

Most Common Application Questions

How do I apply for these units? An Application of Interest must be completed and returned for processing. **HASLO will deny or return incomplete applications.**

Do you accept the Housing Choice Voucher (Section 8)? Yes

Are these low-income units? These housing units are nonsubsidized, meaning the rents vary from \$500 to \$1,560 per month depending on the site/program. These units also have minimum and maximum income requirements. Your application will be denied if you do not have the resources to pay the rent, and or if you do not provide us with a rental history that we can verify. Your application will also be denied if you do not complete it correctly or if you provide fraudulent information.

How do I submit the application? Along with your application we request that you submit the following items listed below and return **ALL** of the items with your application to PO Box 1289, San Luis Obispo, CA 93406 or drop off in person at our main office located at 487 Leff St, San Luis Obispo.

How long will this process take? When you submit an application for any of our SLO Non Profit units you will be notified by mail as to the status of your application within 30 days. We cannot predict how long it will be, before a unit becomes available. Being on a waiting list does not guarantee a unit, you must be eligible for the unit and pass property management's tenant selection criteria.

What do I need to send in with my application?

- Proof of all income from all sources for the past three (3) months for all household members included on the application, including but not limited to (wages/pay check stubs, self-wages, Pension, Social Security Benefits, Unemployment Benefits, Child Support, Alimony, CalWORKs, Family Contributions, Veteran Benefits, Annuities, Financial Aid from Colleges, Stocks, Bonds, CD's, or Trust Deeds
- Copy of the Photo ID's for all adults listed on the application.
- Previous Years Tax Statement (first 2 pages of the Federal 1040 forms) and W2s.

Are there application fees? Yes. They are due at your intake appointment, failure to provide the payment will put a hold on the application process. Each adult applicant 18 years + is required to pay \$25 for the 1st adult, \$15 for the 2nd adult and \$10 for each additional adult to be paid with money order or cashier's check. If an applicant has applied for more than one HASLO property they do not need to pay for screening fees at each property. This is a non-refundable fee.

If you have any questions regarding the requested information, please call Patrick at 805-594-5338 or email at [**pcurley@haslo.org**](mailto:pcurley@haslo.org).

Thank you,



Patrick Curley
Leasing Specialist

Preguntas de aplicación mas comunes

¿Cómo aplico para estas unidades? Una aplicación de interés debe ser completado y devuelto para el procesamiento de. **HASLO negar o devolver las solicitudes incompletas.**

¿Aceptan el programa de sección 8? Sí

Son estas unidades de renta baja? Estas viviendas son remitirán, lo que significa que los alquileres varían de \$500 a \$1.560 por mes dependiendo del sitio o programa. Estas unidades también tienen requisitos de ingresos mínimos y máximos. Si no tienes los recursos para pagar el alquiler, y si usted no nos proporciona una historia de alquiler que podemos comprobar, se negará la aplicación. Su aplicación también será negada si no completa correctamente o si usted provee información fraudulenta.

¿Cómo presento la solicitud? Junto con su solicitud le pedimos que presente los siguientes artículos enumerados a continuación y volver **todos** los artículos con su solicitud a PO Box 1289, San Luis Obispo, CA 93406 o entrega en persona en nuestra oficina principal ubicada en 487 Leff St., San Luis Obispo.

¿Cuánto tiempo tardará este proceso? Cuando usted envía una solicitud para cualquiera de nuestras unidades de SLO sin fines de lucro, que se le notificará por correo sobre el estado de su solicitud dentro de 30 días. No podemos predecir cuánto va a ser, antes de que una unidad esté disponible. Estar en una lista de espera no garantiza una unidad, usted debe ser elegible para la unidad y pasar de inquilino de la gestión de la propiedad los criterios de selección.

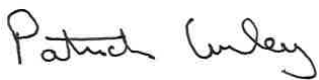
¿Qué necesito enviar con mi aplicación?

- Prueba de todos los ingresos de todas las fuentes durante los últimos tres 3 meses para todos los miembros del hogar incluido en la solicitud, incluyendo pero no limitado a (salario/pago talones de cheque, por los salarios, pensiones, prestaciones de Seguridad Social, desempleo, manutención de los hijos, Pensión alimenticia, CalWORKS, las contribuciones familiares, beneficios de veterano, anualidades, ayuda financiera de universidades, acciones, bonos, de CD o actos de confianza.
- Copia de la foto ID para todos los adultos enumerados la aplicación.
- Declaración de impuestos de años anteriores 2 primeras páginas de los formularios federales 1040 y W2s.

¿Hay tarifas de solicitud? Si. Se vencen en su cita de admisión, el incumplimiento en el pago retrasará el proceso de solicitud. Se requiere que cada solicitante adulto mayor de 18 años pague \$ 25 por el primer adulto, \$ 15 por el segundo adulto y \$ 10 por cada adulto adicional a pagar con giro postal o cheque de caja. Si un solicitante ha solicitado más de una propiedad de HASLO, no necesita pagar las tarifas de evaluación en cada propiedad. Esta es una tarifa no reembolsable.

Si usted tiene alguna pregunta con respecto a la información solicitada, por favor contacte a Patrick pcurley@haslo.org o 805-594-5338.

Gracias,



Patrick Curley

Especialista en Arrendamiento

Please do not use whiteout. Please cross off your mistake and initial by it. Thank you.

Application of Interest for Rental Units Owned and /or Managed by HASLO

IDENTIFYING INFORMATION – Head of Household

Name	Birthdate	Age	Social Security #	Driver's License # / State	Marital Status
	<small>m m / d d / y y y y</small>		<small>- - - - -</small>		
Any Other Names You've Used in The Past	Gender Identity	Disabled	Phone #	E-Mail	
				<input type="checkbox"/> Check box if you do not have an e-mail address	
Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		DD214 Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/a		Discharge Status:	

IDENTIFYING INFORMATION – Other Adult in the Household ☐ Spouse ☐ Co-head ☐ Other Adult ☐ Live- In Aid

Name	Birthdate	Age	Social Security #	Driver's License # / State	Marital Status
	<small>m m / d d / y y y y</small>		<small>- - - - -</small>		
Any Other Names You've Used In The Past	Gender Identity	Disabled	Phone #	E-Mail	
				<input type="checkbox"/> Check box if you do not have an e-mail address	

ALL Other Occupant(s)

Name: First, Last	Gender Identity	Birthdate <small>m m / d d / y y y y</small>	Age	Social Security #	Relationship to Head	Full time student? (Yes or No)
				X X X - X X - - - - -		
				X X X - X X - - - - -		
				X X X - X X - - - - -		
				X X X - X X - - - - -		
				X X X - X X - - - - -		
				X X X - X X - - - - -		

RESIDENCE HISTORY

(NOTE: if you have ever been homeless or have/had a period of staying with friends/family, please provide the dates as well as the names and addresses of those you stayed with and the reason you left). Provide at least 2 years' worth of residential history.

	Current Residence	Previous Residence	Prior Residence
Homeless	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address			
City, State, Zip			
Mailing Address			
Mailing City, State, Zip			
Date Moved In (Month/Year)			
Date Moved Out (Month/Year)			
Rent Amount \$			
Landlord's Name			
Landlord's Phone Number			
Landlord's Email			
Landlord Address			
Why did you move?			

Please go to the next page

Application of Interest for Rental Units Owned and /or Managed by HASLO

CHECK THE BOXES FOR THE PROPERTIES YOU ARE APPLYING FOR

Senior/Elderly/Disabled Housing Complexes

- ☐ I understand I must meet the qualifications associated with the complex that I am interested in and have checked below.
- ☐ I understand I must meet a minimum income per month listed in the qualification criteria unless I have a Section 8 or VASH voucher. Minimum income and rental amounts subject to change based on regulatory published limits

City	Name of Complex	Qualifications / Minimum Monthly Income	Beds	Monthly Rent up to	Units
<input type="checkbox"/> Atascadero	Atascadero Senior	Must be 55+ / 1bd- \$2,050	1	\$1,012	19
<input type="checkbox"/> San Luis Obispo	Carmel	Must be 55+ / 1bd- \$2,100	1	\$1,012	19
<input type="checkbox"/> San Luis Obispo	Del Rio Terrace	Must be 55+ / 1bd- \$2,100	1	\$1,012	40
<input type="checkbox"/> San Luis Obispo	Brizzolara	Must be a person with a disability / 1bd- \$2,050 2bd- \$2,350	1 & 2	\$1,012 / \$1,215	27
<input type="checkbox"/> San Luis Obispo	Marvin Gardens	Must be 62+ or a person with a disability / 1bd- \$1,700 2bd- \$2,000	1 & 2	\$1,012 / \$1,215	24

Veterans Housing Complex

- ☐ I understand I must be veteran and attach my DD-214 to this application.
- ☐ I understand I must meet a minimum income per month listed in the qualification criteria unless I have a Section 8 or VASH voucher.

City	Name of Complex	Qualifications/ Minimum Monthly Income	Beds	Monthly Rent up to	Units
<input type="checkbox"/> San Luis Obispo	860 on the Wye	Veteran Preference / Studio- \$1,200	0 & 1	\$759	19

Family Housing Complexes

- ☐ I understand I must meet a minimum income per month listed in the qualification criteria unless I have a Section 8 or VASH voucher.

City	Name of Complex	Minimum Monthly Income	Beds	Monthly Rent up to	Units
<input type="checkbox"/> Atascadero	Macadero	1bd- \$2,400 2bd- \$3,350 3bd- \$4,050	1, 2, & 3	\$950 / \$1,300 / \$1,575	19
<input type="checkbox"/> Los Osos	Blue Heron	1bd- \$2,600	1	\$1,000	13
<input type="checkbox"/> Los Osos	Ferrell	2bd- \$3,600	2	\$1,400	8
<input type="checkbox"/> Paso Robles	Hidden Creek	1bd- \$1,200 2bd- \$1,400 3bd- \$1,600	1, 2, & 3	\$1,012 / \$1,215 / \$1,402	80
<input type="checkbox"/> San Luis Obispo	Iron Works	1bd- \$2,150 2bd- \$2,550	1 & 2	\$1,012 / \$1,215	46
<input type="checkbox"/> San Luis Obispo	Islay Hills	2bd- \$2,200 3bd- \$2,450 4bd- \$2,650	2, 3, & 4	\$1,215 / \$1,402 / \$1,564	20
<input type="checkbox"/> San Luis Obispo	Margarita	1bd- \$2,550 2bd- \$3,600	1 & 2	\$1,000 / \$1,400	21
<input type="checkbox"/> San Luis Obispo	Parkwood	Studio- \$3,100 1bd- \$3,550 2bd- \$4,000	0, 1 & 2	\$1,214 / \$1,386 / \$1,560	34
<input type="checkbox"/> San Luis Obispo	Pismo Buchon	2bd- \$2,200 3bd- \$2,450	2 & 3	\$1,215 / \$1,402	11
<input type="checkbox"/> San Luis Obispo	Poinsettia	2bd- \$2,350 3bd- \$2,700	2 & 3	\$1,215 / \$1,402	20

INCOME INFORMATION for the HOUSEHOLD

Application of Interest for Rental Units Owned and /or Managed by HASLO

Income belongs to <i>Applicants 18+ years of age</i>	Type of Income <i>Ex: Wages, SSI, SS, TANF, VA, Child Support, Unemployment, Pension</i>	Frequency of Payment <i>Ex. Weekly, biweekly, semimonthly, monthly</i>	Amount per Pay Period	Gross Monthly Income <i>(before deductions)</i>

ASSETS for the HOUSEHOLD

Asset belongs to	Type of Asset	Amount

☐ I currently have a Section 8 Housing Choice Voucher or a VASH Voucher.

GENERAL INFORMATION – please check off your answer

Yes	No	Additional Question(s) / Statement(s)
		I understand I/we need to meet minimum and/or maximum income guidelines to live at the selected properties.
		Does any household member require a reasonable accommodation or modification to have an equal opportunity to use and enjoy a dwelling unit? If yes, please describe _____ Do you require a unit with accessibility modifications for: <input type="checkbox"/> Hearing <input type="checkbox"/> Mobility <input type="checkbox"/> Vision/Sight
		Does every household member understand that these are non-smoking properties (inside the units and throughout the grounds and that if you/they are a smoker, everyone must comply with lease and local ordinance regulations?
		Are you or anyone else in the household a smoker?
		Does any household member work with a caseworker at a supporting agency? If yes, please provide contact details _____
		Has any household member ever been served with an eviction notice? If yes, please describe the circumstances _____
		Are all adult household members a full-time student or plan on becoming a full-time student in the next 12 months?
		Has any household member ever been terminated from a subsidized housing program?
		List the animal(s) in your household (Type, Breed, approximate size or weight, support animal or pet)?
		I understand that the lease contains policies with respect to animal(s) that our household will need to comply with.
		Has any household member ever been convicted of a crime in the last seven years? (Check No, if the conviction was sealed) (If yes, please provide details below) (Please note that convictions <u>do not</u> automatically disqualify your Rental Application for housing)
		Is ANY family member subject to a lifetime state sex offender registration program in any state?

If there are any conviction(s), please provide the following details, unless sealed then do not provide any information:

Why were you convicted?	Date(s) Convicted

Please go to next page

CERTIFICATION & AUTHORIZATION

Application of Interest for Rental Units Owned and /or Managed by HASLO

HEAD OF HOUSEHOLD: *please check of each box*

- ☐ I do hereby swear and attest under penalty of perjury that all of the information about me and my household is true and correct.
- ☐ I further understand that Federal Regulations allow for landlord reference (current and previous), criminal and/or credit checks on all household members 18 years of age or older, and that our Rental Application can be denied or terminated as a result of certain violations or any untruthfulness on this declaration. I agree to hold HASLO and the procurer or furnisher of such information harmless from any liability whatsoever in the use, procurement, or furnishing of such information. I also understand I have the right to obtain a copy of my personal consumer report and am able to dispute any inaccurate information that might be found on such report.
- ☐ I give permission to my current and former landlords to release any information about my rental history.
- ☐ I understand that this is a Rental Application for an apartment, and is NOT for a Housing Choice Voucher (aka Section 8) or for rental assistance.
- ☐ I understand if any field of this application is left blank, my application may be denied or sent back to me.
- ☐ I understand if I submit a duplicate application, it may result in a rejection.
- ☐ I understand that if my application is rejected/ denied, my application will not be accepted until a year has passed since my denial.
- ☐ I understand I will only be offered two units. After the second offer my application will be rejected.

Signature, Head of Household

Date

OTHER ADULT IN HOUSEHOLD:

☐ Not Applicable

- ☐ I do hereby swear and attest under penalty of perjury that all of the information about me and my household is true and correct.
- ☐ I further understand that Federal Regulations allow for landlord reference (current and previous), criminal and/or credit checks on all household members 18 years of age or older, and that our Rental Application can be denied or terminated as a result of certain violations or any untruthfulness on this declaration. I agree to hold HASLO and the procurer or furnisher of such information harmless from any liability whatsoever in the use, procurement, or furnishing of such information. I also understand I have the right to obtain a copy of my personal consumer report and am able to dispute any inaccurate information that might be found on such report.

Signature

Date

Signature

Date

AFFIRMATIVE ACTION INFORMATION - Information is for Head of Household

To help us with Federal/State record keeping, reporting and other legal requirements, please check the appropriate boxes. Please note that if you elect not to provide this information, we are required to provide our best guess to comply with federal/state regulations.

Race

- ☐ White
☐ Black/African American
☐ Native American/Alaskan Native
☐ Asian
☐ Native Hawaiian/Pacific Islander
☐ Other

Ethnicity

- ☐ Hispanic
☐ Non-Hispanic

Disability Status

- ☐ Disabled
☐ Not Disabled

Access Needs

- ☐ Hearing
☐ Mobility
☐ Sight/ Vision

Elderly

- ☐ 62+
☐ 55+

Homeless

- ☐ Yes
☐ No

- ☐ Applicant: I do not wish to furnish information regarding ethnicity, race and other household composition.

FOR OFFICE USE:

Application Fee Received on: _____ By: _____ Amount Rec'd: \$ _____

Signature of PM Staff

Method of Payment: ☐ Money Order ☐ Cashier's Check ☐ 1st adult \$25 ☐ 2nd adult +\$15 ☐ 3rd adult or more +\$10 each