

The Cove Portada de Pre-Solicitud Para Alquilar 2121 W. William Street Long Beach, CA 90810



¡Gracias por su interés en las nuevas viviendas comunitarias de apoyo permanente para veteranos de The Cove en Cabrillo, Long Beach!

Los siguientes documentos son el formulario de presolicitud para alquilar y el formulario de motivos de rechazo. Ambos formularios deben enviarse por correo electrónico, entregarse en persona o enviarse por correo postal a la oficina de arrendamiento ubicada en Century Villajes en Cabrillo: 2001 River Drive Long Beach, CA 90810 (no se aceptan solicitudes por fax). Si tiene alguna pregunta, no dude en llamar a la línea de información al (562) 388-7881 o enviarnos un correo electrónico a <u>thecove@century.org</u>. Dispositivo telefónico para sordos: (888) 877-5379 o Servicio de Retransmisión de California (711). Las solicitudes previas deben recibirse o tener matasellos antes del 4 de diciembre de 2023 para participar en el sorteo para su inclusión en la lista de espera.

Puntos importantes a tener en cuenta:

- Por favor, tómese su tiempo para llenar con precisión la presolicitud, las solicitudes incompletas serán rechazadas
- No se tomarán en cuenta las presolicitudes duplicadas.
- Las solicitudes se aceptan hasta el 4 de diciembre de 2023 por correo electrónico, en persona o por correo
 - Envíe por correo electrónico las solicitudes completadas a <u>thecove@century.org</u> antes de la medianoche del 4 de diciembre de 2023.
 - Por favor, envíe por correo su presolicitud y los motivos de rechazo únicamente a través del Servicio Postal de los Estados Unidos. NO aceptaremos presolicitudes por correo urgente, ni por fax. Dirección postal: Century Villajes en Cabrillo, A la tención de The Cove, 2001 River Drive Long Beach, CA 90810
 - Las planillas pueden ser entregadas personalmente en la oficina administrativa de la CVC en la oficina mencionada anteriormente durante el horario normal de negocio de lunes a viernes de 9am a 4pm.
 - Las presolicitudes mataselladas o entregadas después luego del 4 de diciembre de 2023, a las 4pm no serán aceptadas.





THE COVE PRE-APPLICATION2121 W. William Street Long Beach Ca 90810

ONE APPLICATION PER HOUSEHOLD ONLY

Application to Rent

Rental policy: This housing is offered without regard to race, color, national origin, sex, religion, ancestry, genetic information, source of income, age, marital status, familial status, sexual orientation or preference, gender identity, or disability, or any other basis prohibited by law. A person with a disability may request a reasonable accommodation (a reasonable change in policies), a reasonable structural modification, an accessible unit or the provision of auxiliary aids and services, to have equal access to a housing program. If you or anyone in your household has a disability, and because of that disability requires a specific accommodation, modification or auxiliary aids or services to fully use our housing services, please contact our staff for a reasonable accommodation form. All rental applications are evaluated based on eligibility, housing history, ability to pay and credit history.

Pet Policy: The Landlord shall comply with the Pet-Friendly Housing Ordinance Number 2020-0001 ("Pet-Friendly Ordinance") of Chapter 8.70 of the Los Angeles County Code. Pursuant to the Pet-Friendly Ordinance, the Landlord shall allow Resident to have at least one (1) pet in the Unit consistent with applicable Federal and State Laws. The Landlord shall incorporate a Pet Policy to be included in the Lease and summary of house rules and shall maintain and provide a copy such pet policy to Resident. Note: This is a pre-application for initial eligibility screening and placement on the waitlist. You must complete all information for your pre-application to be considered. A more detailed application will need to be completed once your name comes up on the waitlist

PLEASE PRINT VERY CLEARLY

| | Date of Birth | | | | |
|---|---------------------------------------|--|--|--|--|
| First Name (Head of Household) | MI Month Day Year | | | | |
| | | | | | |
| Last Name | | | | | |
| | | | | | |
| Social Security Number Telephone Number | Extension | | | | |
| Mailing Address | Apt. Number | | | | |
| | | | | | |
| City | State Zip Code | | | | |
| | | | | | |
| | | | | | |
| Please consider completing this OPTIONAL Section. If Yes: | | | | | |
| Do you require special unit design features? \Box Yes \Box No | Visual Impairment Hearing Impairment | | | | |
| | □ Mobility Impairement | | | | |
| Race (OPTIONAL): White Black/African America | Ethnicity (OPTIONAL): | | | | |
| 🗆 Asian 🗆 American Indian/ Alaska Native 🗆 Other | | | | | |
| □Native Hawaiian/Other Pacific Islander | Hispanic: 🗆 Yes 🗆 No | | | | |





| 1. | How did you hear about us? (Agency, social media, County website, etc.): | | | |
|--|---|--|--|--|
| 2. | How many people will live in your home? Please include yourself: | | | |
| 3. | Are you a Veteran of the United States Armed Forces? | | | |
| 4. | Total household gross annual income from all sources (before any deductions). Your estimate \$ | | | |
| 5. | Do you currently possess a VASH or other Section 8 voucher? □Yes □No | | | |
| 6. | Are <u>all</u> household members full-time students?(K-12 are considered full time) | | | |
| 7. | Do you require special accommodations? (i.e. Live-In Care Attendant, etc.) 🗆 Yes 🗆 No | | | |
| | If you need special accommodations please explain: <i>A person with a disability may request a reasonable accommodation (a reasonable change in policies), a reasonable</i> <i>structural modification, an accessible unit or the provision of auxiliary aids and services, in order to have equal</i> <i>access to a housing program. If you or anyone in your household has a disability, and because of that disability</i> <i>requires a specific accommodation, modification or auxiliary aids or services to fully use our housing services, pleas</i> <i>contact our staff for a reasonable accommodation form.</i> | | | |
| 8. | Do you have a pet? (Not referring to companion or service animal) \Box Yes \Box No | | | |
| | understand that all of these answers will be verified. I certify that the above statements are true and | | | |
| correct. I understand that false statements or misinformation is punishable under federal law and n cause for immediate denial of housing. | | | | |
| н | ead of Household Signature: Date: | | | |

Please complete, sign and mail or drop-off this Pre-Application and Grounds for Denial by December 4, 2023, to: Century Villages at Cabrillo 2001 River Dr. Long Beach, CA 90810. Review instructions outlined in the cover letter.

Households comprised of ALL full-time students' members do not qualify unless exempted by Section 42 of the Internal Revenue Code. Our complete Resident Selection Criteria is available at the Rental Office upon request.





The Cove Grounds for Denial of Rental Application

All applicants will be initially interviewed by the manager or a representative of the management agent. CVPM will inform the various service providers and funding agencies of the reason for denial. It will be the responsibility of the Property Manager or management agent to inform the applicant in writing of rejection or approval. Management will notify applicants who are rejected, in writing, and the applicants will be informed of their option to appeal this decision. With the approval of the applicant, the referring agency will also be notified.

Applications may be rejected for any of the following:

- 1. Prior to move-in, violent threats or behavior toward management, the property, or other residents exhibited by an applicant or household member at any time.
- 2. Serious Violent Felony conviction as described in the Resident Selection Criteria within the past 3 years.
- 3. Falsification of any information on the application.
- 4. Household size exceeds the maximum occupancy for designated units.
- 5. Income exceeding the maximum AMI established for the unit. See Chart below.

| Number of Household Members | Maximum Income for units at 50% AMI* | Maximum Income for units at 60% AMI* |
|--------------------------------|--------------------------------------|---|
| 1 | \$44,150 | \$52,980 |
| 2 | \$50,450 | \$60,540 |

6. Failure to respond to management's request for additional or updated documents, within a reasonable amount of time (14 days, but with the ability to extend following consultation of CVC Oasis Residential Services or Veterans Administration Long Beach Healthcare System).

Consistent with Housing First practices per Welfare and Institutions Code Section 8255(b) per NOFA Section 4.6.3, applicants are not rejected based on poor credit or financial history, poor or lack of rental history, criminal convictions unrelated to tenancy, or behaviors that indicate a lack of "housing readiness".

Applicants will be notified in writing of the reason for their rejected application and advised of their rights to request an appeal or submit a Reasonable Accommodation. All rejected applicants will have the right to appeal the decision. The Property Manager or CVPM representative must receive the appeal no later than fourteen (14) days from the rejection letter being received. Within three (3) working days of receipt of an appeal, the information will be forwarded to the Director of Supportive Housing or the Vice President of CVPM and to the assigned Case Worker for the property. The applicant will be notified in writing about the final decision of approving or denying the appeal within seven (7) days.

At the request of an applicant, a reasonable accommodation request will be considered. In addition, with the approval of the applicant, the referring staff or Case Manager will be given an opportunity to appeal any application denial based on information obtained from criminal record checks. However, all applicants will have to demonstrate that they meet program requirements. A unit will not be held while the application is under appeal.





I HAVE READ AND UNDERSTOOD THE FOREGOING AND FIND THEM TO BE REASONABLE REASONS MY RENTAL APPLICATION CAN BE DENIED. I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ATTACHED HOUSING AND INCOME STATEMENTS ARE TRUE AND CORRECT.

| Print Name (Head of Household) | Signature | Date |
|----------------------------------|-----------|------|
| Print Name (Adult Applicant # 2) | Signature | Date |

