



Applicant's

Name: _____

TO ALL NEW APPLICANTS

We appreciate your interest in applying for Housing with the Kaibeto Creek Independent Living Center (KCILC). ***It is very important that you provide the following documents to determine your eligibility.***

Please use your check off list to put your documents in order:

- ☐ Completed Housing Application
- ☐ Income verification form; Must be verified by your employer before interview date.
- ☐ Copy of marriage license or divorce decree. Copy of court documents verifying legal guardianship of other family members (*ex. Nieces, nephews, and grandchildren*)
- ☐ Copy of Social Security cards for all household member(s)
- ☐ Copy of Certificate of Indian Blood for all household member(s)
- ☐ Copy of Birth Certificates for all household member(s)
- ☐ Veteran Status – Copy of your DD-214 document
- ☐ Rental History – This is to be completed by the property manager if applicant has rented in his/her name within the past 3 years
- ☐ Criminal Background Check- For all household member(s) over 18 years of age
- ☐ Notice and Consent for the Release of Information
(*All household member(s) over the age of 18 need to sign this form*)

Please return completed application packet to TCRHCC Housing Department, Post Office Box 600, Tuba City, Arizona 86045 **(WE DO NOT ACCEPT FAXED APPLICATIONS)**. If you have questions, please contact our office at **(928) 283-2873 extension 40080**.

An interview will be scheduled when eligibility is determined. It is mandatory the interview is done in person. All household members over the age of 18 must be present at the time of interview.



PLEASE RETURN COMPLETED FORM TO:

KAIBETO CREEK INDEPENDENT LIVING CENTER

TCRHCC HOUSING DEPARTMENT

Post Office Box 600

Tuba City, Arizona 86045

Phone (928) 283-2873

Fax (928) 283-2872

RENTAL HISTORY

Name of Applicant(s): _____

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

Date of Tenancy: From: _____ To: _____

I authorize the landlord to release the requested information regarding my prior/present tenancy:

Applicant Signature Date

The above applicant(s) have submitted an application for housing at the Kaibeto Creek Independent Living Center. Please answer the questions listed below and return to our office. Your assistance is greatly appreciated.

Housing Department Manager

1. Rent paid on timely matter?
2. Damage to unit or common areas?
3. Problems with tenant's children?
4. History of disturbing the quiet enjoyment of neighbors?
5. History of violence or harassment of neighbors or management?
6. Rent or damages still owing?
7. Would you re-rent to this tenant?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

9. Number of people on lease Adults: _____ Children: _____ Rent: \$ _____

Comments: _____

Name of Landlord

Date

Address

Telephone

City

State

Zip

Landlord Signature