



Muckleshoot Housing Authority

38037 158th Avenue S.E., Auburn, Washington 98092

Phone (253) 939-3311 Fax (253) 735-6473



RENTAL APPLICATION

Dear Applicant:

Please complete the attached application and submit the following documentation with your application:

- INCOME VERIFICATION:** This applies to each household member who is 18-years of age and older.
- SOCIAL SECURITY NUMBERS:** Provide numbers for all household member six (6) years of age and older.
- PROOF OF ENROLLMENT WITHIN A FEDERALLY RECOGNIZED TRIBE:** MHA will need a copy of your Tribal ID Card or a letter from your Tribal Enrollment Office. If you are not Native American but have children that are, please submit the above information pertaining to all enrolled children.
- If you do not have full custody of child/children you are applying for, MHA will need **Legal Documentation** stating your child/children's position in your household.
- Release of Information Form:** This form must be signed by each household member 18-years of age and older that you will be applying for. This form allows MHA to verify income and complete the required background checks including criminal, rental history and other verification that will determine your eligibility. Please be sure to read the entire form before you and your household members sign. If you need additional forms or have questions, please call the number above.

PLEASE NOTE: This application will not be accepted, processed and/or date stamped until all required documentation is submitted. Once all documentation is received, the application will be processed and if qualified, your name will be added to the waiting list. Once you are placed on the waiting list, you are required to update your application once a year from the date your application was date stamped. If you fail to update, you will be placed on the In-Active Waiting List until your required update is completed. Please not that it is your responsibility to remember when to update, the MHA will send one reminder notice to applicants to update. If you have any questions pertaining to the application process or you need assistance in completing it, please call the office at the number above.



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This application can be used to obtain housing services from the Muckleshoot Housing Authority under the Housing Authority's Low-Income Housing funded by Native American Housing Assistance and Self Determination Act (NAHASDA) and the Tribal Tax Fund Housing Program as set up by the Tribal Council. Both programs provide services based on income criteria, housing code requirements, affordability, and specific contractor bidding procedures.

APPLICATION FOR RENTAL HOUSING

APPLICANT & HOUSEHOLD INFORMATION

Housing Request: Rental Housing Section 8 Handicapped Transfer

Name: _____ SSN: _____ DOB: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Message: _____

Applicant Race: _____ Tribe: _____ Enrollment #: _____

HOUSEHOLD COMPOSITION: List all persons who are/will be residing in your residence on a permanent basis. List the Head of Household and continue with the oldest to the youngest.

Name	Relation to Head of Household	Date of Birth	Social Security Number	Sex	Tribal Enrollment / Number
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Comments: _____

TOTAL HOUSEHOLD INCOME: List all monies earned or received by your household. This includes money from wages, self-employment, monthly child support, Social Security, Workman’s Compensation, retirement, TANF payments, Veterans benefits, alimony, rental property income, stock dividends, income from per capita, and all other sources: (Verification must be included with your application)

Household Member	Amount Per Month	Income Source
1.		
2.		
3.		
4.		

Household Member: _____ Position: _____

Name of Employer: _____ Supervisor: _____

Address: _____ Phone Number: _____

Household Member: _____ Position: _____

Name of Employer: _____ Supervisor: _____

Address: _____ Phone Number: _____

If DSHS benefits are received, please provide your case worker, DSHS office city, telephone and client ID#:

Case Worker: _____ DSHS Office Location: _____

Phone Number: _____ Client ID #: _____

1. Have you sold or disposed of any asset(s) in the last two years? () Yes () No

If yes, please explain: _____

2. Have you or any adult household member ever used any name(s) or Social Security number(s) other than the one you are currently using? () Yes () No

If yes, please explain: _____

3. Have you or any of your household, ever committed any fraud in a federally-assisted housing program or been required to repay money for knowingly misrepresenting information for such program? () Yes () No

If yes, please explain: _____

4. Do you currently owe any money to a Housing Authority in connection with your or any household member’s participation in a federally assisted housing program? () Yes () No

If yes, please explain: _____

RENTAL HOUSING INFORMATION: In order to complete your application for Low-Rent Housing, you must provide information regarding your rental history. Failure to provide complete and accurate information may result in insufficient information to determine your eligibility for the program.

Have you ever applied for housing with the Muckleshoot Housing Authority: () Yes () No
Were you evicted: () Yes () No If yes, please explain: _____
Do you have outstanding debts to MHA: () Yes () No Reason you left: _____

HOUSING INFORMATION: Starting with your current housing, please provide the requested information for current and previous residences.

Address: _____ City: _____ State: _____ Zip Code: _____

Date of Occupancy: _____ Do you have a rental or lease agreement in your name: () Yes () No

Is eviction action pending against you: () Yes () No If yes, please explain: _____

Complex Name: _____ Landlord Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Monthly Rent: \$ _____ Number of Bedrooms: _____ Utilities Included: () Yes () No

Address: _____ City: _____ State: _____ Zip Code: _____

Date of Occupancy: _____ Do you have a rental or lease agreement in your name: () Yes () No

Were you evicted from this location: () Yes () No If yes, please explain: _____

Complex Name: _____ Landlord Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Monthly Rent: \$ _____ Number of Bedrooms: _____ Utilities Included: () Yes () No

Address: _____ City: _____ State: _____ Zip Code: _____

Date of Occupancy: _____ Do you have a rental or lease agreement in your name: () Yes () No

Were you evicted from this location: () Yes () No If yes, please explain: _____

Complex Name: _____ Landlord Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Monthly Rent: \$ _____ Number of Bedrooms: _____ Utilities Included: () Yes () No

GENERAL INFORMATION:

1. Have you ever vacated a rental unit owing rent or other amounts? () Yes () No

If yes, please explain: _____

2. Have you or any member of your household been convicted within the past two (2) years for drug related or violent criminal activity? () Yes () No

If yes, please explain: _____

3. Have you or any member of your household been convicted within the past two (2) years for an alcohol-related offense? () Yes () No

If yes, please explain: _____

4. Are you or any member of your household a registered sex offender? () Yes () No

5. Do you own a pet? () Yes () No If yes, what type: _____

6. Would you be willing to give up the pet if required in order to receive housing? () Yes () No

PLEASE READ BEFORE SIGNING:

I understand that the information above is provided to the Muckleshoot Housing Authority in order to process my application for the Consolidated Tribal Housing Program. I hereby authorize the above listed references to release employment and tenant information to the MHA in order to verify my references. I further understand that providing false or misleading information may be grounds for rejection of my application, or if I become a tenant, it may be grounds for eviction.

I certify that all the information provided in this application, including household composition, family assets, income, allowances, deductions, and previous housing assistance is accurate and complete to the best of my knowledge. I understand that I am required to report all changes of household composition and income to the MHA in writing. I understand that the Title 18, Section 1011 of the US Code states that a person is guilty of a felony for knowingly and willingly making false statements to any department or agency. **My application is only considered complete after a fully executed application and the required verification documents are received. The date the MHA receives all the required information is the effective date my application is added to the waiting list.**

By signing below, I acknowledge that per the MHA Policies & Procedures stated under Section IV, Paragraph 1 in the Drug & Alcohol Policy: “Any applicant for the MHA whom the MHA has reasonable suspicion to believe is using illegal drugs and/or alcohol may be required to take a Drug and/or alcohol screening test or other test within a time specified by the MHA. Any applicant who fails or refuses to take such a test shall be ineligible for admission to any MHA program for a two (2) year period beginning on the date that such test was to have been taken.”

The Board of Commissioners of the Muckleshoot Housing Authority may waive the ineligibility of any person who is ineligible for admission to a MHA program if the person demonstrates successful completion of a supervised drug or alcohol rehabilitation program approved by MHA; or the person has otherwise been rehabilitated successfully; or the circumstances leading to the ineligibility no longer exist. Any person desiring to have his or her ineligibility waived shall have the burden of showing that the requirements for waiver have been met.

Signature of Applicant: _____ Date: _____

Other Adult: _____ Date: _____

Other Adult: _____ Date: _____

**AUTHORIZATION
for Release of Information**

CONSENT: I authorize and direct any Federal, State, or local agency, organization, business, or individual to release to the Muckleshoot Housing Authority any information or materials needed to complete and verify my application for participation, and/or to maintain my continued assistance under the Section 8, Rental Rehabilitation, Low-Income Public and Indian Housing, and/or other housing assistance programs. I understand and agree that this authorization or the information obtained with its use may be given to and used by the Muckleshoot Housing Authority in administering and enforcing program rules and policies.

INFORMATION COVERED: I understand that, depending on program policies and requirements, previous or current information regarding me or my household may be needed. Verifications and inquiries that may be requested include, but are not limited to:

Identity and Marital Status	Employment, Income, and Assets	Residences and Rental Activity
Medical or Child Care Allowances	Credit and Criminal Activity	

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation in a housing assistance program.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED: The groups or individuals that may be asked to release the above information (depending on program requirements) include, but are not limited to:

Previous Landlords (including Public Housing Agencies)	Past and Present Employers	Veterans Administration
Courts and Post Offices	Welfare Agencies	Retirement Systems
Schools and Colleges	State Unemployment Agencies	Banks and other Financial Institutions
Law Enforcement Agencies	Social Security Administration	Credit providers and Credit Bureaus
Support and Alimony Providers	Medical and Child Care Providers	Utility Companies
	Tribe/State ICW Agencies	Tribal Tax Fund

COMPUTER MATCHING NOTICE AND CONSENT: I understand and agree that HUD or the Public Housing Authority may conduct computer matching programs to verify the information supplied for my application or recertification. If a computer match is done, I understand that I have a right to notification of any adverse information found and a chance to disprove that information

CONDITIONS: I agree that a photocopy of this authorization may be used for the purposes stated above.

	<u>SIGNATURES</u>	<u>PRINTED/TYPED NAME</u>	
Head of Household:	_____	_____	Date: _____
Spouse:	_____	_____	Date: _____
Adult Member:	_____	_____	Date: _____
Adult Member:	_____	_____	Date: _____
Adult Member:	_____	_____	Date: _____



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Drug & Alcohol Policy

SECTION I. PURPOSE

A. The purpose of this drug and alcohol policy is to assure a drug and alcohol free environment for all Muckleshoot Housing Authority residents.

B. It is the intent of this policy to bar admission to all Muckleshoot Housing Authority programs of any and all persons engaged in drug-related criminal activity, whether on or off Muckleshoot Housing Authority premises, and to any and all persons engaged in alcohol use or possession or who are inebriated on Muckleshoot Housing Authority premises (see exception).

C. This policy is incorporated by reference into all Muckleshoot Housing Authority leases.

(Optional Exception) The only exception to this "drug-free" policy is the personal, legal and responsible use of alcohol inside homes by persons legally old enough to do so and under the control of the tenants who reside in those residences. In this case, the tenant is 100% responsible for all personal, financial and physical consequences of its use.

SECTION II. APPLICABILITY

This policy applies to all Muckleshoot Housing Authority premises rental units, wherever situated.

SECTION III. DEFINITIONS

A. "Drug-related criminal activity" means the illegal manufacture, sale, distribution, use or possession of a controlled substance, whether on or off Muckleshoot Housing Authority premises, and includes offenses for which only a civil penalty may be assessed. "Drug-related criminal activity" also means the illegal manufacture, sale, distribution, use or possession of a controlled substance by a resident other than a tenant, whether on or off Muckleshoot Housing Authority premises. "Drug-related criminal activity" also means the illegal manufacture, sale, distribution, use or possession of a controlled substance by a visitor or guest on Muckleshoot Housing Authority premises or such an individual being under the influence of a controlled substance while on Muckleshoot Housing Authority premises.

B. "Controlled substance" has the same meaning as defined in Title 21 of the United States Code.

C. "Use or possession of alcohol or inebriation" includes use or possession of alcohol on Muckleshoot Housing Authority premises or inebriation on Muckleshoot Housing Authority premises. Alcohol use or possession or inebriation also includes use or possession of alcohol or inebriation by a resident other than a tenant or by a visitor or guest on Muckleshoot Housing Authority premises.

- E. "Muckleshoot Housing Authority premises" includes all rental housing units, all common areas, all administrative areas and all lands and buildings included in any lease of property to the Muckleshoot Housing Authority.
- F. "Date of application for admission" shall mean the date for application is made for an available rental UNIT or homebuyer UNIT, whether or not constructed, and shall not include any period in which a person is on a waiting list for housing.

SECTION IV. INELIGIBILITY FOR ADMISSION

A. Prior Drug-Related Eviction or Termination or Prior Conviction

- 1. Persons evicted by any Tribally Designated Indian Housing Authority, any Indian Housing Authority, public housing, , or any Section 8 program with any Tribally Designated Housing Authority or any Indian Housing Authority has been terminated because of drug-related criminal activity are ineligible for admission to any Muckleshoot Housing Authority program for a 2-year period beginning on the date of such eviction or termination.
- 2. Persons convicted in any jurisdiction of an offense (including levy of a civil assessment) because of drug-related criminal activity are ineligible for admission to any Muckleshoot Housing Authority program for a 2 -year period beginning on the date of such conviction.

B. Current Drug-Related Criminal Activity.

- 1. Persons whom the Muckleshoot Housing Authority has reasonable cause to believe are engaged in drug-related criminal activity are ineligible for admission to any Muckleshoot Housing Authority program for a 2 -year period beginning on the date of application for admission.

C. Drug and/or Alcohol Screening

- 1. Any applicant for Muckleshoot Housing Authority housing whom the Muckleshoot Housing Authority has a reasonable suspicion to believe is using illegal drugs and/or alcohol may be required to take a drug test or other test within a time specified by the Muckleshoot Housing Authority. Any applicant who fails or refuses to take such a test shall be ineligible for admission to any Muckleshoot Housing Authority program for a 2 -year period beginning on the date that such test was to have been taken.
- 2. Any prospective resident whom the Muckleshoot Housing Authority has a reasonable suspicion to believe is using illegal drugs and/or alcohol may be required to take a drug test or other test within a time specified by the Muckleshoot Housing Authority. If any prospective resident fails or refuses to take such a test any person who has such an individual as a member of the household shall be ineligible for admission to any Muckleshoot Housing Authority program for a 2 -year period beginning on the date that such test was to have been taken by such individual.
- 3. Any person who fails a drug test that is required under this section may request that the test be performed a second time at the person's own cost.

D. Other Requirements

Any applicant for Muckleshoot Housing Authority housing and any other prospective resident shall be required to sign such release forms and to provide such other information as may be necessary to assure compliance with this section.

SECTION V. WAIVER OF INELIGIBILITY

- A. The Board of Commissioners of the Muckleshoot Housing Authority may waive the ineligibility of any person who is ineligible for admission to a Muckleshoot Housing Authority program if:
1. The person demonstrates successful completion of a supervised drug or alcohol rehabilitation program approved by the Muckleshoot Housing Authority, or
 2. The person has otherwise been rehabilitated successfully, or
 3. The circumstances leading to the ineligibility no longer exist. For example, the individual involved in drugs use is no longer in the household.
- B. Any person desiring to have his or her ineligibility waived shall have the burden of showing that the requirements for waiver have been met.
- C. Nothing in this section shall require waiver of ineligibility under any circumstances.
- D. The Board of Commissioners by separate resolution or board action may delegate the authority to waive the ineligibility for admission to any one or more of its members, to the Executive Director of the Muckleshoot Housing Authority, to any other suitable employee of the Muckleshoot Housing Authority or to any combination of the foregoing.

SECTION VI. EVICTION

- A. Eviction.
1. Any tenant who has engaged in drug-related criminal activity during the term of the tenancy, whether on or off Muckleshoot Housing Authority premises, or who has a resident of his or her household who has engaged in such activity on or off Muckleshoot Housing Authority premises, or who has had a visitor or guest who has engaged in such activity on Muckleshoot Housing Authority premises or who has been under the influence of a controlled substance while on Muckleshoot Housing Authority premises, shall be evicted.
 2. Any tenant who has behaviors that threaten the safety and or quiet enjoyment of the neighborhood due to the consumption of alcohol by his or her household members and or visitors and guests shall be evicted.
- C. Removal of Resident, Visitor or Guest

In the case of a household resident or visitor or guest, no tenant shall be evicted if the tenant has promptly secured the removal, other than the temporary removal, of the offending resident, visitor or guest from the premises.

D. Drug and Alcohol Testing

1. Any tenant of a Muckleshoot Housing Authority premises whom the Muckleshoot Housing Authority has reasonable suspicion to believe has engaged in or is presently engaged in drug related activity on or off the Muckleshoot Housing Authority premises may be required to take a drug test or other test within the specified time by the Muckleshoot Housing Authority. If the tenant fails or refuses to take the test such person shall be evicted. If a resident fails or refuses to take a drug test then the tenant shall be evicted unless the tenant acts to remove the resident under part C of this Section VI.
2. Any persons who fails a drug test that is required under section D may request that a test be preformed a second time at the person's own cost.

SECTION VII. FORBEARANCE REGARDING EVICTION OR TERMINATION

- A. The Board of Commissioners may forbear in the eviction of any person under this policy if:
1. The person demonstrates successful completion of a supervised drug or alcohol rehabilitation program approved by the Muckleshoot Housing Authority , or
 2. The person has otherwise been rehabilitated successfully, or
 3. The circumstances leading to the ineligibility no longer exist. For example, the individual involved in drugs or alcohol use is no longer in the household, or
 4. The Board of Commissioners determines that there are extraordinary circumstances (such as the welfare of a minor child) which warrant forbearance, and, the person completes or agrees to complete any other requirements the Board of Commissioners at its sole discretion may impose, including but not limited to periodic alcohol and/or drug blood tests or other tests.

The Board of Commissioners may also forbear if the person is participating in a supervised drug or alcohol rehabilitation program approved by the Muckleshoot Housing Authority and the person completes or agrees to complete any other requirements imposed by the Board of Commissioners, including but not limited to periodic drug tests or other tests.

- B. Any person desiring forbearance regarding eviction shall have the burden of showing that the requirements for forbearance have been met.
- C. Nothing in this section shall require forbearance regarding eviction under any circumstances.
- D. The Board of Commissioners by separate resolution or board action may delegate the authority to waive the ineligibility for admission to any one or more of its members, to the Executive Director of the Muckleshoot Housing Authority, to any other suitable employee of the Muckleshoot Housing Authority or to any combination of the foregoing.

SECTION VIII. GRIEVANCES

- A. Except as specified in the following paragraph, any grievance arising under this policy shall be resolved in accordance with the Grievance Policy Procedure of the Muckleshoot Housing Authority.
- B. There shall be no right to a hearing other than a court hearing in the case of an eviction where there is an allegation regarding the manufacture, sale or distribution of a controlled substance on Muckleshoot Housing Authority premises or where there is an allegation of the sale or distribution of alcohol to a minor child on Muckleshoot Housing Authority premises; provided, that the Board of Commissioners, at its sole discretion may, but shall not be required to provide a hearing to any person so accused and requesting a hearing.

SECTION IX. MISCELLANEOUS PROVISIONS

- A. **Criminal History.**
Any criminal record received in order to administer this policy must be maintained confidentially, must not be misused or improperly disseminated, and must be destroyed once the purpose for which it was requested is fully accomplished.
- B. **Copy of Criminal Conviction or Civil Penalty Record.**
A certified copy of a criminal conviction record or of a civil penalty record shall be conclusive proof of the drug-related criminal activity identified in the record; provided, that before any adverse action based on such a record can be taken, the person must be provided with a copy of the record and an opportunity to dispute the accuracy or relevancy of the record. In the case of an eviction for which no opportunity for a hearing is required prior to the court hearing, a copy of the record shall be filed with the court and served on the tenant with the Summons and Complaint.
- C. **No Requirement for Criminal Conviction or Civil Penalty.** In no instance shall a criminal conviction be required to have been entered or a civil penalty be required to have been assessed in order for a person to be ineligible for admission to Muckleshoot Housing Authority programs or be subject to eviction from a Muckleshoot Housing Authority rental UNIT.