

**Habitat America, LLC, Management Company**  
**RESIDENT SELECTION CRITERIA**  
For Tax Credit Properties

**Property Name: Riverwatch**  
**5670A Furnace Avenue, Elkridge, MD 21075**

**Effective Date: July 19, 2022**  
**PH: 443-833-2482 TTY: 711**

Thank you for applying to live at our community. This document is provided to you to explain the process we use to select our residents. Habitat America, LLC is an Equal Housing Opportunity provider. It is our policy to treat all residents and visitors at our properties fairly and consistently without regard to race, color, religion, sex, national origin, disability, familial status, sexual orientation, gender identity, marital status or source of income. This community and its employees comply with the provisions of Title VIII of the Civil Rights Act of 1968, the Fair Housing Amendments Act of 1988 (“Fair Housing Act”) and, to the extent applicable, the Americans with Disabilities Act. Furthermore, this community complies with the State and Local fair housing regulations of the jurisdictions in which it is located.

**PROJECT ELIGIBILITY**

This community may be designated for a special population. Applicants must be adults and must meet the restrictions as indicated below in order to proceed with the application process.

No special population restrictions apply to this community.

Valid identification with a picture will be required (photo copy may be kept on file). Applicants must disclose social security numbers (SSN) for all family members. A valid SSN card issued by the Social Security Administration is the necessary documentation required. If a SSN card is not available the community will accept a letter from the Social Security Administration stating that a new card has been applied for. Where applicable an assigned Federal Identification Number may be used. United States Code Title 8, subsection 1324 (a) (1) (A) prohibits the harboring of illegal aliens. The provision of housing to illegal aliens is a fundamental component of harboring. All applicants will be required to provide proof of citizenship or legal immigration status.

**STUDENTS**

This community follows the student regulations written in Section 42 of the Internal Revenue Code. The regulation states that a household comprised of all full time students will not be eligible for this program. There are five exceptions to this rule. For more information contact the Community Manager.

**OCCUPANCY STANDARDS**

Habitat America, LLC has established occupancy standards to permit the resident to select the apartment size they deem appropriate to their needs while preventing overcrowding and underutilization of the apartment. The occupancy standard is based on 2 persons per bedroom plus one: Note: Children under 2 may not be counted towards number of occupants allowed, and no adult members can be added to the household in the first 12 months of occupancy that would compromise the tax credit section 42 restrictions.

Number of Bedrooms	Maximum # of Occupants Allowed
2	5
3	7

## INCOME REQUIREMENTS

The household's total gross annual income shall not exceed the property's applicable area median income as posted by HUD each year. All forms of household income must be disclosed. In addition, minimum income limits apply. Proof of all income and assets is required.

## TAKING APPLICATIONS

**The Application:** Each adult (18 years of age or older, or emancipated) must complete and sign the Rental Application. **There is a non-refundable application fee of \$25 per adult due at the time the application is submitted.** An application cannot be processed unless it is fully complete and the application fee has been paid. Applicants must list all members who will reside in the apartment unit and designate the number of bedrooms being requested. Apartments specially designed for the disabled will be marketed only to persons with disabilities. If an apartment is not available when the application is submitted, the applicant will be put on waiting list. The application will be fully screened and verified when an apartment becomes available for occupancy. Once the application is approved and the available unit accepted, the applicant will be required to sign a lease agreement in which applicant agrees to abide by all property rules and regulations. If assistance is needed in completing the application or lease documents, contact the Community Manager. If any information provided by the applicant proves to be untrue during the verification process, these applications will be denied on the basis of attempted fraud.

**Screening:** A report will be obtained through a commercial credit reporting agency which will determine the application accepted or denied.

### Credit/Rental History:

- Rental history will be verified and must indicate the ability to abide by the terms of the lease contract, care for the property without damage and pay rent on time. Applicants owing balances at other Habitat America properties will be denied.
- Applicant must be able to establish the necessary utilities with the appropriate utility provider and must not have unpaid gas and/or electric bills.
- Discharged bankruptcies will be considered for a period of one year from date of discharge.
- Medical bills and student loans are excluded from consideration.

### Criminal Background History: Applicant may be denied if:

- Any household member has been evicted from Federally assisted housing for drug-related criminal activity, or is currently engaging in the illegal use of a drug.
- There is a reasonable cause to believe that a household member's abuse or pattern of abuse of alcohol and/or an illegal drug may interfere with the health, safety, or right to peaceful enjoyment of the premises for other residents.
- Any household member with a felony conviction of drug-related criminal activity including but not limited to possession (other than marijuana), distribution, transport, sale, manufacture, or storage of illegal drugs and/or drug paraphernalia, or conviction of any State or Federal laws relating to illegal drugs and/or paraphernalia.
- Any household member is subject to lifetime registration requirements under a state or federal sex offender registration program.
- Any other criminal history exists that would threaten the health, safety, or peaceful enjoyment of the premises by other residents or the health and safety of the owner, employee, contractor, or agent who is involved in the housing operations, or otherwise threatens the owner's investment in the property.

**Rejection Procedures:** The denial letter will advise the applicant that if they believe there are errors in their screening report or believe that there may be extenuating factors that you wish for us to consider, they have fourteen (14) days to respond in writing to request an appeal. If an applicant disputes the accuracy of any information provided to the landlord by a screening service, the applicant may contact the screening company to obtain a copy of screening results. The name, address and phone number of the screening company will be provided in the denial letter. Applicants who choose not to appeal the denial may reapply at the community in 60 days.

**SECTION 504**

Habitat America, LLC developed a Section 504 Policy that addresses all reasonable accommodation requests for persons with disabilities. For more information on reasonable accommodation requests, contact the Community Manager.

**RIVERWATCH**

Security Deposit:	\$250 with Approved credit or 1 month’s rent with Conditional credit
Lease Term:	1 year lease
Utilities Included:	Water, Sewer and Trash

**Rental Rates & Income Requirements:**

Total household income will be reviewed and verified for occupancy in our community in accordance with the following maximum and minimum income limits based on family composition. Voucher holders do not have a minimum income requirement but must meet all the other requirements. (Limits are subject to change)

Unit Type	Square Footage	Rental Rate	Minimum Income	Maximum Income
2BR / 1 BA 50% State AMI 2 units	986	\$1,213	\$39,301	1 person - \$41,150 2 people - \$47,000 3 people - \$52,900 4 people - \$58,750 5 people - \$63,450 6 people - \$68,150 7 people - \$75,850
2BR / 2BA 50% State AMI 20 units	3 @ 892 17 @ 979			
3BR / 2BA 50% State AMI 10 units	4 @ 1,782 6 @ 1,841	\$1,398	\$45,295	
3BR / 2BA 60% 10 units	2 @ 1,672 8 @ 1,841	\$1,682	\$54,497	1 person - \$48,780 2 people - \$55,740 3 people - \$62,700 4 people - \$69,660 5 people - \$75,240 6 people - \$80,820 7 people - \$86,400

### **MARKET RATE UNITS**

Voucher holders must have a minimum income of three times the amount of the resident's portion of rent (Example: resident portion is \$250 your annual minimum income with your voucher would be \$7,200)

<b>Unit Type</b>	<b>Square Footage</b>	<b>Market Rental Rate</b>	<b>Minimum Income</b>
2BR / 1BA 2 units	999	\$1,750	\$56,700
2BR / 2BA 17 units	892 - 979	\$1,775 - \$1,862	\$57,510 - \$60,329
3BR / 2BA 23 units	917 - 1,841	\$1,950 - \$2,785	\$63,180 - \$90,234

**Preference:** Five (5) units are designated for households that have at least one member who is disabled.

**Pet Policy:** Dogs, cats, birds, turtles and fish in small aquariums (20- gallon max) are welcome. A maximum of two dogs, cats or birds in any combination are permitted in each townhouse with a maximum weight of 100 lbs. total for one full grown pet or two full grown pets combined. For dogs and cats, a non- refundable pet fee of \$300 per pet, these fees will be required at move in. In addition there will also be a monthly pet fee of \$35 per pet for cats and dogs. Management must see all pets prior to their move in and has the right to deny any pet that may violate the community rules and regulations or be a danger to the Community. Dog and Cat owners are required to present a copy of a current license and proof of current rabies inoculation at move in and annually. Dog owners must purchase and maintain renter's insurance coverage with a minimum of \$300,000 in liability coverage. A copy of the policy renewal must be given to management once a year. The policy must name the following as Certificate Holders: The name of the Community and Habitat America, LLC. This requirement is to protect the dog owner against liability claims in the event their dog causes injury to others. Dogs, specifically, "Pit bulls" or other perceived vicious breeds (including but not limited to Pit bull cross-breeds, Pit bull mix, American Staffordshire terrier, Staffordshire bull terrier) are not permitted on the property at any time. Visiting Pets, puppies / kittens under the age of six (6) months, and other reptiles are not permitted. Management has the right to revoke the privilege of having a pet if the pet policies are violated. Animals which are designated as assistance animals to the disabled are accepted with the appropriate documentation.

**Smoking/Fire Risk Reduction Policy:** Smoking will not be permitted in the units or anywhere on property grounds. Smoking is defined as carrying or inhaling or exhaling smoke from any lighted cigar, cigarette, e-cigarette, vaporizer, pipe or consumer product modified for smoking or any other lighted tobacco or plant product. Additionally, burning of incense and candles is prohibited to reduce risk of fire. Also, in light of recent hazards related to Hoverboards, Habitat America is prohibiting these devices at all communities, including all common areas and grounds. Beginning August 1, 2016, Hoverboards may not be used, charged or stored anywhere at the communities, including all common areas and grounds. All leaseholders will be required to sign a Non-smoking Lease Addendum agreeing to these rules prior to occupancy.

#### **Violence against Women Act**

The VAWA Act protects victims of domestic violence, dating violence, sexual assault, or stalking, as well as their immediate family members generally, from being evicted or being denied housing assistance if an incident of violence that is reported and confirmed. The VAWA also provides that an incident of actual or threatened domestic violence, dating violence or stalking does not qualify as a serious or repeated violation of the lease nor does it constitute good cause for terminating the assistance, tenancy, or occupancy rights of the victim.

If you need additional information concerning the Selection Criteria, please see the Community Manager. Please note this Resident Selection Criteria in its entirety is subject to change without notice.

**Acknowledgment/Receipt:**

By signing below I/We acknowledge that we were given and have received a copy of the Resident Selection Criteria for RiverWatch. I/We also understand that the property owner may disclose the application status to any agency with program regulations applicable to the community.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Management Signature

\_\_\_\_\_  
Date





# WELCOME TO YOUR NEW APARTMENT!

Date \_\_\_\_\_

## APPLICATION FOR RESIDENCY

APT# \_\_\_\_\_ ADDRESS \_\_\_\_\_ RENT \_\_\_\_\_  
TENTATIVE M/I DATE \_\_\_\_\_ LEASE TERM \_\_\_\_\_

## PERSONAL INFORMATION

### PLEASE PRINT

FULL NAME \_\_\_\_\_ HOME PH: (\_\_\_\_) \_\_\_\_\_  
LAST FIRST MIDDLE INIT

DO YOU HAVE A PET? YES \_\_\_\_\_ NO \_\_\_\_\_ WHAT KIND/ TYPE? \_\_\_\_\_ U.S. CITIZEN? \_\_\_\_\_

LIST ALL PERSONS TO RESIDE IN APARTMENT:

FULL LEGAL NAME	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	SOCIAL SECURITY #
	(SELF)		

## RESIDENCE HISTORY

PRESENT ADDRESS \_\_\_\_\_  
STREET APT# CITY STATE ZIP  
COMMUNITY NAME, LANDLORD OR MORTGAGE HOLDER \_\_\_\_\_  
NAME CITY STATE (\_\_\_\_) PHONE  
MONTHLY PAYMENT \$ \_\_\_\_\_ LENGTH OF OCCUPANCY \_\_\_\_\_ / \_\_\_\_\_ LEASE EXPIRES \_\_\_\_\_  
YRS MOS

REASON FOR MOVING \_\_\_\_\_  
PREVIOUS ADDRESS \_\_\_\_\_  
STREET APT# CITY STATE ZIP  
COMMUNITY NAME, LANDLORD OR MORTGAGE HOLDER \_\_\_\_\_  
NAME CITY STATE (\_\_\_\_) PHONE  
LENGTH OF OCCUPANCY \_\_\_\_\_ / \_\_\_\_\_ REASON FOR MOVING? \_\_\_\_\_  
YRS MOS  
HAVE YOU EVER BEEN EVICTED FROM AN APARTMENT? \_\_\_\_\_ WHERE? \_\_\_\_\_

Do you now have or have you had an infestation of bed bugs in the past 12 months? YES \_\_\_\_\_ NO \_\_\_\_\_

## EMPLOYMENT INFORMATION

APPLICANT EMPLOYED BY \_\_\_\_\_ HOW LONG? \_\_\_\_\_ / \_\_\_\_\_  
YRS MOS  
EMPLOYERS ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP  
YOUR LOCAL BUS. ADD. \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
POSITION HELD \_\_\_\_\_  
GROSS ANNUAL SALARY \$ \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

OTHER INCOME SOURCES \_\_\_\_\_ EXTRA YEARLY INC.\$ \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ / \_\_\_\_\_  
YRS MOS  
ADDRESS \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

POSITION HELD \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

CO-APPLICANT EMPLOYED BY \_\_\_\_\_ HOW LONG? \_\_\_\_\_ / \_\_\_\_\_

YRS MOS

EMPLOYERS ADDRESS \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

YOUR LOCAL BUS. ADD. \_\_\_\_\_ PHONE (\_\_\_\_\_) \_\_\_\_\_

POSITION HELD \_\_\_\_\_

GROSS ANNUAL SALARY \$ \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ PHONE (\_\_\_\_\_) \_\_\_\_\_

OTHER INCOME SOURCES \_\_\_\_\_ EXTRA YEARLY INC.\$ \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ HOW LONG? \_\_\_\_\_ / \_\_\_\_\_

YRS MOS

ADDRESS \_\_\_\_\_ PHONE (\_\_\_\_\_) \_\_\_\_\_

POSITION HELD \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

### BANKING AND CREDIT

BANK \_\_\_\_\_ / \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
NAME CITY & STATE PHONE

CHECKING ACCOUNT NO. \_\_\_\_\_ SAVINGS ACCOUNT NO. \_\_\_\_\_

BANK \_\_\_\_\_ / \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
NAME CITY & STATE PHONE

CHECKING ACCOUNT NO. \_\_\_\_\_ SAVINGS ACCOUNT NO. \_\_\_\_\_

TRUSTS, CD'S, MISC. \_\_\_\_\_

AUTO LOAN WITH \_\_\_\_\_ MONTHLY PAYMENT \$ \_\_\_\_\_ BALANCE OWING \$ \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY & STATE \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

CREDIT REFERENCE \_\_\_\_\_ MONTHLY PAYMENT \$ \_\_\_\_\_ BALANCE OWING \$ \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY & STATE \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

CREDIT REFERENCE \_\_\_\_\_ MONTHLY PAYMENT \$ \_\_\_\_\_ BALANCE OWING \$ \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY & STATE \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

### OTHER INFORMATION

AUTO MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ TAG NO. \_\_\_\_\_ STATE \_\_\_\_\_

AUTO MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ TAG NO. \_\_\_\_\_ STATE \_\_\_\_\_

AUTO MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ TAG NO. \_\_\_\_\_ STATE \_\_\_\_\_

APP.DR LIC. # \_\_\_\_\_ STATE \_\_\_\_\_ CO-APP DR LIC.# \_\_\_\_\_ STATE \_\_\_\_\_

APP. EMERGENCY CONTACT (NOT LIVING WITH YOU) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
NAME ADDRESS PHONE

APP. EMERGENCY CONTACT (NOT LIVING WITH YOU) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
NAME ADDRESS PHONE

### CANCELLATION POLICY

TO RESERVE AN APARTMENT, THE APPLICANT MUST PAY A RESERVATION DEPOSIT AND AN APPLICATION FEE. SHOULD THE APPLICANT CANCEL HIS/HER APARTMENT RESERVATION WITHIN 48 HOURS OF THE DATE OF APPLICATION, THE APARTMENT DEPOSIT WILL BE FULLY REFUNDED. CANCELLATIONS RECEIVED AFTER THE 48 HOUR WAITING PERIOD ARE NOT ELIGIBLE FOR DEPOSIT REFUND. CANCELLATIONS SHOULD BE SUBMITTED IN WRITING. APPLICATION FEES ARE NON-REFUNDABLE.

## APPLICANT'S CONSENT

I HEREBY AUTHORIZE MANAGEMENT OR ITS AGENT TO INVESTIGATE MY PAST HISTORY FOR THE PURPOSE OF DETERMINING APPROVAL OF THIS APPLICATION FOR RESIDENCY. THIS CONSENT INCLUDES ANY HISTORY OF RESIDENCY, EMPLOYMENT, CREDIT AND ANY OTHER REFERENCES THE MANAGEMENT DEEMS NECESSARY.

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

RECEIVED BY \_\_\_\_\_

DATE \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

## OFFICE VERIFICATION SECTION

### REFERENCE VERIFICATION

### COMMENTS

<input type="checkbox"/> PRESENT RESIDENCE	
<input type="checkbox"/> PREVIOUS RESIDENCE	
<input type="checkbox"/> PRESENT EMPLOYER (APP.)	
<input type="checkbox"/> PREVIOUS EMPLOYER (APP.)	
<input type="checkbox"/> PRESENT EMPLOYER (CO-APP.)	
<input type="checkbox"/> PREVIOUS EMPLOYER (CO-APP.)	
<input type="checkbox"/> CREDIT REPORT COMPLETE	
<input type="checkbox"/> OTHER	

Revised 05/01/2011



**“Habitat America, LLC, is pledged to the letter and spirit of the U.S. Policy for the achievement of equal housing opportunity throughout the Nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status or national origin.”**

**THANK YOU FOR RESIDING WITH US!**

**APPLICANT or CO-SIGNER CONSENT**

“I hereby authorize RiverWatch Apartments to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment salary details, and/or any other necessary information.”

“I hereby expressly release RiverWatch Apartments, and any procurer or furnisher of information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.”

“I understand that should I lease an apartment, RiverWatch Apartments, through its agents, assignees and employees, shall have a continuing right to review my consumer report information, rental application, payment history and occupancy history for account review purposes, future renewal consideration, collection purposes and for improving application methods.”

\_\_\_\_\_  
Applicant or Co-signer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Community Manager/Agent's Signature

\_\_\_\_\_



**PRIVACY PROTECTION ACT LETTER (Maryland)**

RiverWatch Apartments  
(Property Name)

**NOTICE OF DISCLOSURE FOR APPLICATION**

As provided by the Maryland Personal Information Protection Act of 2008, anyone who is requested to provide personal information about himself must be informed whether he/she is legally required to provide such information, or whether he/she may refuse to supply the information requested. As an applicant for housing he/she is required to provide certain information that will enable Habitat America, LLC to complete the eligibility process for Section 42 Low Income Housing Tax Credit Program or other federal housing programs.

A Photostat or facsimile copy of your signature may be used to retrieve information required to determine gross annual income. It may be used to verify information listed on our application or re-certifications for the purpose of approval and/or retrieval of income and asset information during the compliance period of the property, deemed necessary for the Section 42 Low Income Housing Tax Credit Program or other federal housing program guidelines set forth for this property.

Your signature below indicates authorization to request verifications of necessary information concerning any income or asset sources by phone, fax or Photostat copy of this form, along with the necessary identifying verification form during the declared compliance period of this property.

The information requested will be used to determine an adjusted annual income, which you and your family receive from all income sources. This is necessary because the Rules and Regulations adopted pursuant to the Authority conferred on the Maryland Department of Housing and Community Development limit eligibility for initial occupancy to families whose adjusted income does not exceed certain established limits. In addition, it is necessary to know the composition of your family (number of dependents) so that the proper size of dwelling unit may be authorized for you and your family.

Although you are not legally required to provide the information requested, your failure to do so will result in our inability to determine your eligibility for housing in this development.

This paperwork is retained in your file and is subject to audits by Maryland Department of Housing and Community Development, 7800 Harkins Road, Lanham, Maryland, 20706. It is possible that information provided by you will be revealed to others for the purpose of confirmation or for other purposes in accordance with the Maryland Freedom of Information Act, but any information so supplied is subject to the safeguards of the Maryland Personal Information Protection Act.

My/Our signature(s) below indicate my/our acceptance of the application for occupancy in its entirety.

\_\_\_\_\_  
Applicant #1 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant #2 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant #3 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Agent Habitat America, LLC

\_\_\_\_\_  
Date

