

HOUSING APPLICATION FOR NORTH 12TH HOMES

北 12 街家庭住房申請

Please return application to:
請把填好的申請表交給:



Email 電子郵件: ryang@chinatown-pcdc.org
Address: 301 N. 9th St., Philadelphia, PA 19107
地址: 北9街301號, 費城, PA 19107
Fax 傳真號碼: 215-922-7232
Phone 電話: 215-922-2156
Website 網站: www.chinatown-pcdc.org

FOR OFFICE USE ONLY 僅作為辦公室使用			
Date Application Taken 申請接收日期	Time of Application 申請時間	Application Taken By 申請處理人	Application Number: 申請編號
Please Tell Us About Yourself 個人情況			
	Applicant 申請人	CO-APPLICANT or CO-SIGNER 共同申請人还是共同簽名人	
Full Name (first, middle, maiden, last) 全名 (名, 中間名, 婚前姓, 姓)			
Social Security Number 社會安全號碼			
Driver's License Number & State 駕駛證號碼和簽發州			
Date of Birth 出生日期			
Daytime Phone <input type="checkbox"/> cell <input type="checkbox"/> home <input type="checkbox"/> other 日間電話 <input type="checkbox"/> 手提 <input type="checkbox"/> 家庭 <input type="checkbox"/> 其他			
Evening Phone <input type="checkbox"/> cell <input type="checkbox"/> home <input type="checkbox"/> other 夜間電話 <input type="checkbox"/> 手提 <input type="checkbox"/> 家庭 <input type="checkbox"/> 其他			
Work Phone <input type="checkbox"/> cell <input type="checkbox"/> home <input type="checkbox"/> other 工作電話 <input type="checkbox"/> 手提 <input type="checkbox"/> 家庭 <input type="checkbox"/> 其他			
E-mail address 電子郵件地址			
Please Give Us Your Residency History for the Past 3 Years. 請提供最近 3 年間的住房歷史。			
Current Address 現住址		If different from applicant: 如申請者有其他地址	
Street Address 街道住址			
City, State, Zip Code 市, 州, 郵區			
Month & Year Moved In 入住年月			
Month & Year Moved Out 搬出年月			
Ownership 所有權	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃	
Reason for Leaving 搬出原因			
Landlord/ Mortgage Company Name 房東/貸款公司名稱			
Landlord/Mortgage Company Phone No. 房東/貸款公司電話號碼			
Landlord/ Mortgage Company Street Address 房東/貸款公司街道地址			
Previous Address 舊地址			
Street Address 街道地址			

City, State, Zip Code 市, 州, 郵區		
Month & Year Moved In 入住年月		
Month & Year Moved Out 搬出年月		
Ownership 所有權	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃
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Previous Address 舊地址		
Street Address 街道地址		
City, State, Zip Code 市, 州, 郵區		
Month & Year Moved In 入住年月		
Month & Year Moved Out 搬出年月		
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Street Address 街道地址		
City, State, Zip Code 市, 州, 郵區		
Month & Year Moved In 入住年月		
Month & Year Moved Out 搬出年月		
Ownership 所有權	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃	<input type="checkbox"/> Own 擁有 <input type="checkbox"/> Rent 租賃
Reason for Leaving 搬出原因		
Landlord/ Mortgage Company Name 房東/貸款公司名稱		
Landlord/Mortgage Company Phone No. 房東/貸款公司電話號碼		
Landlord/ Mortgage Company Street Address 房東/貸款公司街道地址		

City, State and Zip Code 市, 州, 郵區		
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Please Give Us Your Employment Information 請提供你的工作信息

	Applicant 申請人	Co-Applicant/ Co-Signor 共同申請人
Current Employment Status 現工作情況	<input type="checkbox"/> Employed full-time 全職 <input type="checkbox"/> Employed part-time 兼職 <input type="checkbox"/> Retired 退休 <input type="checkbox"/> Unemployed 待業	<input type="checkbox"/> Employed full-time 全職 <input type="checkbox"/> Employed part-time 兼職 <input type="checkbox"/> Retired 退休 <input type="checkbox"/> Unemployed 待業
Employer's Name 雇主名稱		
Employer's Address 雇主地址		
Dates Employed (start date and end date) 聘用日期 (開始和結束日期)		
Employed as (position) 職位		
Income 收入	\$ _____ <input type="checkbox"/> Weekly 每週 <input type="checkbox"/> Bi-weekly 每兩週 <input type="checkbox"/> Monthly 每月	\$ _____ <input type="checkbox"/> Weekly 每週 <input type="checkbox"/> Bi-weekly 每兩週 <input type="checkbox"/> Monthly 每月
Supervisor 主管姓名		
Supervisor's Phone Number 主管電話		

Previous Employer 前任雇主

Employer's Name 雇主名稱		
Employer's Address 雇主地址		
Dates Employed (start date and end date) 聘用日期 (開始和結束日期)		
Employed as (position) 職位		
Income 收入	\$ _____ <input type="checkbox"/> Weekly 每週 <input type="checkbox"/> Bi-weekly 每兩週 <input type="checkbox"/> Monthly 每月	\$ _____ <input type="checkbox"/> Weekly 每週 <input type="checkbox"/> Bi-weekly 每兩週 <input type="checkbox"/> Monthly 每月
Supervisor 主管姓名		
Supervisor's Phone Number 主管電話		

Credit & Other Information 信用和其他資料

Car 車輛:

Make and Year 廠商和出廠年份: _____

Tag No. 車牌號碼: _____

Payment made to 分期收款方: _____

☐ Fully paid off 全額付款

Have either the applicant or co-applicant/signor:

Filed for bankruptcy? 申請人或共同申請人是否申請過破產?

☐ Yes 是 ☐ No 不是

Been evicted from tenancy? 是否曾經被驅逐並取消租用權?

☐ Yes 是 ☐ No 不是

Willfully or intentionally refused to pay rent when due? 是否故意拖欠房租?

☐ Yes 是 ☐ No 不是

Have you or any other adult member used any Name(s) or Social Security Number(s) other than the one(s) being currently used?

☐ Yes ☐ No

If yes, please explain:

你或你的成年家庭成員是否曾使用過除現有社會安全號以外的其他社會安全號?

☐ 是 ☐ 不是

如果有, 請解釋:

Has any proposed household member: Been convicted of any criminal activity? 所登記的家庭成員中: 是否曾因犯罪活動被判刑? ☐ Yes 是 ☐ No 不是

Miscellaneous — These questions apply to ALL household members. 其他問題 – 以下問題適用於所有家庭成員。

1. Apartment preference 公寓類型偏好:

☐ 1-bedroom 一室

☐ 2-bedrooms 兩室

☐ 3-bedrooms 三室

Building 樓號:

☐ 624 N. 12th Street 北 12 街

☐ 632 N. 12th Street 北 12 街

Unit Number 房號:

2. Are there any special requests you would like us to consider? 有任何特殊要求嗎? _____

3. Are you a veteran? 你是退役軍人嗎? ☐ Yes 是 ☐ No 不是

Are you requesting consideration for any of the following listed below? 你是否正在考慮申請以下情況? ☐ Yes 是 ☐ No 不是

- Homelessness/ chronic homelessness 無家可歸/長期無家可歸
- Disability (mental or physical) 殘疾 (心裡/身體)
- Serious mental illness, and/or 嚴重心理疾病, 以及/或者
- Chronic problems with alcohol, drugs or both, and/or 酗酒、吸毒或兩者其他引起的慢性疾病, 以及/或者
- HIV+/Acquired Immune Deficiency Syndrome (AIDS) or other related diseases 艾滋病或其他相關疾病
- Survivors of domestic violence 家庭暴力受害者
- Repeat users of emergency shelters or have been discharged from the Philadelphia prison system 收容所長期使用者或費城監獄釋放人員
- Other (please specify) 其 他 (請 註 明)

4. How did you hear about our community? 你是如何知道我們的社區?

☐ Newspaper — please specify 月刊 – 請註明 _____

☐ Apartment magazine 公寓雜誌

☐ Internet 網路

☐ Friend/family 朋友/家人 _____

☐ Billboard/ bus/ sign 廣告/巴士/標誌

☐ Drove by 路過

☐ CSN, AAS, Philadelphia Department of Behavioral Health CSN, AAS, 費城行為健康部門

☐ Other — please specify 其他 – 請註明 _____

5. Do you plan to keep a pet in the apartment? 你打算在房內養寵物嗎? ☐ Yes 是 ☐ No 不是

(additional fees will be applied 如果你養寵物, 需要交納額外費用)

If yes: ☐ Dog ☐ Cat ☐ Other Please identify type of pet _____

如果是的話: ☐ 狗 ☐ 貓 ☐ 其他 請註明寵物類型 _____

STATEMENTS BY ALL ADULT HOUSEHOLD MEMBERS (中文請參考附加文件 A)

1. We certify that all information given in this application and any address thereto is true, complete and accurate. We understand that if any of this information is false, misleading or incomplete, management at its option may cancel the application or, if move-in has occurred, the Rental Agreement without notice.
2. We authorize *PCDC* to make appropriate and periodic inquiries, either directly or through information exchanged now or later with rental and credit screening services, and to contact previous and current landlords, other sources for credit, verification of employment and other information provided herein.
3. If our application is approved, and move-in occurs, we certify that only those persons listed in this application will occupy the apartment and that there are no other persons for whom we have, or expect to have, responsibility to provide housing.
4. We agree to notify management in writing immediately regarding any changes in household telephone numbers, income and/or household composition.
5. We have read and understand the information in this application and we agree to comply with such information.
6. We understand that this application may be placed on a waiting list. We may request samples of the rental agreement. If this application is approved, and move-in occurs, we certify that we will accept and comply with all conditions of occupancy as set forth therein, including specifically all conditions regarding pets, rent, damages and security deposits.
7. We authorize management to obtain one or more "consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S.C. Section 1681a(d), seeking information on our credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living.
8. We agree that a photocopy of this authorization shall be valid as the original.
9. This application is accepted subject to the vacating of the apartment by the prior tenant at the time specified.

Applicant(s) hereby represents that all the above statements are true and complete. Applicant(s) authorize verification of the above information, provided, including but not limited to obtaining consumer credit reports and agree to furnish additional information upon request. 申請人謹此確認以上條款均完整屬實。申請人授權管理方查實以上信息的真實性，並同意提供包括而不僅限於消費者信用報告的資料，並同意在管理方的要求下提供額外信息。

Applicant's Signature 申請人簽名 _____

Date 日期 _____

Co-Applicant/Co-Signor Signature 共同申請人簽名 _____

Date 日期 _____

FAIR CREDIT REPORTING ACT

This is to inform you that as part of our procedure for processing your application an investigative report may be made whereby information is obtained through personal interviews with third parties — such as family members, business associates, financial sources, friends, neighbors or others who are acquainted with you. This inquiry includes information as to your character, general reputation, personal characteristics, mode of living, income, credit background and police records. All information you or others give us will be held in strict confidence.

We do not discriminate on the basis of race, religion, national origin, color, creed, age, sex, handicap or familial status.

Please be advised that any information given to this office that is falsified in any way will automatically result in the denial of your application.

☐ I/we have read and understand the above.

FAIR HOUSING CERTIFICATION 公平住房證明:

Federal and state laws prohibit acts of housing discrimination including 聯邦和州法律禁止住房歧視:

- refusals to provide housing because of an applicant's race, color, creed, religion, national origin, sex, marital status, disability, age, familial status, sexual orientation or lawful source of income; 任何因為申請人種族、宗教、國籍、膚色、信仰、年齡、性別、殘疾、家庭狀況、性取向以及合法收入而拒絕向申請人提供住房;
- providing housing on an unequal basis 在提供住房時遭遇不平等待遇
- segregating occupants 隔離住戶
- claiming housing is unavailable when, in fact, it is available; 在有空閒住房的情況下聲稱該住房不可申請;
- rejecting a disabled applicant because he/she uses a trained guide dog or any other assistive animal; and 因殘疾申請人的引導犬以及其他輔助動物而拒絕提供住房; 和
- refusing to make reasonable accommodations in rules, policies or procedures which would allow occupancy by a person with disabilities. 拒絕向殘疾申請人提供有關政策、法律及規定的住房條件。

If you believe you may have been a victim of housing discrimination, immediately contact one of the following agencies 如果你是住房歧視的受害者，請立即聯繫一下機構:

- The Office of Fair Housing and Equal Opportunity at the Office of U.S. Department of Housing and Urban Development (HUD). The telephone number is (215) 656-0647 or (215) 656-3450 美國住房及城市發展部 – 公平住房及平等辦公室。電話號碼是 (215) 656-0647 或者 (215) 656-3450

All adult household members (18 and over) must sign below.

所有成年家庭成員（18 歲及以上）必須在下方簽名。

I/ we acknowledge that I/we have informed or my/our right to fair housing.

我/我們承諾我/我們已經被告知我/我們的公平住房權益。

Applicant 申請人: _____ Date 日期: _____ Applicant 申請人: _____ Date 日期: _____
 Applicant 申請人: _____ Date 日期: _____ Applicant 申請人: _____ Date 日期: _____
 Applicant 申請人: _____ Date 日期: _____ Applicant 申請人: _____ Date 日期: _____

Application
Checklist:
申請材料清單:

Application Form 申請表
 Consent to Release of Information 同意發布信息
 Background Release Form 背景信息收集表
 Tenant Income Certification Questionnaire 租戶收入證明問卷
 Family Summary Sheet 家庭匯總表
 Application for Residency-Eligibility Criteria 居住權申請-資格標準

FOR OFFICE USE ONLY 僅供官方使用

Processing by 項目管理處理者: _____ Date 日期: _____
 Approval by 項目管理批准者: _____ Date 日期: _____
☐ Attended potential tenants workshop 參加了預備租戶講座 ☐ Did not attended potential tenants workshop 沒有參加預備租戶講座
☐ Residency approved 申請批准 ☐ Residency denied — reason 申請拒絕 - 理由: _____

Consent to Release of Information

Purpose: 目的:

In signing this consent form, you are authorizing the Owner to request income and other qualifying information from a third party about you. HUD and/or the housing program administrator requires the owner to verify all information you provide that affects your eligibility and level of benefits to ensure that you are eligible for its affordable housing programs and that these benefits are set at the correct level. Upon the request of HUD, or the Contract Administrator, the owner may provide HUD or the Contract Administrator with the information you have submitted and the information the owner receives under this consent.

在簽署知情同意書，表示您授權的房屋擁有者從你第三方請求收入和其他符合條件的信息。HUD 和/或房屋計劃管理員需要業主/代理人，以驗證您提供影響您的資格和福利水平，以確保您有資格的經濟適用住房項目，這些好處都設置正確的級別的所有信息。在 HUD 的要求，或合同管理員，業主/代理人可以提供 HUD 或合同管理員與您所提交的信息和本同意下，業主/代理接收的信息。

Please be advised owner, may participate in computer matching programs to verify your eligibility and level of benefits. This form also authorizes owner to seek wage, new hire and unemployment claim and other qualifying information from current and former employers to verify information obtained through computer matching.

請注意房屋擁有者可參與電腦信息比對項目，以驗證您的資格和福利水平。這份表格還授權房屋擁有者從現任和前任雇主處尋求工資，新員工和失業索賠和其他相關信息，以驗證通過電腦匹配獲得的信息。

Use of Information Obtained 信息的獲得使用

The owner is required to protect the income and other qualifying information it obtains in accordance with any applicable State privacy law. Should the owner receive information from a third party that is inconsistent with information you have provided, the owner will notify you in writing identifying the information believed to be incorrect. If this should occur, you will have the opportunity to meet with the owner to discuss any discrepancies.

房屋擁有者必須根據保護它獲得任何適用的國家隱私法的收入和其他符合條件的信息。如果房屋擁有者收到來自第三方的，它與您所提供的信息不一致的信息，房屋擁有者將以書面形式通知您確定被認為是不正確的信息。如果發生這種情況，房屋擁有者會面，討論任何差異。

Failure to sign the consent form may result in denial of assistance or termination of affordable housing benefits. If an applicant is denied assistance, the owner will follow the notification procedures outlined in its Tenant Selection Plan. If a tenant is denied assistance, the owner will follow the procedures set forth in the lease.

未能簽署同意書，可能會導致被拒絕負擔得起的住房福利援助或終止。如果申請被拒絕的協助下，房屋擁有者將按照其租客選擇計劃中的通知程序。如果租客被拒絕協助下，房屋擁有者將按照規定在租約的過程。

I consent to allow PCDC to request and obtain income and other qualifying information from private, federal and state agencies for the purpose of verifying my eligibility and level of benefits under HUD's affordable housing programs.

我同意讓費城華埠發展會請求並獲得私人，聯邦和州政府機構的收入和其他資格信息驗證我的資格和 HUD 福利水平。

Head-of-Household 家庭代表: _____

Date 日期: _____

Co-Head/Other adult 共同代表/其他成年成員: _____

Date 日期: _____

Co-Head/Other adult 共同代表/其他成年成員: _____

Date 日期: _____

*"Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on this consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor or fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act **208 (a) (6), (7) and (8). ** Violation of these provisions are cited as violations of 42 U.S.C. Section **408(a) (6), (7) and (8). ***

CONFIDENTIAL 機密
Background Check Release Form 背景調查的形式表格

Our screening criteria requires all persons 18 years of age and older, applying for admission to our community, undergo both a credit and criminal background check. This includes all pertinent information regarding payment history, arrests and convictions for misdemeanors and felonies.

我們的篩選標準要求所有人員年滿 18 周歲及以上，申請入讀我們的社區，既經歷一個信貸和犯罪背景檢查。這包括有關付款記錄，逮捕和定罪為輕罪重罪和所有相關信息。

All of the information below must be completed. 下面所有的信息，必須完成。

Applicant's Name: _____
 申請人名稱 *First 名字* *Middle 中間名字* *Last and Maiden 姓和良姓*
 Social Security Number 社會安全號碼: _____ Date of Birth 出生日期: _____
 Driver's License Number 駕駛證號碼: _____ State Issued 簽發州: _____
 Current Address 目前的地址:
Street Address 街道地址 _____ *City 城市* _____ *State 州* _____
 Former Address 曾用地址(if less than 4 years at above address 如果地址少於 4 年以上):
Street Address 街道地址 _____ *City 城市* _____ *State 州* _____
Street Address 街道地址 _____ *City 城市* _____ *State 州* _____
Street Address 街道地址 _____ *City 城市* _____ *State 州* _____
Street Address 街道地址 _____ *City 城市* _____ *State 州* _____

*****Release 發布:

I do hereby authorize _____ to investigate my background and give my consent allowing all relevant credit and criminal information to be released. I acknowledge that this is a circumstance that would require the owner to verify information that is more than 12 months old. Authorization is given by me by signature below.

我特此授權 _____ 調查我的背景，讓被釋放我的同意，允許所有相關的信貸和犯罪信息。我承認，這是一個情況，要求業主確認超過 12 個月的信息。授權是由我給出下面的簽名。

Applicant's Signature 申請人簽字: _____ Date 日期: _____

*"Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on this consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor or fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act **208 (a) (6), (7) and (8).** Violation of these provisions are cited as violations of 42 U.S.C. Section **408(a) (6), (7) and (8).**"*

TENANT INCOME CERTIFICATION QUESTIONNAIRE 住戶收入證明問卷

Applicant Name 申請人姓名: _____ Telephone Number 電話號碼: _____

INCOME INFORMATION 收入信息

Yes 是	No 不是		Monthly gross Income 月總收入
<input type="checkbox"/>	<input type="checkbox"/>	I am self employed. (List nature of self employment) _____ 我是一個個體經營者。(列明個體經營性質) _____	(use net income from business) (寫明經營淨利潤) \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I am not currently employed, but expect in the next 12 months wages, salary, overtime pay, commissions, fees, tips, bonuses, and/or other compensation. List the businesses and/or companies that you expect to pay you: 我目前無業, 但預計在未來的 12 個月內會有工資、薪水、加班費、佣金、收費、小費、獎金、以及/或者其他報酬。列舉你預計有哪些企業以及/或者公司會支付給你: 1) _____ Name of Employer/Source 雇主民稱/來源 2) _____ 3) _____	\$ _____ \$ _____ \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive cash contributions of gifts including rent or utility payments, on an ongoing basis from persons not living with me. 我收到不與我同住的其他人以現金的形式持續支付我的房租或者水電費。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive unemployment benefits/severance pay. 我領取失業津貼/離職金。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive Veteran's Administration, GI Bill, or National Guard/Military benefits/income. 我領取退伍軍人管理津貼、士兵福利、或國民警衛隊/軍人福利/收入。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive periodic social security and/or Supplemental Security (SSI) payments. 我定期領取社會安全保障金以及/或者收入補貼。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	The household receives unearned income from family members age 17 or under (example: Social Security, Trust Fund disbursements, etc). 家庭中有 17 歲或低於 17 歲的家族成員獲得非工作所得的收入 (例如: 社會保障金、信託基金、等等)。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive disability or death benefits other than Social Security. 除社會保障金外, 我還領取傷殘撫卹金或者死亡撫卹金。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive Public Assistance Income (examples: TANF, AFDC) 我領取公眾救濟金 (例如: 貧困家庭臨時援助金, 未成年子女家庭援助金)	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I am entitled to receive child support payments. 我有資格領取兒童撫養費。 I am currently receiving child support payments. 我目前正在領取兒童撫養費。 If yes, from how many persons do you receive support? 如果正在領取, 列明有幾個人支付兒童撫養費用?	\$ _____ \$ _____ \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive alimony/spousal support payments 我領取配偶贍養費。	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive periodic payments from trusts, annuities, inheritance, retirement funds or pensions, insurance policies, or lottery winnings. 我有資格領取兒童撫養費。我目前正在領取兒童撫養費。 If yes, list sources: _____ 如果正在領取, 列明有幾個人支付兒童撫養費用: _____	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I have a Section 8 voucher (tenant-based only) 我持有政府補助第 8 區憑證 (只供租客使用) _____ (name of issuing agency) (發行機構民稱)	
<input type="checkbox"/>	<input type="checkbox"/>	I receive Section 8 assistance I receive student financial aid (public or private, not including student loans)—either Full or Part time 我持有政府補助 我領取助學基金 (公共或私人, 不包括學生貸款) - 包括全日制或半日制學生	\$ _____
<input type="checkbox"/>	<input type="checkbox"/>	I receive income from real or personal property. 我獲得不動產或私人財產收入。	\$ _____ (use <u>net</u> earned income)
<input type="checkbox"/>	<input type="checkbox"/>	I own real estate. 我擁有物業。 If yes, provide description: 如果有, 提供描述或說明: _____	

Please provide supporting documents to each item you checked “yes”.

請為所有你選擇了 “是” 的項目提供證明文件和資料。

Under penalties of perjury, I certify that the information presented on this form is true and accurate to the best of my/our knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information will result in the denial of application. 遵從處罰條款，我保證基於我所了解的信息，以上所提供的所有信息都是真實以及準確的。以下的簽名確保我已經了解提供虛假信息將構成詐騙行為。任何虛假，歧義以及不完整的信息都將導致申請被駁回。

PRINTED NAME OF APPLICANT/TENANT 申請人/租客正楷姓名
DATE 日期

SIGNATURE OF APPLICANT/TENANT 申請人/租客簽名

Family Summary Sheet 家庭情況信息表

Please list all family members who will reside in the unit 請列明將要入住此房的所有家庭成員的以下相關信息

Member No. 成員編號	Last Name 姓	First Name 名	Relationship to Head of Household 與戶主的關係	Sex (M/F) 性別 (男/女)	Date of Birth 出生日期
			HEAD 戶主		



Supporting Document Checklist 文件核對表

Please bring the following documentation to PCDC or email to ryang@chinatown-pcdc.org. If you have any questions, please email ryang@chinatown-pcdc.org.

下次會見輔導員時，請攜帶以下的文件。如果你對提交資料有任何疑問，請聯絡我們。

- _____ Picture ID 有照 片身分證
- _____ Two months' pay stubs 最近兩個月工資單
- _____ 1040s tax return & W-2 (for the last two years (2018 & 2019) - signed)
最近兩年報稅單 (必須.簽名)
- _____ Social Security Number 工卡號碼
- _____ Bank statements for last two months for all accounts 兩個月銀行月結單
- _____ Landlord Verification 房東推薦
- _____ Rental housing payments. 房屋租金帳單
- _____ Utilities, such as electricity, gas, water, telephone service, television, and internet service providers. (Utilities should not include in the rental housing payment)
水電, 煤氣, 電話, 和網絡帳單。(水電費帳單不應該包括在租金帳單中)

If applicable (若可能)

- _____ Social Security Retirement, Social Security Disability or Supplemental Security Income (SSI)
社會保障退休金, 社會保障殘疾或安全補助金
- _____ Alimony and Child Support Documentation 撫養費和撫養費文獻
- _____ Proof of other household income 其他家庭收入證明

If no credit at all, please bring two of the following documents:

如果沒有信用證明文件，請帶來兩種以下的文件：

- _____ Automobile insurance payments 汽車保險帳單
- _____ Cell phone payments 手機帳單
- _____ Payment of school tuition 學校學費帳單
- _____ Payment of medical bills 醫療保險帳單

Other: 其他: _____

Application for Residency - Eligibility Criteria (請參考附加文件 B)

The following criteria shall be utilized to determine an applicant's eligibility for residency (please be advised that these requirements are in addition to any requirements of specific Supportive Services Program):

1. The family size of all applicants should not exceed the allowance for each type of unit.

	1 Bedroom	2 Bedroom	3 Bedroom
Max. family size	2 persons	4 persons	6 persons

2. All applicants are required to be *income eligible*

- i. Upper limit

To apply for 632 Unit 2 and 3 or 624 Unit 3, 4, 5, 6, 7, 8, 9, your family income must be lower than 50% AMI:

Family Size	1 person	2 persons	3 persons	4 persons
50% AMI Income Limits (\$)**	\$36,900	\$42,200	\$47,450	\$52,700

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To apply for 623 Unit 1 or 624 Unit 2, 3, 10, your family income must be lower than 80% AMI:

Family Size	1 person	2 persons	3 persons	4 persons	5 persons	6 persons
80% AMI Income Limits (\$)**	\$59,050	\$67,450	\$75,900	\$84,300	\$91,050	\$97,800

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- ii. Lower limit

Your family income must be higher than three times of the rent.

For example, if the rent of the unit you are applying for is \$890/month, your annual income must be higher than
 $\$890/\text{month} * 12 \text{ months} * 3 = \$32,040/\text{year}$

3. Applicants who evidence a *steady income* from employment or other sources such as AFDC, Social Security, and/or pension benefits for example, will be accorded like treatment
4. All applicants/proposed household members 18 years of age or older will be subject to a *past criminal activity check*; head-of-household must certify whether minor household members between the ages of 14 and 17 are/are not sex offenders
5. All available *credit references* will be checked
6. When *utilities are paid by the resident*, Applicant will be required to *demonstrate the ability to obtain/successfully transfer utility services* to the new address (new move-ins/transfers)
7. An applicant must be able to *comply with the terms of the Lease/Residency Agreement*. An eviction or repeated (two or more) severe violations of prior lease agreements, as verified by prior landlords, will be considered grounds for rejection
8. An applicant's capacity to demonstrate that they are *capable of caring for the unit*. An applicant or member of applicant's family, who has been determined to require such services or accommodations, shall be responsible for securing the services and supplying the accommodations where it has been determined that management would incur a financial hardship, administrative burden, or would experience a fundamental alteration in the program
9. An applicant's *ability and willingness to cooperate* with management

10. The household must go through the *Section 214 Review* of the Housing and Community Development Act of 1980, as amended, to determine if any of the restrictions on assistance to non-citizens apply to their household (unless the specific housing program does not have U.S. residency as a requirement)
11. The applicant must be *willing to pay the rent in the signed lease*.
12. *Acceptable references from current and former landlords* covering a period of three (3) years or from the last two successive tenancies, whichever is greater — when applicable. Qualified applicants who have no prior leasing experience of their own and no credit or stable employment history will be given all due consideration
13. Be prepared to submit *rent receipts* for examination for the purpose of verifying residence, rental amount and timely payment history. Those applicants whose history evidence a late payment record more than ten (10) days past due on three or more occasions may be rejected on the basis of poor rental habits.
14. For our Low Income and Affordable units, the unit must be the applicant's **ONLY** residence
15. Applicants must be willing to *execute* and abide by a *one year lease* agreement.
16. All applicants shall be required to provide complete and accurate information and *execute all forms required* by property and residential program management to determine eligibility and other factors affecting residency. Information requested by management shall be provided within ten (10) days of request and only an additional ten-day period will be granted as an extension (with the exception of EIV SSN verification requirements). Failure or refusal to comply with management is grounds for denial
17. All adult household members shall be required to *attend one rental workshop*. Execution of the lease is an acknowledgment that they have attended and understand the rights and requirements of residency at the property

附加文件 A

成年家庭成員申請說明

1. 我們承諾以上申請中的所有信息都是真實、完整、準確的。我們了解：如果任何信息造假和不準確都將成為管理方取消（無需提前通知）申請或租用協議的正當理由。
2. 我們授權給 PCDC 及該機構的附屬代理從此是開始向租賃服務機構以及信貸審查機構進行直接或間接的調查和問詢。我們同時授權該機構聯繫申請人的歷任房東，獲取其他信貸來源，受聘信息認證以及他們此中提到的信息。
3. 假如申請通過並成功入住，我們承諾僅將住房提供給該申請表中的申請人，並了解我們沒有向此外任何人提供住房的權利及義務。
4. 我們同意在任何關於電話號碼、收入以及家庭組成變化發生的第一時間以書面形式通知管理方。
5. 我們已閱讀並知曉該申請的所有信息並同意遵守上述所有信息。
6. 我們知曉該申請可能被列入等待名單。我們可以要求租用協議的樣本。假如申請通過並成功入住，我們承諾接受並遵守所有申請中提到的入住條件，包括關於寵物、租用、損壞以及押金的任何條款。
7. 我們授權管理方獲取一份或多份“消費者報告。”該報告在美國法律第 15 編第 1681a(d) 節的公平信用報告法令中被規定生效，目的是獲取居住人的信用價值、信用水平、信用額度、品質、公眾名聲、個人表現以及生活模式。
8. 我們同意該授權的複印件將具有與原件一樣的效益。
9. 該申請的通過將受制於房屋前任租客是否在規定下搬出。

公平信貸報告法案

該法案規定：作為處理申請人申請的過程之一，我公司將對申請人的資料向第三方以個人採訪的方式完成調查報告。該信息包括家庭成員、商業合夥人、收入來源、朋友、鄰居以及其他與申請人相關的人士。該問詢將包括以下信息：申請人的品行、公眾民聲、個人特質、居住類型、收入、信貸背景以及犯罪記錄。

我們不會對下列任何情況懷有歧視和區別對待：種族、宗教、國籍、膚色、信仰、年齡、性別、殘疾、或家庭狀況。

申請人如果提供任何造假信息，我們將會立即取消該申請。

☐ 我/我們已經閱讀並且同意以上所述。

附加文件 B

住房申請 - 居民標準合格申請表

以下準則將會用來決定申請人是否具有入住資格（請留意以下所需要的信息是在特定的支持服務項目以外的必要信息）：

1. 每個申請人家庭入住的人數不得多於每種單位限定的人數

	一室單位	兩室單位	三室單位
最多入住人數	2 人	4 人	6 人

2. 所有申請人必須符合收入標準

- i. 收入上限

如要申請 632 單位 2,3 或 624 單位 3, 4, 5, 6, 7, 8, 9 你的家庭收入必須低於 50% AMI (平均中等收入水平):

家庭人數	1 人	2 人	3 人	4 人
50% 平均中等收入綫 (\$)**	\$36,900	\$42,200	\$47,450	\$52,700

**HUD FY 2021

如要申請 623 單位 1 或 624 單位 2, 3, 10, 你的家庭收入必須低於 80% AMI (平均中等收入水平):

家庭人數	1 人	2 人	3 人	4 人	5 人	6 人
80% 平均中等收入綫 (\$)**	\$59,050	\$67,450	\$75,900	\$84,300	\$91,050	\$97,800

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- ii. 收入下限

你的家庭收入必須高於你申請的單位租金的 3 倍。

比如，如果你申請的單位租金是每月 \$890，你的家庭年收入必須高於 \$890/月 * 12 個月 * 3 = \$32,040/年

3. 申請人具有穩定收入來源（例如未成年子女家庭援助金、社會保障金、以及/或者退休津貼）證明的申請人將作同類處理
4. 所有已滿 18 歲的申請人/登記的家庭成員都將接受犯罪記錄調查；戶主必須證實年少的（14 歲至 17 歲之間）的家庭成員是否為性犯罪者
5. 所有可用的信用參考將被調查。
6. 當住戶支付水電氣費時，申請人將需要證明自己可以獲得/或成功地過戶水電氣費服務到新家中（新住戶/轉戶者）
7. 申請人必須遵從房屋租賃合同條款/住房協議。如果申請人被前戶主正式曾經有一次被驅逐出租房或多次（兩次或更多）嚴重違反前租房協議的經歷，該申請將被考慮駁回

8. 申請人必須證明有*維護和管理房屋的能力*。提出住房服務或住房設施申請的申請人或家庭成員，當管理者面臨財政困難，行政管理負擔，或者面臨項目重組時，將有責任及義務繼續維持住房服務及提供相應設施
9. 申請人須有*能力及有意願配合*管理層的工作
10. 住戶需要仔細閱讀住房及社區發展修訂法案第 214 章節，從而確定是否存在為非美國公民提供住房幫助的限制條款（除非特定的住房項目不限制僅為美國居民提供幫助）
11. 申請人必須*願意支付*依據 PCDC 所列條款計算出的房租。
12. 我們接受涵蓋你 3 年租住情況的來自你當前或曾經戶主的推薦信，或者你最近連續兩次租房戶主的推薦信，取以上兩者涵蓋時間更長者作為最終參考。符合申請資格的申請人如果沒有過往租房經歷並且無信用記錄或無穩定工作經歷也將給予適當考慮。
13. 請確保已準備好提交你曾經繳納租金的收據以備我們檢驗核實你曾經的租賃記錄，房租繳納總額以及是否按時繳納房租。對於有著超過三次遲交房租超過 10 天記錄的申請者，基於此不良習慣記錄，我們或許將駁回申請。
14. 對於居住於低收入及廉租房的申請人，除此住房外，不得有其他住房。
15. 申請人必須願意遵守一年住房租約協議。
16. 所有申請人將被要求提供完整和準確的信息並填寫房產住宅項目管理者所要求的所有可用於決定申請人資格及其它可影響入住因素的表格。所有被要求提供的信息必須於 10 天內提交，最多僅可授予十天的延長期（企業收入確認社會保障號要求例外）。不服從或拒絕遵從管理將導致申請被拒絕。
17. 所有成年住戶必須參加一次租房講座。租約的執行表明申請者已確認了解房產入住的權利及要求。