



A Non Profit Corporation

**APPLICATION CHECKLIST**

<b>Property Name / Contract Number</b>	
<b>Owner / Managing Agent</b>	
<b>Reviewer Name / Date</b>	
<b>General HUD Resource(s):</b>	Handbook 4350.3, REV-1, CHG-2, Chapter 3, Paragraphs 3-5 and 3-9, Chapter 4, Paragraph 4-14; CFR Student Rule. Note: Chapter 2, Section 2, Paragraph 2-38C: It is strongly recommended that owners include statements about the right of individuals with disabilities to request reasonable accommodations in all written notices given to applicants and tenants.

	<b>CS Review</b>	<b>Topic for Review</b> **items are not required – not a condition	<b>Topic in Compliance and/or Included?</b>	<b>Correction Required (✓)</b>	<b>QC Review</b>
1.		Key Requirements are included? <u>Paragraph 4-14A</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, see <b>a-d</b>	<input type="checkbox"/> see comment section	
		a) Applicant certification/signature line included? <u>Paragraph 4-14.A.2.</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> see comment section	
		b) Request for Social Security Numbers on application for all family members? <u>Paragraph 3-5.B, 3-9A-C, RHIP Listserv #125</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> see comment section	
		c) Student Enrolled in an Institute of Higher Education? <u>Docket No. FR5036-N-02</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> see comment section	
		d) Supplement to Application for emergency contact information (HUD – 92006) attached? <u>HUD Notice H 2009-13</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> see comment section	
2.		**Are eligibility factors which should be included, listed on application? <u>Paragraph 4-14B</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, stop; if no, see <b>a-m</b> on next page.	<input type="checkbox"/> see comment section	

**LOS ANGELES LOMOD CORPORATION**

A Non-Profit Corporation

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	<b>CS Review</b>	<b>Topic for Review</b> **items are not required – not a condition	<b>Are they included? If No, recommend revision</b>		
		a) Name	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		b) Sex	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		c) Birth Date (Age)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		d) Disability status (only when necessary to determine eligibility)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		e) Need for accessible unit	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		f) Race / ethnicity of head of household	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		g) Current/Contact Address	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		h) Current/Contact Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		i) Identification of any preferences	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		j) Sources and estimates of income and assets	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		k) Citizenship Declaration (Attached 3-5 and 3-6)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		l) Marketing information (how the applicant heard of the property)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
		m) Screening information consistent with requirements of Tenant Selection Plan (landlord, credit, drug, criminal)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

**PLEASE NOTE:** This checklist has been provided to highlight specific areas of compliance and non-compliance related to the Application and is not a HUD form. Data on this checklist is periodically updated for quality control to ensure continued compliance with HUD regulations and may be updated without prior notice.

**\*\*ALSO NOTE:** These topics are provided for your information only and are not HUD requirements; however, tenant applications should contain these topics in order to effectively determine applicants' eligibility.

**Comments for Application Processing forms/rejected applicant:**