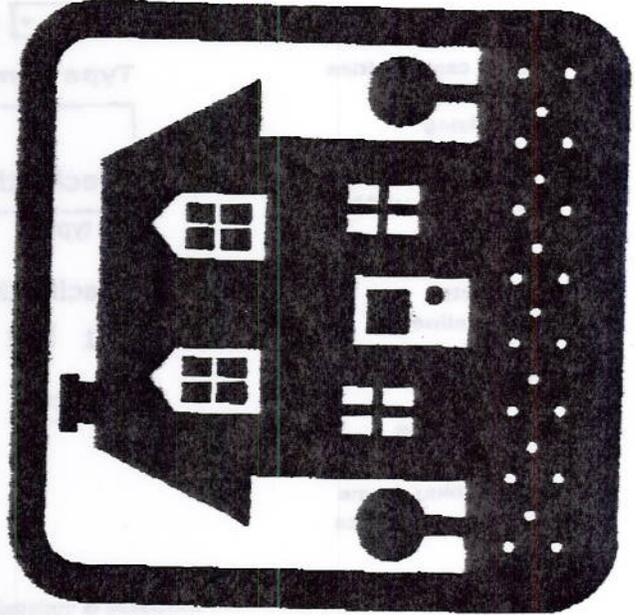
- SSI or other income
- Ability to take care of yourself
- Willingness to attend 3 self-help support groups a week
- Willingness to share a room with a roommate of your choice
- Desire to live in a warm, friendly environment
- Willingness to help with chores
- Desire to have a job or volunteer

For information call  
**TOLL FREE**

**1-877-SHARE-49**

1-877-742-7349

Houses will be available in all parts of Los Angeles County. Owners have final say on who moves into their houses. Houses will be visited on a regular basis to help residents with any problems. This project is supported by the Los Angeles County Department of Mental Health.



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- Common questions

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- Webcasts
- Mailing lists
- Contact us
- Help



# Subsidized Apartment Search California

[Information by email](#)  
[Email this to a friend](#)

To find subsidized apartments in California, provide one or more of the following pieces of information:

**1 Select a city:**

OR

**Select a County:**

OR

**Enter zip code:**

OR

**Type name of property**

**2 Specify the apartment type**

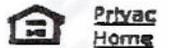
**3 Specify the number of bedrooms**

1  2  3  4  5 or more

Database is updated daily



U.S. Department of Housing and Urban Development  
 451 7th Street S.W., Washington, DC 20410  
 Telephone: (202) 708-1112 TTY: (202) 708-1455  
[Find the address of a HUD office near you](#)



*go to www.hud.gov and click on Subsidized Apartments*

Application # \_\_\_\_\_

### A COMMUNITY OF FRIENDS (ACOF) HOUSING ELIGIBILITY DETERMINATION FORM

Applicant Name \_\_\_\_\_

Social Security Num \_\_\_\_\_ Date of Birth \_\_\_\_\_

Is the applicant an AB2034 member?  yes  no  unknown

Has s/he applied to ACOF before?  yes  no Which property? \_\_\_\_\_

Primary Language \_\_\_\_\_

Service Provider/Case Manager \_\_\_\_\_

Agency \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

Total Monthly Income \_\_\_\_\_

Does the applicant have a diagnosed mental disability?  yes  no

Does the applicant have a diagnosed physical disability?  yes  no

Is the applicant currently homeless?  yes  no

Where is the applicant currently staying? (Please check box and list name of facility if applicable)

Transitional Program \_\_\_\_\_  Shelter \_\_\_\_\_

Crisis Program \_\_\_\_\_  Hospital \_\_\_\_\_

Other (Please describe) \_\_\_\_\_

Is the applicant a full-time student?  yes  no

Please list names, SSN, DOB and relationship of each person who will be living with applicant.

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

What Service Provider Area (SPA) are you in? \_\_\_\_\_

What property are you applying for? \_\_\_\_\_

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

Case mgr signature \_\_\_\_\_ Date \_\_\_\_\_

\*Please fax completed form directly to the property you are applying for. Incomplete eligibility determination forms will result in delay in processing.



Note: if the applicant requires an interpreter or has a disability and requires special accommodations, please contact the property manager so that reasonable accommodations can be made to meet their needs.

## EXAMPLES OF UPCOMING TAX CREDIT PROJECTS – 2010 AND 2011

### Vassar City Lights

3685 San Fernando Road, Glendale 91204  
Developer's phone number – 323-254-3338

- 10 Two-BR units \$511 - \$673
- 20 Two BR units \$852
- 40 Three BR units \$591 - \$1182

### 1600 N. Vine (Hollywood & Vine) Los Angeles 90028

78 affordable units in complex with 375 Luxury Units  
Developer Legacy Partners 949-930-6600  
[www.legacypartners.com](http://www.legacypartners.com)

### MacArthur Park Metro/ Developer: McCormack, Baron, & Salazar 213-236-2660

1901 W 7<sup>th</sup> Street

Los Angeles, CA 90057

- 90 Family units: 63 2BR's \$569 - \$654
- 27 3BR's \$881 - \$1014

### Ivy Terrace/ Developer: Abode Communities 213-225-2730

13751 Sherman Way, Van Nuys 91405

- 53 Family Units: 23 1BR's \$426 - \$852
- 10 2BR's \$511 - \$1022
- 12 3BR's \$690 - \$1182
- 4 4BR's \$769 - \$1318

### Andalucia Heights Family Apts

431-433 Lucas Street, 440-458 S Hartford St, Westlake

85 Family Apartments (1 to 4 BR's)

Developer: AMCAL Housing [www.amcalhousing.com](http://www.amcalhousing.com)

### Temple Villas Family Apts

1417-1429 W Temple Street, Beaudry/Echo Park

52 family units: 1 to 4BR's

Developer: AMCAL Housing [www.amcalhousing.com](http://www.amcalhousing.com)

### Adams & Central

938 E Adams Blvd., Los Angeles 90011

30 family units: 1 to 3 BR units

Solari Enterprises – 714-363-4090

[www.solari-ent.com](http://www.solari-ent.com)

# WORKING WITH LANDLORDS

**Aim For**



**The Purse**



**Not The**

**Heart**

**AFFORDABLE RENTAL OPPORTUNITY**

46 affordable units in brand new luxury building in

**Downtown Los Angeles/Little Tokyo**

Amenities include washer & dryer in every apartment, glass shower, fitness center, pool, bar/bisque, club room, roof terrace, business center, laundry storage, parking

Apts. available	Apartment Size	Household Size	Initial Annual Income Range Minimum - Maximum	Rent
2	Studio	1	\$18,315 - \$22,200	\$487
		2	\$18,315 - \$25,360	
4	1-BR	1	\$19,602 - \$22,200	\$500
		2	\$19,602 - \$25,360	
1	2-BR	2	\$23,562 - \$25,360	\$393
		3	\$23,562 - \$28,560	
		4	\$23,562 - \$31,720	
11	Studio	1	\$22,869 - \$27,750	\$625
		2	\$22,869 - \$31,700	
20	1-BR	1	\$24,519 - \$27,750	\$649
		2	\$24,519 - \$31,700	
8	2-BR	2	\$29,436 - \$31,700	\$771
		3	\$29,436 - \$33,700	
		4	\$29,436 - \$39,650	

\*Rent and Income Requirements may be subject to change based on new HUD Income Limits being issued prior to income certification.

You may request an application by sending your complete mailing name and address, including apt number and zip code, to Little Tokyo Apartments, P.O. Box 26229, Los Angeles, CA 90026, by toll-free fax to 666-348-6866 or by e-mail to [littletokyorequests@ltd.com](mailto:littletokyorequests@ltd.com)

Applications will be accepted on a continuing basis for all units. Applications processed in order of receipt.



Los Angeles  
Sentinel

6/4/09

Los Angeles  
Sentinel

6/4/09

Call: 323-753-3427

APARTMENTS UNFURNISHED 6005

**Grand New Affordable Housing Now Leasing**

The Ardmore Apartments Homes  
959 S. Ardmore Avenue, Los Angeles CA  
Units available for Occupancy Summer 2009

For Application:  
Please send a postcard with your name, phone and address to:

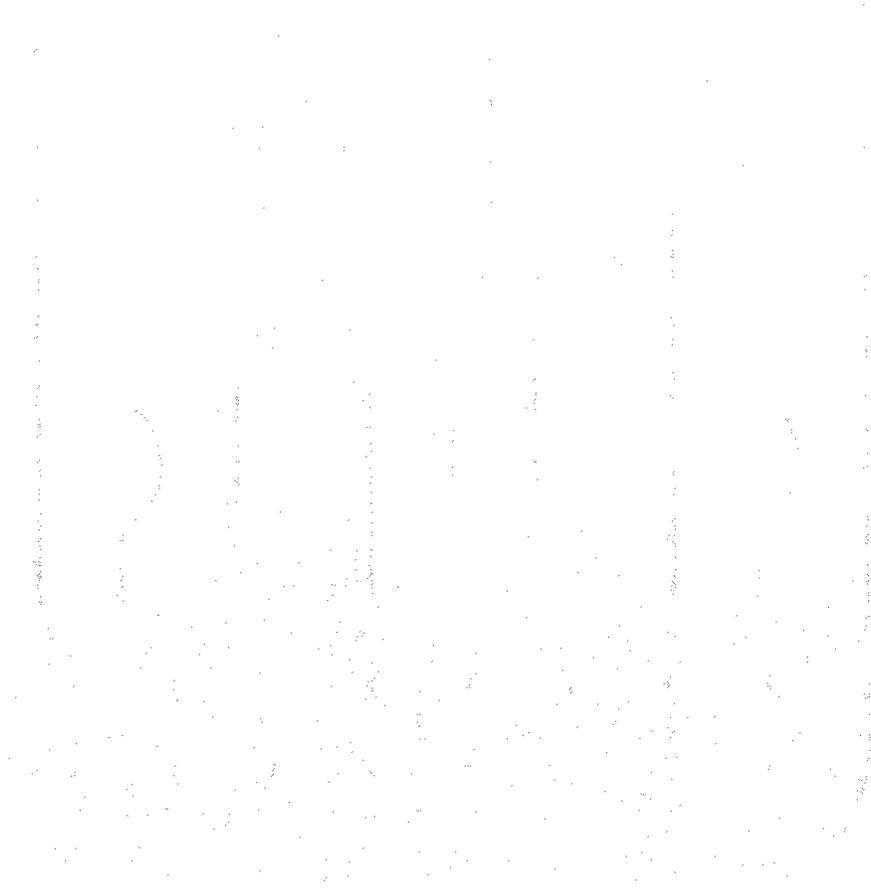
The Ardmore Apartment Homes  
c/o The John Stewart Company  
624 S. Grand Avenue, #2500  
Los Angeles, CA 90017

APARTMENTS UNFURNISHED 6005

**LOW INCOME SENIOR HOUSING**

Opportunity to be added to the Waitlist. Applications for Medford Avenue Senior Housing (One Bedroom) located at 1151 Medford Avenue, Los Angeles, CA 90029 and Miracle Mile Senior Housing (Single/Studio) located at 404 Cochran Ave., Los Angeles, CA 90036 will be available starting June 5, 2009, by calling (818) 973-4410. Applications will not be available at the property. Applicants must be 62 years of age at the time of application and meet HUD approved income limits, one person \$27,750 and two people \$31,700. Rent is 30% of qualified tenant's adjusted income. Applicants must have a returned postmark by July 10, 2009.

# FAIR HOUSING



**HUD News**

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Help



## Fair Housing--It's Your Right

### Fair Housing Act

HUD has played a lead role in administering the Fair Housing Act since its adoption in 1968. The 1988 amendments, however, have greatly increased the Department's enforcement role. First, the newly protected classes have proven significant sources of new complaints. Second, HUD's expanded enforcement role took the Department beyond investigation and conciliation into the area of mandatory enforcement.

Complaints filed with HUD are investigated by the Office of Fair Housing and Equal Opportunity (FHEO). If the complaint is not successfully conciliated, FHEO determines whether reasonable cause exists to believe that a discriminatory housing practice has occurred. Where reasonable cause is found, the parties to the complaint are notified by HUD's issuance of a Determination, as well as a Charge of Discrimination, and a hearing is scheduled before a HUD administrative law judge. Either party - complainant or respondent - may cause the HUD-scheduled administrative proceeding to be terminated by electing instead to have the matter litigated in Federal court. Whenever a party has so elected, the Department of Justice takes over HUD's role as counsel seeking resolution of the charge on behalf of aggrieved persons, and the matter proceeds as a civil action. Either form of action - the ALJ proceeding or the civil action in Federal court - is subject to review in the U.S. Court of Appeals.

### Significant Recent Changes

1. The Housing for Older Persons Act of 1995 (HOPA) makes several changes to the 55 and older exemption. Since the 1988 Amendments, the Fair Housing Act has exempted from its familial status provisions properties that satisfy the Act's 55 and older housing condition.

First, it eliminates the requirement that 55 and older housing have "significant facilities and services" designed for the elderly. Second, HOPA establishes a "good faith reliance" immunity from damages for persons who in good faith believe that the 55 and older exemption applies to a particular property, if they do not actually know that the property is not eligible for the exemption and if the property has formally stated in writing that it qualifies for the exemption.

HOPA retains the requirement that senior housing must have one person who is 55 years of age or older living in at least 80 percent of its occupied units. It also still requires that senior housing publish and follow policies and procedures that demonstrate an intent to be housing for persons 55 and older.

An exempt property will not violate the Fair Housing Act if it includes families with children, but it does not have to do so. Of course, the property must meet the Act's requirements that at least 80 percent of its occupied units have at least one occupant who is 55 or older, and that it publish and follow policies and procedures that demonstrate an intent to be 55 and older housing.

A Department of Housing and Urban Development rule published in the April 2, 1999, Federal Register implements the Housing for Older Persons Act of 1995, and explains in detail those provisions of the Fair Housing Act that pertain to senior housing.

2. Changes were made to enhance law enforcement, including making

- [Information by State](#)
- [Esta página en español](#)
- [Print version](#)

### Related Information

- ▶ [Discrimination Complaint](#)
- ▶ [Fair Housing Act](#)
- ▶ [Title VI of the Civil Rights Act of 1964](#)
- ▶ [Americans with Disabilities Act](#)
- ▶ [HUD's Advertising guidance](#)
- ▶ [Administrative Law Judges](#)
- ▶ [Equal Opportunity for All Booklet](#)

amendments to criminal penalties in section 901 of the Civil Rights Act of 1968 for violating the Fair Housing Act.

3. Changes were made to provide incentives for self-testing by lenders for discrimination under the Fair Housing Act and the Equal Credit Opportunity Act. See Title II, subtitle D of the Omnibus Consolidated Appropriations Act, 1997, P.L. 104 - 208 (9/30/96).

### **Basic Facts About the Fair Housing Act**

#### **What Housing Is Covered?**

The Fair Housing Act covers most housing. In some circumstances, the Act exempts owner-occupied buildings with no more than four units, single-family housing sold or rented without the use of a broker, and housing operated by organizations and private clubs that limit occupancy to members.

#### **What Is Prohibited?**

***In the Sale and Rental of Housing:*** No one may take any of the following actions based on race, color, national origin, religion, sex, familial status or handicap:

- Refuse to rent or sell housing
- Refuse to negotiate for housing
- Make housing unavailable
- Deny a dwelling
- Set different terms, conditions or privileges for sale or rental of a dwelling
- Provide different housing services or facilities
- Falsely deny that housing is available for inspection, sale, or rental
- For profit, persuade owners to sell or rent (blockbusting) or
- Deny anyone access to or membership in a facility or service (such as a multiple listing service) related to the sale or rental of housing.

***In Mortgage Lending:*** No one may take any of the following actions based on race, color, national origin, religion, sex, familial status or handicap (disability):

- Refuse to make a mortgage loan
- Refuse to provide information regarding loans
- Impose different terms or conditions on a loan, such as different interest rates, points, or fees
- Discriminate in appraising property
- Refuse to purchase a loan or
- Set different terms or conditions for purchasing a loan.

***In Addition:*** It is illegal for anyone to:

- Threaten, coerce, intimidate or interfere with anyone exercising a fair housing right or assisting others who exercise that right
- Advertise or make any statement that indicates a limitation or preference based on race, color, national origin, religion, sex, familial status, or handicap. This prohibition against discriminatory advertising applies to single-family and owner-occupied housing that is otherwise exempt from the Fair Housing Act.

#### **Additional Protection if You Have a Disability**

If you or someone associated with you:

- Have a physical or mental disability (including hearing, mobility and visual impairments, chronic alcoholism, chronic mental illness, AIDS, AIDS Related Complex and mental retardation) that substantially limits one or more major life activities

- Have a record of such a disability or
- Are regarded as having such a disability

your landlord **may not**:

- Refuse to let you make reasonable modifications to your dwelling or common use areas, at your expense, if necessary for the disabled person to use the housing. (Where reasonable, the landlord may permit changes only if you agree to restore the property to its original condition when you move.)
- Refuse to make reasonable accommodations in rules, policies, practices or services if necessary for the disabled person to use the housing.

Example: A building with a "no pets" policy must allow a visually impaired tenant to keep a guide dog.

Example: An apartment complex that offers tenants ample, unassigned parking must honor a request from a mobility-impaired tenant for a reserved space near her apartment if necessary to assure that she can have access to her apartment.

However, housing need not be made available to a person who is a direct threat to the health or safety of others or who currently uses illegal drugs.

### **Requirements for New Buildings**

In buildings that are ready for first occupancy after March 13, 1991, and have an elevator and four or more units:

- Public and common areas must be accessible to persons with disabilities
- Doors and hallways must be wide enough for wheelchairs
- All units must have:
  - An accessible route into and through the unit
  - Accessible light switches, electrical outlets, thermostats and other environmental controls
  - Reinforced bathroom walls to allow later installation of grab bars and
  - Kitchens and bathrooms that can be used by people in wheelchairs.

If a building with four or more units has no elevator and will be ready for first occupancy after March 13, 1991, these standards apply to ground floor units.

These requirements for new buildings do not replace any more stringent standards in State or local law.

### **Housing Opportunities for Families**

Unless a building or community qualifies as housing for older persons, it may not discriminate based on familial status. That is, it may not discriminate against families in which one or more children under 18 live with:

- A parent
- A person who has legal custody of the child or children or
- The designee of the parent or legal custodian, with the parent or custodian's written permission.

Familial status protection also applies to pregnant women and anyone securing legal custody of a child under 18.

Exemption: Housing for older persons is exempt from the prohibition against familial status discrimination if:

- The HUD Secretary has determined that it is specifically designed for and occupied by elderly persons under a Federal, State or local government program or
- It is occupied solely by persons who are 62 or older or

- It houses at least one person who is 55 or older in at least 80 percent of the occupied units, and adheres to a policy that demonstrates an intent to house persons who are 55 or older.

A transition period permits residents on or before September 13, 1988, to continue living in the housing, regardless of their age, without interfering with the exemption.

### **If You Think Your Rights Have Been Violated**

HUD is ready to help with any problem of housing discrimination. If you think your rights have been violated, the **Housing Discrimination Complaint Form** is available for you to download, complete and return, or complete online and submit, or you may write HUD a letter, or telephone the **HUD Office** nearest you. You have one year after an alleged violation to file a complaint with HUD, but you should file it as soon as possible.

### **What to Tell HUD:**

- Your name and address
- The name and address of the person your complaint is against (the respondent)
- The address or other identification to the housing involved
- A short description to the alleged violation (the event that caused you to believe your rights were violated)
- The date(s) to the alleged violation

### **Where to Write or Call:**

Send the Housing Discrimination Complaint Form or a letter to the **HUD Office** nearest you or you may call that office directly.

### **If You Are Disabled:**

HUD also provides:

- A toll-free TTY phone for the hearing impaired: 1-800-927-9275.
- Interpreters
- Tapes and braille materials
- Assistance in reading and completing forms

### **What Happens when You File a Complaint?**

HUD will notify you when it receives your complaint. Normally, HUD also will:

- Notify the alleged violator of your complaint and permit that person to submit an answer
- Investigate your complaint and determine whether there is reasonable cause to believe the Fair Housing Act has been violated
- Notify you if it cannot complete an investigation within 100 days of receiving your complaint

### **Conciliation**

HUD will try to reach an agreement with the person your complaint is against (the respondent). A conciliation agreement must protect both you and the public interest. If an agreement is signed, HUD will take no further action on your complaint. However, if HUD has reasonable cause to believe that a conciliation agreement is breached, HUD will recommend that the Attorney General file suit.

### **Complaint Referrals**

If HUD has determined that your State or local agency has the same fair housing powers as HUD, HUD will refer your complaint to that agency for investigation and

notify you of the referral. That agency must begin work on your complaint within 30 days or HUD may take it back.

### **What if You Need Help Quickly?**

If you need immediate help to stop a serious problem that is being caused by a Fair Housing Act violation, HUD may be able to assist you as soon as you file a complaint. HUD may authorize the Attorney General to go to court to seek temporary or preliminary relief, pending the outcome of your complaint, if:

- Irreparable harm is likely to occur without HUD's intervention
- There is substantial evidence that a violation of the Fair Housing Act occurred

Example: A builder agrees to sell a house but, after learning the buyer is black, fails to keep the agreement. The buyer files a complaint with HUD. HUD may authorize the Attorney General to go to court to prevent a sale to any other buyer until HUD investigates the complaint.

### **What Happens after a Complaint Investigation?**

If, after investigating your complaint, HUD finds reasonable cause to believe that discrimination occurred, it will inform you. Your case will be heard in an administrative hearing within 120 days, unless you or the respondent want the case to be heard in Federal district court. Either way, there is no cost to you.

#### **The Administrative Hearing:**

If your case goes to an administrative hearing HUD attorneys will litigate the case on your behalf. You may intervene in the case and be represented by your own attorney if you wish. An Administrative Law Judge (ALA) will consider evidence from you and the respondent. If the ALA decides that discrimination occurred, the respondent can be ordered:

- To compensate you for actual damages, including humiliation, pain and suffering.
- To provide injunctive or other equitable relief, for example, to make the housing available to you.
- To pay the Federal Government a civil penalty to vindicate the public interest. The maximum penalties are \$16,000 for a first violation and \$65,000 for a third violation within seven years.
- To pay reasonable attorney's fees and costs.

#### **Federal District Court**

If you or the respondent choose to have your case decided in Federal District Court, the Attorney General will file a suit and litigate it on your behalf. Like the ALA, the District Court can order relief, and award actual damages, attorney's fees and costs. In addition, the court can award punitive damages.

#### **In Addition**

**You May File Suit:** You may file suit, at your expense, in Federal District Court or State Court within two years of an alleged violation. If you cannot afford an attorney, the Court may appoint one for you. You may bring suit even after filing a complaint, if you have not signed a conciliation agreement and an Administrative Law Judge has not started a hearing. A court may award actual and punitive damages and attorney's fees and costs.

#### **Other Tools to Combat Housing Discrimination:**

If there is noncompliance with the order of an Administrative Law Judge, HUD may seek temporary relief, enforcement of the order or a restraining order in a United States Court of Appeals.

The Attorney General may file a suit in a Federal District Court if there is

reasonable cause to believe a pattern or practice of housing discrimination is occurring.

**For Further Information:**

The **Fair Housing Act** and HUD's regulations contain more detail and technical information. If you need a copy of the law or regulations, contact the **HUD Office** nearest you.

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