



MULTIFAMILY NW
The Association Promoting Quality Rental Housing

CITY OF PORTLAND, OREGON
**STANDARD FINANCIALLY RESPONSIBLE
RENTAL APPLICATION**

TO BE COMPLETED BY EACH FINANCIALLY RESPONSIBLE ADULT APPLICANT

ALL UNITS
SUBJECT TO
AVAILABILITY



OFFICE USE ONLY

☐ NEW MOVE-IN ☐ OCCUPANT TURNING 18 ☐ ADD/REMOVE ROOMMATE ☐ TRANSFER

PROPERTY NAME / NUMBER _____

UNIT NUMBER _____ ADDRESS _____

DATE UNIT WANTED _____ UNIT RENT \$ _____ NON-REFUNDABLE SCREENING CHARGE \$ _____

OWNER / AGENT _____ PHONE _____

OWNER / AGENT ADDRESS _____

SMOKING POLICY: ☐ ALLOWED - ENTIRE PREMISES ☐ PROHIBITED - ENTIRE PREMISES ☐ ALLOWED IN LIMITED AREAS (ASK MANAGEMENT FOR DETAILS)

☐ DWELLING UNIT QUALIFIES AS A "TYPE A UNIT" (ACCESSIBLE UNIT) PER OREGON STRUCTURAL BUILDING CODE AND ICC A117.1.

APPLICANT

CHECK ALL THAT APPLY:

☐ OPTIONAL: DISABLED (NOT MOBILITY RELATED)

☐ OPTIONAL: DISABLED AND MOBILITY DISABLED (meaning a person who has a disability that causes an ongoing limitation of independent, purposeful physical movement of the body or one or more extremities and requires a modifiable living space because of, but not limited to, the need for an assistive mobility device)

☐ APPLICANT HAS APPLIED TO OTHER LOCATIONS MANAGED BY OWNER/AGENT IN THE LAST 60 DAYS WHERE? _____

APPLICANT FULL LEGAL NAME _____ EMAIL _____

PREVIOUS NAMES, ALIASES OR NICKNAMES USED _____

DATE OF BIRTH _____ SOC. SECURITY # _____ APPLICANT PHONE () _____

PHOTO I.D. TYPE _____ # _____ / STATE _____ EXP. DATE _____

CURRENT STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ DATE YOU MOVED IN _____

CURRENT LANDLORD NAME _____ LANDLORD PHONE () _____

LANDLORD EMAIL _____ LANDLORD FAX () _____

STREET ADDRESS (OR APARTMENT NAME) _____

CITY _____ STATE _____ ZIP _____

APPLICANT FORMER STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ FROM _____ TO _____

FORMER LANDLORD NAME _____ LANDLORD PHONE () _____

LANDLORD EMAIL _____ LANDLORD FAX () _____

STREET ADDRESS (OR APARTMENT NAME) _____

CITY _____ STATE _____ ZIP _____

OTHER STATES AND COUNTIES YOU HAVE LIVED IN DURING THE PAST 5 YEARS _____

CURRENT EMPLOYER _____ PHONE () _____

HR EMAIL _____ HR FAX () _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____ GROSS MONTHLY INCOME \$ _____

OTHER MONTHLY INCOME: SOURCE _____ \$ _____ / SOURCE _____ \$ _____

ARE YOU SELF-EMPLOYED? ☐ YES ☐ NO

☐ PREVIOUS ☐ ADDITIONAL EMPLOYER _____ PHONE () _____

HR EMAIL _____ HR FAX () _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____ IF ADDITIONAL EMPLOYER, GROSS MONTHLY INCOME \$ _____

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF RENTAL AGREEMENT.

RENT

THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.

MAXIMUM POTENTIAL RENT \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

DEPOSITS

SECURITY DEPOSIT MINIMUM: \$ _____ (NOT TO EXCEED ONE MONTH'S RENT)

SECURITY DEPOSIT MAXIMUM: \$ _____ (NOT TO EXCEED ONE AND A HALF MONTH'S RENT) (DEPENDS ON SCREENING RESULTS AND UNIT SIZE)

ADDITIONAL DEPOSITS:

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

IF LAST MONTH'S RENT IS REQUIRED AT MOVE-IN, SECURITY DEPOSIT SHALL NOT EXCEED ONE HALF OF ONE MONTH'S RENT.

INSURANCE

☐ IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED.

☐ IF CHECKED, RENTER'S INSURANCE WILL BE REQUIRED IF _____

MINIMUM INSURANCE AMOUNT: \$ _____ (\$100,000 IF LEFT BLANK)

OWNER/AGENT MUST BE LISTED AS AN "INTERESTED PERSON" ON THE INSURANCE POLICY AND PROOF OF SUCH LISTING PROVIDED PRIOR TO MOVE-IN.

(NO INSURANCE WILL BE REQUIRED IF: A) THE HOUSEHOLD INCOME OF ALL OF THE TENANTS IN THE UNIT IS EQUAL TO OR LESS THAN 50 PERCENT OF THE AREA MEDIAN INCOME, ADJUSTED FOR FAMILY SIZE AS MEASURED UP TO A FIVE-PERSON FAMILY; OR B) IF THE DWELLING UNIT HAS BEEN SUBSIDIZED WITH PUBLIC FUNDS, NOT INCLUDING HOUSING CHOICE VOUCHERS.)

OTHER OCCUPANTS	NAME	DATE OF BIRTH	VEHICLES	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #	OWNER	
		MM/DD/YYYY								
		MM/DD/YYYY								
		MM/DD/YYYY								
		MM/DD/YYYY								

☐ IF CHECKED, PETS ARE NOT ALLOWED AT THIS PROPERTY.

☐ IF CHECKED, PETS ARE ALLOWED SUBJECT TO APPROVAL BY MANAGEMENT. HOW MANY PETS WILL BE RESIDING IN THIS UNIT? _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

NAME _____ TYPE _____ BREED _____ AGE _____ WEIGHT _____

DO YOU INTEND TO USE: ☐ WATERBED ☐ AQUARIUM ☐ MUSICAL INSTRUMENT _____

DO YOU HAVE RENTER'S INSURANCE? ☐ YES ☐ NO

EMERGENCY CONTACT _____ PHONE (_____) _____

ADDRESS _____

CONTACT IN CASE OF DEATH _____ PHONE (_____) _____

ADDRESS _____

HAVE YOU BEEN EVICTED WITHIN THE LAST 5 YEARS OR IS THERE A PENDING EVICTION CASE AGAINST YOU? ☐ YES ☐ NO

IF YES, PLEASE LIST COUNTY & STATE _____

HAVE YOU EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS? ☐ YES ☐ NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS? ☐ YES ☐ NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT EVER BEEN CONVICTED OF, OR PLED GUILTY OR NO CONTEST TO, ANY FELONY OR MISDEMEANOR RELATED TO THE CRIMINAL CONVICTION CRITERIA? ☐ YES ☐ NO IF YES, WHO _____

COUNTY & STATE _____ WHEN _____ MM/DD/YYYY WHAT _____

HAVE YOU OR ANY OTHER PERSON WHO WILL BE OCCUPYING THE UNIT BEEN ARRESTED FOR A CHARGE RELATED TO THE CRIMINAL CONVICTION CRITERIA THAT HAS NOT BEEN DISMISSED? ☐ YES ☐ NO IF YES, COUNTY & STATE _____

WHY ARE YOU VACATING YOUR PRESENT PLACE OF RESIDENCE? _____

HAVE YOU GIVEN LEGAL NOTICE WHERE YOU NOW LIVE? ☐ YES ☐ NO

HOW DID YOU HEAR ABOUT OUR PROPERTY? _____

Owner/Agent has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606 (b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation.

SCREENING COMPANY OR CREDIT REPORTING AGENCY

COMPANY NAME _____ PHONE _____

ADDRESS _____

EMAIL _____

If the application is approved, applicant will have _____ hours from the time of notification to either, at Owner/Agent's option, execute a rental agreement and make all deposits required thereunder or make a deposit to hold the unit and execute an agreement to execute a rental agreement which will provide for the forfeiture of the deposit if applicant fails to occupy the unit. If applicant fails to timely take the steps required above, he/she will be deemed to have refused the unit and the next application for the unit will be processed.

GOOD FAITH ESTIMATE

Approximate number of units currently available, or which will in the foreseeable future be available, of the size and in the area requested by applicant: _____ unit(s).

Approximate number of applications previously accepted and currently under consideration for those units: _____ application(s).

If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.

☐ IF CHECKED, APPLICANT IS HEREBY NOTIFIED THAT THE TENANCY WILL BE FIXED TERM AND IT IS OWNER'S INTENT TO SELL THE DWELLING UNIT OR PERMANENTLY CONVERT THE DWELLING UNIT TO A USE OTHER THAN AS A DWELLING UNIT.

I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my tenancy and credit standing. I understand that Owner/Agent may refuse to process or deny this application if it is incomplete, fails to include information regarding my identification or income, or if I intentionally withheld or misrepresented required information. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I understand that I am welcome to provide supplemental evidence to mitigate potentially negative screening results. I have received and read the Owner/Agent's rental criteria.

APPLICANT X _____ DATE _____ MM/DD/YYYY

OWNER/AGENT X _____ ☐ PHOTO I.D. VERIFIED BY _____ (INITIALS)

DATE RECEIVED _____ MM/DD/YYYY TIME RECEIVED _____ SUPPLEMENTAL EVIDENCE RECEIVED? ☐ YES ☐ NO

OWNER/AGENT NOTES _____



Portland Housing Bureau

Rental Services Office

Mayor Ted Wheeler • Director Shannon Callahan

421 SW 6th Avenue, Suite 500 • Portland, OR 97204

PHONE 503-823-1303 • FAX 503-865-3260

portlandoregon.gov/phb/rso

Rental Services Helpdesk Hours

MON, WED, FRI 9–11am and 1–4pm

Right to Request a Modification or Accommodation Notice Required Under Portland City Code Title 30.01.086.C.3.B

Within the City of Portland, a landlord is required to include this notice with application forms for the rental of a dwelling unit.

State and federal laws, including **the Fair Housing Act**, make it illegal for housing providers to refuse to make **reasonable accommodations** and **reasonable modifications** for individuals with disabilities. All persons with a disability have a right to request and be provided a reasonable accommodation or modification at any time, from application through to termination/eviction.

Some examples of reasonable accommodations include:

- Assigning an accessible parking space
- Transferring a tenant to a ground-floor unit
- Changing the rent payment schedule to accommodate when an individual receives public benefits
- Allowing an applicant to submit a housing application via a different means
- Allowing an assistance animal in a "no pets" building. More information about assistance animals is available here:
https://www.hud.gov/program_offices/fair_housing_equal_opportunity/assistance_animals

Some examples of reasonable modification include:

- Adding a grab bar to a tenant's bathroom
- Installing visual smoke alarm systems
- Installing a ramp to the front door

Under fair housing laws, a person with a disability is someone:

- With a physical or mental impairment that substantially limits one or more major life activities of the individual;
- With a record of having a physical or mental impairment that substantially limits one or more major life activities of the individual; or
- Who is regarded as having a physical or mental impairment that substantially limits one or more major life activities.

Major life activities include, but are not limited to seeing, walking, reaching, lifting, hearing, speaking, interacting with others, concentrating, learning, and caring for oneself.



Reasonable Accommodations

A reasonable accommodation is a change or exception to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling. This includes public use and common spaces or fulfilling their program obligations. Any change in the way things are customarily done that allows a person with a disability to enjoy housing opportunities or to meet program requirements is a reasonable accommodation.

All housing or programs are required to make reasonable accommodations. Housing providers may not require persons with disabilities to pay extra fees or deposits or any other special requirements as a condition of receiving a reasonable accommodation.

Reasonable Modifications

A reasonable modification is a structural change made to the premises in order to afford an individual with a disability full enjoyment of the premises. Reasonable modifications can include structural changes to interiors and exteriors of dwellings and to public use and common areas.

Under federal law, public housing agencies, other federally assisted housing providers, and state or local government entities are required to provide and pay for structural modifications as reasonable accommodations/modifications. For private housing, the person requesting the reasonable modification will need to cover the costs of the modification.

Verification of Disability

In response to an accommodation or modification request and only when it is necessary to verify that a person has a disability that is not known or apparent to the housing provider, they, can ask an applicant/tenant to provide documentation from a qualified third party (professional), that the applicant or tenant has a disability that results in one or more functional limitation. If the disability-related need for the requested accommodation or modification is not known or obvious, the housing provider can request documentation stating that the requested accommodation or modification is necessary because of the disability, and that it will allow the applicant/tenant access to the unit and any amenities or services included with the rental equally to other tenants.

A housing provider cannot inquire into the nature or extent of a known or apparent disability or require that an applicant or tenant release his or her medical records. Housing providers can require that the verification come from a qualified professional, but they cannot require that it be a medical doctor.

Nondiscrimination laws cover applicants and tenants with disabilities, as well as applicants and tenants and without disabilities who live or are associated with individuals with disabilities. These laws also prohibit housing providers from refusing to rent to persons with disabilities, making discriminatory statements, and treating persons with disabilities less favorably than other tenants because of their disability.

Under fair housing laws, it is illegal for a housing provider to deny reasonable accommodations and reasonable modifications to individuals with disabilities. If wrongfully denied an accommodation or modification contact HUD or the Fair Housing Council of Oregon. Time limits apply to asserting any legal claims for discrimination.

Call HUD toll-free at 1-800-669-9777 or TTY 1-800-927-9275 or visit
https://www.hud.gov/program_offices/fair_housing_equal_opp/complaint-process

HUD will investigate at no cost to the complainant.

For more information about reasonable accommodations and modifications visit
www.hud.gov/program_offices/fair_housing_equal_opp/reasonable_accommodations_and_modifications

Call the Fair Housing Council of Oregon at (503) 223-8197 ext. 2 or
<http://fhco.org/index.php/report-discrimination>.



If you believe you have been harassed or discriminated against because of your race, color, national origin, religion, gender, familial status, disability, marital status, source of income, sexual orientation including gender identity, domestic violence, type of occupation, or age over 18 seek legal guidance regarding your rights under Fair Housing law.

For translation or interpretation, please call 503-823-1303
TTY at 503-823-6868 or Oregon Relay Service at 711

503-823-1303: Traducción e interpretación | Chuyển Ngữ hoặc Phiên Dịch | 翻译或传译
Письменный или устный перевод | 翻訳または通訳 | Traducere sau Interpretare
번역 및 통역 | Письмовий або усний переклад | Turjumida ama Fasiraadda
الترجمة التحريرية والشفوية | ການແປພາສາ ຫຼື ການອະທິບາຍ

This requirement is in addition to any other rights and responsibilities set forth in the Oregon Residential Landlord and Tenant Act under Oregon Revised Statute Chapter 90, and Portland Landlord-Tenant Law under Portland City Code Title 30.

The information in this form is for educational purposes only. You should review appropriate state statute, city code, and administrative rule as necessary. If you need legal guidance, or are considering taking legal action, you should contact an attorney.



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Statement of Applicant Rights and Responsibilities Notice Required Under Portland City Code Title 30.01.086.C.3.C

Within the City of Portland, a landlord is required to include this notice with application forms for the rental of a dwelling unit.

City of Portland Applicant Rights

The City of Portland has adopted local requirements that provide additional rights and responsibilities for landlords and applicants for rental housing, beyond state law requirements, during the rental unit advertising and application process.

Applicants are strongly encouraged to submit supplemental information to offset any reasons that could lead to denial. In the event of denial, applicants have the right to appeal the decision within 30 days.

Applicants are strongly encouraged to review their rights before submitting an application.

City requirements address the following landlord tenant topics: advertising and application process screening, security deposits, depreciation schedules, rental history, notice rights, and rights for relocation assistance.

The City of Portland city code, rules, required notices and forms are listed below, and are available at: [portland.gov/rso] or by contacting the Rental Services Office at (503) 823-1303 or rentalservices@portlandoregon.gov.

Residential Rental Unit Registration

- Portland City Code 7.02.890

Application and Screening Requirements

- Portland City Code 30.01.086
- Rental Housing Application and Screening Administrative Rule
- Statement of Applicant Rights and Responsibilities Notice
- Right to Request a Modification or Accommodation Notice
- Rental Housing Application and Screening Minimum Income Requirement Table

Security Deposit Requirements

- Portland City Code 30.01.087
- Rental Housing Security Deposits Administrative Rule
- Rental History Form
- Notice of Rights under Portland's Security Deposit Ordinance



Mandatory Renter Relocation Assistance

- Portland City Code 30.01.085
- Mandatory Relocation Assistance Exemption Eligibility and Approval Process
Administrative Rule
- Tenant Notice of Rights and Responsibilities Associated with Portland Mandatory
Relocation Assistance
- Relocation Exemption Application Acknowledgement Letter (If applicable)



If you believe you have been harassed or discriminated against because of your race, color, national origin, religion, gender, familial status, disability, marital status, source of income, sexual orientation including gender identity, domestic violence, type of occupation, or age over 18 seek legal guidance regarding your rights under Fair Housing law.

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CITY OF PORTLAND • STANDARD FINANCIALLY RESPONSIBLE RENTAL CRITERIA FOR RESIDENCY

OWNER/AGENT'S EVALUATION PROCESS

Upon receipt of a completed application, the contents of the application are compared to the screening criteria by Owner/Agent and the Applicant is either approved or denied in compliance with all local, state and federal laws. Applicants are welcome to provide supplemental evidence to mitigate potentially negative screening results. Applicants have 30 days to appeal denied applications, during which time they may correct, refute, or explain negative information forming the basis for the denial. Applicants are also prequalified for any rental opportunities at Owner/Agent's properties for three months following the approval date. All screening fees are waived for three months following the approved appeal, but Applicants under these circumstances will be required to certify in writing that no conditions have materially changed from those described in Owner/Agent's approved application. If conditions have materially changed, Owner/Agent may use those changes as the basis for a denial.

OCCUPANCY POLICY

1. Occupancy is based on the number of bedrooms in a unit. (A bedroom is defined as a habitable room that is intended to be used primarily for sleeping purposes, contains at least 70 square feet and is configured so as to take the need for a fire exit into account.)
2. The general rule is two persons are allowed per bedroom. Owner/Agent may adopt a more liberal occupancy standard based on factors such as size and configuration of the unit, size and configuration of the bedrooms, and whether any occupants will be infants.

GENERAL STATEMENTS

1. Any of the following items, or combination thereof, will be accepted to verify the name, date of birth and photo of the applicant:
 - i) Evidence of Social Security Number (SSN Card)
 - ii) Valid Permanent Resident Card
 - iii) Immigrant Visa
 - iv) Individual Taxpayer Identification Number (ITIN)
 - v) Non-Immigrant Visa
 - vi) Any government-issued identification regardless of expiration date
 - vii) Any non-governmental identification or combination of identifications that would permit a reasonable verification of identity
2. Each applicant will be required to qualify individually or as per specific criteria areas.
3. Inaccurate, incomplete or falsified information will be grounds for denial of the application.
4. Any applicant currently using illegal drugs will be denied. If approved for tenancy and later illegal drug use is confirmed, termination shall result.
5. Any individual whose tenancy may constitute a direct threat to the health and safety of any individual, the premises, or the property of others, will be denied tenancy.

INCOME CRITERIA

1. Monthly income must be 2 times the monthly stated rent*, or 2.5 times the monthly stated rent if the monthly rent amount is below the maximum monthly rent for a household earning no more than 80 percent of the median household income as published annually by the Portland Housing Bureau. https://www.multifamilynw.org/PHB_Rent_Income_Limits Income sources shall include, but are not limited to: wages, rent assistance (non-governmental only), and monetary public benefits and are based on the cumulative financial resources of all financially responsible applicants. Applicants failing to qualify under this section may, at Owner/Agent's discretion, be required to pay an additional security deposit in the amount of half a month's rent.

*If applicant will be using local, state or federal housing assistance as a source of income, "monthly stated rent" as used in this section means that portion of the rent that will be payable by applicant and excludes any portion of the rent that will be paid through the assistance program.

2. Twelve months of verifiable employment will be required if used as a source of income.
3. Applicants using self-employment income will have their records verified through the state corporation commission, and will be required to submit records to verify their income, which records may include the previous year's tax returns.

RENTAL HISTORY CRITERIA

1. Twelve months of verifiable contractual rental history from a current unrelated, third party landlord, or home ownership, is required. Less than twelve months verifiable rental history will require a security deposit not to exceed one and a half month's rent and/or qualified co-signer.
2. Three or more notices for nonpayment of rent within one year will result in denial of the application.
3. Three or more dishonored checks within one year will result in denial of the application.
4. Rental history reflecting any past due and unpaid balances to a landlord will result in denial of the application.
5. Rental history including three or more noise disturbances or any other material non-compliance with the rental agreement or rules within the past two years will result in denial.

EVICTON HISTORY CRITERIA

Five years of eviction-free history is required. Eviction actions that were dismissed or resulted in a judgment for the applicant will not be considered.

CREDIT CRITERIA

1. Negative or adverse debt showing on consumer credit report will require a security deposit not to exceed one and a half month's rent and/or qualified co-signers.
2. Ten or more unpaid collections (not related to medical expenses) will result in denial of the application.

RENT WELL GRADUATES

If applicant fails to meet any criteria related to credit, evictions and/or rental history, and applicant has received a certificate indicating satisfactory completion of a tenant training program such as "Rent Well," Owner/Agent will consider whether the course content, instructor comments and any other information supplied by applicant is sufficient to demonstrate that applicant will successfully live in the complex in compliance with the Rental Agreement. Based on this information, Owner/Agent may waive strict compliance with the credit, eviction and/or rental history screening criteria for this applicant.

CRIMINAL CONVICTION CRITERIA

Upon receipt of the Rental Application and screening fee, Owner/Agent will conduct a search of public records to determine whether applicant or any proposed resident or occupant has a "Conviction" (which means: charges pending as of the date of the application; a conviction; a guilty plea; or no contest plea), for any of the following crimes as provided in ORS 90.303(3): drug-related crime; person crime; sex offense; crime involving financial fraud, including identity theft and forgery; or any other crime if the conduct for which applicant was convicted or is charged is of a nature that would adversely affect property of the landlord or a tenant or the health, safety or right of peaceful enjoyment of the premises of residents, the landlord or the landlord's agent. Owner/Agent will not consider a previous arrest that did not result in a Conviction, was dismissed, expunged, voided or invalidated, determined or adjudicated through the juvenile justice system. Owner/Agent will also not consider convictions when Applicant is participating or has completed a diversion or deferral of judgment program or for crimes that are no longer illegal in the State of Oregon.

If applicant, or any proposed occupant, has a Conviction in their past which would disqualify them under these criminal conviction criteria, and desires to submit additional information to Owner/Agent along with the application so Owner/Agent can engage in an individualized assessment (described below) upon receipt of the results of the public records search and prior to a denial, applicant should do so. Otherwise, applicant may request the review process after denial as set forth below, however, see item (c) under "Criminal Conviction Review Process" below regarding holding the unit.

A single Conviction for any of the following, subject to the results of any review process, shall be grounds for denial of the Rental Application.

- a) Felonies involving: murder, manslaughter, arson, rape, kidnapping, child sex crimes, or manufacturing or distribution of a controlled substance.
- b) Felonies not listed above involving: drug-related crime; person crime; sex offense; crime involving financial fraud, including identity theft and forgery; or any other crime if the conduct for which applicant was convicted or is charged is of a nature that would adversely affect property of the landlord or a tenant or the health, safety or right of peaceful enjoyment of the premises of the residents, the landlord or the landlord's agent, where the date of disposition has occurred in the last 7 years.
- c) Misdemeanors involving: drug related crimes, person crimes, sex offenses, domestic violence, violation of a restraining order, stalking, weapons, criminal impersonation, possession of burglary tools, financial fraud crimes, where the date of disposition has occurred in the last 5 years.
- d) Misdemeanors not listed above involving: theft, criminal trespass, criminal mischief, property crimes or any other crime if the conduct for which applicant was convicted or is charged is of a nature that would adversely affect property of the landlord or a tenant or the health, safety or right of peaceful enjoyment of the premises of the residents, the landlord or the landlord's agent, where the date of disposition has occurred in the last 3 years.
- e) Conviction of any crime that requires lifetime registration as a sex offender, or for which applicant is currently registered as a sex offender, will result in denial.

Criminal Conviction Review Process

Owner/Agent will engage in an individualized assessment of the applicant's, or other proposed occupant's, Convictions if applicant has satisfied all other criteria (the denial was based solely on one or more Convictions) and:

- (1) Applicant has submitted supporting documentation prior to the public records search; or
- (2) Applicant is denied based on failure to satisfy these criminal criteria and has submitted a written request along with supporting documentation.

Supporting documentation may include:

- i) Letter from parole or probation office;
- ii) Letter from caseworker, therapist, counselor, etc.;
- iii) Certifications of treatments/rehab programs;
- iv) Letter from employer, teacher, etc.
- v) Certification of trainings completed;
- vi) Proof of employment; and
- vii) Statement of the applicant.

Owner/Agent will:

- a) Consider relevant individualized evidence of mitigating factors, which may include: the facts or circumstances surrounding the criminal conduct; the age of the convicted person at the time of the conduct; time since the criminal conduct; time since release from incarceration or completion of parole; evidence that the individual has maintained a good tenant history before and/or after the conviction or conduct; and evidence of rehabilitation efforts. Owner/Agent may request additional information and may consider whether there have been multiple Convictions as part of this process.
- b) Notify applicant of the results of Owner/Agent's review within a reasonable time after receipt of all required information.
- c) Hold the unit for which the application was received for a reasonable time under all the circumstances to complete the review unless prior to receipt of applicant's written request (if made after denial) the unit was committed to another applicant.