

Date/Time Received: _____
For Office Use Only

Waitlist Registration

This form is a pre-application strictly indicating an applicant’s interest in housing in the property noted. It does not guarantee that a housing unit is available at this time. It will be used to place the applicant on a “waiting list” to be contacted later for eligibility and openings.

It is not necessary for applicants to be artists in order to apply for an apartment or to be placed on the waiting list. However, this community does institute a preference for households with members who are artists with a commitment to and/or participation in the arts, which will be determined through the Artists Interview Process. Please refer to the Artspace Artist Interview Process attached to the Tenant Selection Plan for the definition of an artist and the process through which an applicant is determined to be an artist.

I, or a member of my household is an artist, and we would like to apply for the Artist Preference. Yes No

FIELD OF CREATIVITY: _____

Bedroom size requested: STUDIO____ 1 BDRM____ 2 BDRM____ 3 BDRM____

Preferred Move-in Date: _____

HOUSEHOLD COMPOSITION

List the Head of Household and all other persons who will be occupying your unit. Give the relationship of each family member to the head of household.

| Member Full Name | Relationship | DOB | AGE | SEX | Student Y or N |
|------------------|--------------|-----|-----|-----|----------------|
| | HEAD | | | | |
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Current Address: _____ City: _____ State: _____ Zip Code: _____

Tel #: _____ Email Address: _____

Does your household have any needs that might be better served by an apartment which is accessible to persons with mobility impairments? Yes No

Do you anticipate any change in your household (someone moving in or out) during the next twelve months? Yes No. If Yes, explain: _____

Have you or anyone named on this application ever been convicted of a crime? _____ If so, explain: _____

(Answering yes to this question will not automatically disqualify you)





Are you or any member of the household subject to a lifetime registration under the State sex offender program?

Have you ever been evicted or violated your lease? ____ If so, explain: _____

Does your household have any pets? _____
If yes, please describe each: _____

For each household member age 18 or older, list current and anticipated income. Include all full-time or seasonal employment. If a household member has more than one source of income, use a separate line for each source.

PLEASE PROVIDE CURRENT PAYSTUBS OR PROOF OF INCOME

| INCOME SOURCE | HOUSEHOLD MEMBER | MONTHLY GROSS INCOME |
|---------------|------------------|----------------------|
| | | |
| | | |
| | | |
| | | |

How did you hear about us?

- Word of Mouth
- Drive By
- MetroPlains Website
- Facebook
- County List
- Google
- Craigslist
- Flyer
- Other: _____

APPLICANT’S STATEMENT: I/We understand the information in this application will be used to determine eligibility for housing and that this information will be verified. I/We understand that any false information may make me/ us ineligible for a unit.

I/We certify that all information given in this application is true, complete and accurate. I/we certify that I/we have revealed all income and assets currently held or previously disposed of a that I/we have no other assets than those listed (other than personal property). I/We understand that if any of this information is false, misleading or incomplete, management may decline our application or, if move-in has occurred, terminate my/our lease agreement.

I/We authorize management to make any and all inquiries to verify this information, directly or through information exchanged now or later with rental and credit screening services, and to contact previous and current landlords or the sources for credit and verification information which may be released to appropriate federal, state or local agencies. I/We hereby authorize law enforcement agencies to release criminal records and/or sex offender records.

I/We agree to notify management in writing regarding any changes in household address, telephone numbers, income and household composition.

My/Our signature(s), as indicated below, acknowledge that I/we have read and completed each section of this rental application, as applicable.

Signature of Head _____ Date: _____
 Signature of Spouse or Co-Tenant: _____ Date: _____
 Signature of Management Representative: _____ Date: _____

