

**Wheeler Village Apartments**  
**97 Wheeler Village Drive**  
**Southington, Connecticut 06489**  
**(860) 621-2234**

Dear Applicant:

Thank you for your interest in Wheeler Village. Please take a moment to review the following requirements before you complete the application attached to this letter.

1. The application must be fully completed and submitted to:  
97 Wheeler Village Drive, Southington CT 06489
  
2. All applicants are subject to the same screening and eligibility criteria. You must be able to demonstrate a satisfactory history in the following areas: *landlord reference, lack of arrest and eviction history, and credit history*. All information will be kept confidential and must be verified by the appropriate parties. Your application is subject to the final approval of the Board of Directors of St. Paul's Housing Corporation.
  
3. *Your application WILL NOT be processed unless all requested information is provided.* When we are ready to complete processing your application, you will be contacted to schedule an appointment to complete the required paperwork. Please be prepared to provide copies of all household members' social security cards AND proof of legal U.S. residency or entry (i.e. copies of birth certificates, naturalization certificate, alien registration cards, etc.)
  
4. **Please include a \$25.00 application fee for each applicant over 18 years old (check or money order only, no cash) made payable to Wheeler Village Apartments.** This fee will be used to process your application and will be applied to your first month's rent if you are an accepted applicant. If you are not accepted for an apartment, this fee is non-refundable.

Sincerely,

Kimberly Erdely  
Wheeler Village Apartments  
C:\My Documents\Wheelercover.doc



**Connecticut Real Estate Management**  
**P.O. Box 248**  
**Southington, CT 06489**  
**(888) 621-0546**

**RENTAL APPLICATION**

Please sign and date the attached Consumer Authorization Form if applicable.

**APPLICANT INFORMATION:**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ DOB: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Monthly Rent: \_\_\_\_\_ How Long: \_\_\_\_\_ Current Landlord Name and Phone Number: \_\_\_\_\_  
 Past Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Monthly Rent: \_\_\_\_\_ How Long: \_\_\_\_\_ Past Landlord Name and Phone Number: \_\_\_\_\_  
 Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_ Widowed: \_\_\_\_\_

**SPOUSE / CO - APPLICANT INFORMATION:**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ DOB: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Monthly Rent: \_\_\_\_\_ How Long: \_\_\_\_\_ Current Landlord Name and Phone Number: \_\_\_\_\_  
 Past Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Monthly Rent: \_\_\_\_\_ How Long: \_\_\_\_\_ Past Landlord Name and Phone Number: \_\_\_\_\_  
 Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_ Widowed: \_\_\_\_\_

**HOUSEHOLD COMPOSITION:**

Name	Relationship	DOB	Social Security Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Number of Bedrooms Required:** \_\_\_\_\_ **Family Section or Senior Section:** \_\_\_\_\_

**APPLICANT'S EMPLOYMENT OR SOURCE OF INCOME:**

Employer: \_\_\_\_\_ Job Description: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Length of Employment: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

**SPOUSE'S / CO-APPLICANT EMPLOYMENT OR SOURCE OF INCOME:**

Employer: \_\_\_\_\_ Job Description: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Length of Employment: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

**OTHER HOUSEHOLD SOURCE OF INCOME:**

Source: \_\_\_\_\_ Monthly Income: \_\_\_\_\_  
Rental Assistance : \_\_\_\_\_ Monthly Amount: \_\_\_\_\_  
(Section 8 or other program)

**REFERENCES:**

Bank: \_\_\_\_\_ Acct. #: \_\_\_\_\_ Phone: \_\_\_\_\_  
Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Credit Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Credit Reference: \_\_\_\_\_ Phone: \_\_\_\_\_

**NO DOGS OR CATS ALLOWED**

NOTE: The apartment may be occupied by the leaseholder(s) and above named family members who are also named on the HUD Recertification form(s). Any unauthorized occupants may result in termination of tenancy per the terms of the lease. By signing below, you are certifying to the landlord the information provided by you is true and correct. Giving the landlord false information regarding income or other material facts will result in termination of our tenancy.

The Landlord is authorized to use the information provided herein to conduct any and all investigations as deemed prudent by Landlord.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant #1 Applicant #2

**Connecticut Real Estate Management**  
**P.O. Box 248**  
**Southington, CT 06489**  
**860-621-2234**

**Authorization for Release of Information**

The undersigned applicant(s) hereby authorize Connecticut Real Estate Management, Agent for Wheeler Village Apartments to request the following from any/all individuals, employers, agencies, bureaus, or doctors as the case may be:

- Verification of Employment
- Verification of Social Security Payments
- Verification of Pension
- Verification of Assets / Financial Information
- Landlord Reference
- Credit Report
- Child Care Expenses
- Medical Information (to verify "Handicapped" status)
- Full-time Student Verification
- Police Check

It is understood that the information obtained will be kept confidential and used only in connection with the undersigned applicant for housing.

A copy of this authorization shall be considered valid as the original.

Name (Applicant / Tenant #1) \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

Name (Applicant / Tenant #2): \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

## SELECTION CRITERIA AND RENTAL POLICY

### FOR WHEELER VILLAGE APARTMENTS

For consideration for tenancy at Wheeler Village Apartments, an applicant must provide the following **satisfactory** references, reports and demonstrate the following:

- ❖ Landlord references from current and/or previous landlord(s);
- ❖ Credit report;
- ❖ Criminal background check;
- ❖ Verification of employment and established employment history;
- ❖ Demonstration of the ability to meet financial obligations, including rental payment and utilities.

Additional Elderly Section Criteria:

Applicants must be a) at least age 62, or b) handicapped or disabled.

*A landlord reference is not valid unless the applicant is or was the rent payer.*

*Tenant rental portion may not exceed 1/3 of their monthly rental income.*

Wheeler Village Apartments complies with federal and state fair housing laws and does not discriminate on the basis of race, creed, color, national origin, sexual orientation, ancestry, sex, marital status, lawful source of income, familial status, physical or mental disability.