Cloudbreak Communities at Kapolei

91-1078 Yorktown Street, Kapolei, HI 96707 Mailing Address: P.O. Box 75492 Kapolei, HI 96707

Phone (808) 682-1949 • Fax (808) 682-1970



Rental Criteria

Cloudbreak Communities at Kapolei welcomes your application. To understand the criteria and the application process, please read the following:

- Veteran preferred community, with Honorable or Other-Than-Honorable discharge
- Single individuals (Max of 1 person to a unit)
- Rents range from \$450 \$1,350 depending on unit type and allocation
- Gross monthly income must meet or exceed (1.5) one and a half times the monthly rent (except subsidized housing voucher holders which will require a minimum of \$250 monthly income)
- No application processing fees are charged to the applicant or resident
- Move-in costs include 1st month rent and security deposit (deposit is equivalent to the monthly rent)

Income limits for 2018						
	30%	50%	60%	80%	100%	Market
1 Person	\$24,510	\$40,850	\$49,020	\$65,360	\$81,700	No limit

Application & Documentation

Print legibly, fill in all blanks ("N/A" for not applicable) and use either black or blue ink Rental Application must be completed along with addendums

• Identification

- ➤ Gov't issued picture ID (State ID or Driver's License, VA ID, Passport, etc.)
- Social Security card (print out may be accepted while awaiting card)
- DD214 or a statement of service

Income Verification (as applicable)

- > 90 consecutive days of current pay stubs
- Current Benefit award letters i.e. SSI/SSD, VA disability, pension, retirement, etc.
- Public Assistance award letter such as GR; no need to provide food stamp award letter
- Unemployment benefits, Student financial aid or Any other form of income

Financial bank statements

- Bank statements
 - Checking account statements for the last 6 months
 - Savings account statements for the last 1 month
- Retirement, Pension or Trust funds those that you can currently withdraw money from
- Investments and personal property held as an investment



Verifications

Screening criteria will be applied in a manner consistent with all applicable laws including the Hawaii and Federal Fair Housing Acts, the Federal Fair Credit Reporting Act, program guidelines, and the Department's rules.

- · All sources of income must be provided and will be verified directly from our office
- A criminal background will be obtained. Your credit rating and debts will not affect your approval unless you are a returning resident at any of our sites with a previous balance.
- A past conviction will not necessarily lead to non-approval. However, we do not accept applicants with a sex offense, arson or terrorist conviction.
- Current references may be obtained: Landlord, program, case managers or other references will help determine history and other issues including but not limited to chronic non-payment, health and safety issues and/or repeated disruptive behavior.
- As part of the process, potential residents may meet with US Vets Inc. for a clinical assessment and drug test.

Rejected Applications

You will be notified in writing of the decisions made on your application if rejected. Information on how to obtain a copy of your background will be on the letter sent to you. Applications may be rejected for any of the following reasons but not limited to:

- Falsification of any information on the application
- Not meeting income guidelines
- A criminal background that reveals an arson, sex offense, or acts of terrorism
- A violent felony conviction within the last 12 months, unless you are currently being supervised by a law enforcement officer such as a parole officer.
- Good cause including, but not limited to: any display of disruptive or aggressive behavior towards the staff, residents or guests prior to move-in.
- Failure to meet other qualifications or selection criteria required under Affordable Housing Program, or management policy

There may be additional paperwork that may need to be completed. If you would like, you may call ahead to schedule an appointment or we will meet with you, as time permits, when you return your application and requested documents. You may bring your own copies or we can make copies for you (please do not include your picture ID with your copies). Rejected applicants will be informed in writing within fourteen (14) days of determination with the reasons for denials and will include instructions for an appeal process should you wish to appeal.



Waiting List

We welcome your application for our waitlist if unit of desirable size or type is not currently available. The waitlist is maintained open at all times. All inquiries and applications shall be made at the management office located at the address stated on page 1

An applicant must submit a completed pre-application form. All applications will be dated and time stamped upon receipt by the management agent. The application or information received will be evaluated by a staff member to determine if, preliminarily, eligibility criteria has been met (e.g. income, household size, student status), and if the application has been completely filled out. Applications completely filled and meeting the eligibility requirements will be placed on the waitlist in the order received.

An application that is incomplete or does not meet the eligibility requirements will be rejected and marked "Denied" with the reason for denial indicated, and <u>not</u> placed on the waitlist. In the event that an applicant is rejected, the applicant will receive written notification of the rejection, and will also be notified that they shall have ten (10) days from the date of the notification to respond in writing, or request a meeting, to discuss the rejection. When an applicant is rejected, more detailed information concerning appeal rights will be furnished at the time of the rejection.

The applicant at, or near the top of the wait list has forty-eight (48) hours from receipt of the phone call or, if notified by letter, five (5) business days from date of mailing, to notify the management of their intention to accept or reject the unit offered. An applicant will be removed from the wait list if mail is returned with incorrect mailing information or if a phone number is disconnected or incorrect.

An applicant who refused a unit due to medically necessary reasons will not lose his or her place on the waitlist. Otherwise, any applicant who is offered a unit and refuses a second time will be removed from the wait list and will have to reapply at any time to be at the bottom of the list.

Violence Against Women Act

The Violence Against Women Act (VAWA): This act provides protections for persons that have been subject to domestic violence, dating violence, sexual assault, or stalking. VAWA protections are available equally to all individuals regardless of sex, gender identity, or sexual orientation.

- <u>Protections for applicants:</u> You cannot be denied admission or denied assistance because you are or have been subject to domestic violence, dating violence, sexual assault, or stalking.
- <u>Protections for tenants:</u> You may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been subject to domestic violence, dating violence, sexual assault, or stalking.

The Development will comply with state and federal fair housing and antidiscrimination laws; including, but not limited to, consideration of reasonable accommodations requested to complete the application process. Chapter 1, Subchapter B of this title provides more detail about reasonable accommodations.

If you need any further information regarding any written information on this document, do not hesitate to contact us directly at (808) 682-1949. General office hours are Monday through Friday 8am-330pm and by appointment, if you desire. Thank you for your interest.



Cloudbreak HI - waitlist Pre-Application



NAME:	Date of Birth:						
Mailing address:							
1st Phone number	2 nd Phone number						
Email:	Unit type desired: ☐ Stu	Unit type desired: ☐ Studio ☐ Single ☐ Shared					
MONTHLY INCOME:							
Employment: Hourly Wage \$	Hours per weekOR Monthly Salary:\$						
Social Security \$	Family Contributions \$	Other \$					
SSI / Disability\$	· · · · · ·						
GR \$	<u> </u>						
VA\$	Unemployment \$	Other \$					
Annuity \$	Spousal Support: \$	_					
Yes No Are you a U.S. Veteran? type of discharge:							
anticipated annual income amounts. <u>I a</u> changes. I am responsible to mainta	agree to notify the landlord immediately ain this information as accurate as poss oof of income and student status if applical	rif any information on this form is ible. Upon a unit becoming					
Applicant's Signature	Date						
OFFICE USE ONLY							
Date received:	_Time: Received by:						
Date entered:	Entered by:						

