

KIC Facilities Management LLC

A Subsidiary of Kikiktagruk Inupiat Corporation
PO Box 1050, 373A Second Avenue Kotzebue, Alaska 99752

PO Box 1050, 373A Second Avenue Kotzebue, Alaska 99752 main – (907)442-3165 fax – (907)442-2165

RENTAL APPLICATION

Conditions and Information

The completion of this application and the acceptance of this application b Landlord create no obligation of Landlord to approve this application. Application will be considered based on past tenancy, credit worthiness, and income. A credit check will be done to determine your eligibility.

This application will be approved or rejected upon eligibility requirements and availability of housing or apartments. However, there is no obligation of Landlord to notify rental applicants unless the application is approved.

If this application is approved, rental applicant must view the premises, pay the necessary deposit*, and have the electricity put in their name, complete a move-in inspection, and sign the lease before the tenancy begins.

Landlord complies with all federal and state laws regarding discrimination and does not discriminate based upon age, sex, race, marital status, religion, natural origin, or other protected classes.

KIC apartments are SMOKE FREE and absolutely NO PETS allowed.

*Necessary Deposit: A security deposit for \$1,000 will be required prior to move in.



Building Preference: Parking spaces available for \$25/month at 29 & 41 Units,

Plug-in is an additional charge of \$25/month.

Amounts below are monthly rental rates.

41 Unit

- o Small Efficiency <u>\$1,337</u>
- o Large Efficiency \$1,362
- o 1 (one) Bedroom <u>\$1,540</u>
- o 2 (two) Bedroom \$1,722

6-Plex or 8-Plex

o 2 (two) Bedroom - \$1,886

29 Unit

- o 1 (one) Bedroom \$1,507
- o 2 (two) Bedroom \$1,685
- o 3 (three) Bedroom \$1,811

18-Plex (Teacher Housing)

o 3 (three) Bedroom - \$2,152

Households must qualify for Teacher Housing by holding an occupation of a teaching professional, certified medical professional, or a public safety professional.

| Applicant Information | | | | | | |
|--|--------------|---------------------------------------|--------------------|--|--|--|
| Full name: | | SSN: | | | | |
| Marital Status: | Spouse Name: | | | | | |
| Mailing Address: | | | | | | |
| Cell Phone: | | | | | | |
| Date of Birth: | Email: | | | | | |
| Driver License Number & State | | · · · · · · · · · · · · · · · · · · · | Vehicle: Yes or No | | | |
| If yes, vehicle Make: | Model: | Color: | Year: | | | |
| Additional Occupants: List everyone, including children who will live with you. Please note that apartments have a maximum occupancy rate per unit depending on the size. | | | | | | |
| Full Name: | | Relationship to Ap | oplicant: | | | |
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| | | 7 | | | | |
| | | | | | | |



| Rental History | | | |
|---|---------------------------------|--|--|
| Physical & Mailing Address: | | | |
| | | | |
| Reason for leaving: | | | |
| Landlord/Manager: | Phone Number: | | |
| Landlord/Manager email: | | | |
| | | | |
| Employment Information | | | |
| CURRENT Employer: | | | |
| 1 | Phone Number: | | |
| Position or Title: | Dates Employed: | | |
| Supervisors email: | Monthly Income: | | |
| | | | |
| Credit References (Credit Accounts, loa | ns, or other major obligations) | | |
| Name: | Phone number: | | |
| Name: | Phone number: | | |
| | | | |
| Emergency Contact | | | |
| Name: | Relationship: | | |
| | Phone Number: | | |
| Email address: | | | |
| | | | |
| 8 | | | |



| Additional Information | | | | | |
|---|----------|----|---------|--|--|
| Do you intend to reside here indefinitely? | YES | or | NO | | |
| If not, how long? | | | · | | |
| Have you ever filed for bankruptcy? | YES | or | NO | | |
| Have you ever been evicted? | YES | or | NO | | |
| Are you a party to any lawsuit? | YES | or | NO | | |
| Have you been convicted of a felony? | YES | or | NO | | |
| Explain any "YES" listed above: | | | | | |
| | | | | | |
| | | | | | |
| | <u> </u> | | | | |
| | | | | | |
| | | | | | |
| Applicant Signature | | | | | |
| I authorize that all information on this application is true to the best of my knowledge. I authorize KIC to perform a credit check and agree to pay \$25.00 for the service, which will not be refunded. | | | | | |
| Signature: | | | _ Date: | | |

PERSONAL RELEASE FORM COMBINED DISCLOSURE NOTICE AND AUTHORIZATION REGARDING BACKGROUND CONSUMER REPORTS – TENANT

KIC Facilities Management LLC, Kotzebue, Alaska

| Requesters name: | Phone # |
|---|---|
| | |
| including information concerning your character, employercord, credit and indebtedness may be obtained in condomination and/or an investigative consumer report may be obtained in action is taken, based in whole or in part on the information receive a denial letter. The name, address and telephone | A consumer report and/or investigative consumer report byment history, rental history, personal characteristics, police connection with your rental application. A consumer report sined at any time during the application process. If adverse nation contained in the consumer report, you are entitled to one number of Tenant Watch, and a summary of your rights you may contact tenant Watch for a copy of the consumer |
| landlord, police department, financial institution, consu | rithout any reservation, any present or former employer, umer reporting agencies, credit bureaus or other persons or nt Watch with any and all background information in their as a potential tenant may be determined. |
| | vation, any party or agency contacted by Tenant Watch to ree that a fax or photocopy of this authorization with your riginal. |
| There will be a non-refundable \$25.00 fee, paid in adva | nce for the credit check. |
| Please print legibly to speed up processing time | |
| APPLICANT'S FULL NAME: | |
| APPLICANT'S SSN: | şş. |
| APPLICANT'S DOB | |
| APPLICANT'S FULL ADDRESS | |
| READ, ACKNOWLEDGED AND AUTHORIZED | |
| Signature of Applicant | Date |