

WDC
7530 W Sahara #105
Las Vegas NV 89117
1-877-365-5615

Instruction Page

1. Complete an application for each adult (18 years and older) . Print out the instruction sheet and application, gather your documents and schedule your appointment. You will bring everything to the appointment.
2. Call (702)381-9048 to schedule your appointment. Please be mindful that we call you from various numbers, we will attempt to reach you 3 times.
3. After we scheduled your appointment prepare \$75 money order or cashiers check for each adult (18 years old and older), your complete application and all required documents listed below. Do NOT leave any blanks in your application as we do not review any applications that are not completed in their entirety. Plan on spending 45 minutes to 1 hour going over your documents. Please do not bring small children.
4. No pets
5. Each applicant over 18 years of age must obtain a background check from the Metropolitan Police Department 400 S. Martin Luther King Building C or any substation for \$10.
6. All monies must be paid in full before you will be able to move in and utilities turned on.
7. Please check the figures below to ensure that your household's gross income does not exceed the figures below.

2021 Figures				
# In household	1	2	3	4
	\$27,550	\$31,500	\$35,450	\$39,350

Documents for 2nd Step

Nevada state issued ID with picture Adults

SS on all

Birth certificate on all occupants under 18

Background check from the Metropolitan Police Department

Employment Verification of Income third party or paycheck stubs (3 consecutive)

SSI Disability any governmental assistance benefit letters less than 90 days old

Bank 6 months checking

Bank most current 1 month savings account

IRA/401k retirement, pension etc.

DEVELOPMENT CENTER

MAKE SURE TO COLLECT ALL YOUR DOCUMENTS AND BRING TO YOUR APPOINTMENT WITH WDC

RESIDENTIAL RENTAL APPLICATION
ONE COMPLETE APPLICATION PER EACH PERSON
RESIDING IN UNIT 18 YEARS AND ABOVE

THE PROPERTY

Circle 1 or 2 bedroom Upstairs / Downstairs

We are a no smoking facility _____ Would you have a problem with this policy? Y N

Were you Evicted? Yes No

TENANCY

When would you like to move? Date _____

APPLICANT DETAILS

Full Name: _____ DOB: _____ SSN: _____

Driver's License No. _____ Phone: _____

E-Mail: _____

Other Occupants? ☐ Yes ☐ No Relationship: _____

If Yes, Describe: _____

Pets? ☐ Yes ☐ No

If Yes, Describe: _____

If Yes, Describe: _____

Ever Been Convicted of a Crime? ☐ Yes ☐ No

If Yes, Describe: _____

Ever Filed for Bankruptcy? ☐ Yes ☐ No

If Yes, Describe: _____

Ever Been Evicted? ☐ Yes ☐ No If Yes what year? _____

Who was the landlord _____ What State ? _____

Landlords Phone # _____ What do you owe \$ _____

Have you contacted them to work out a payment plan ? Yes No

Any falsification on this application will disqualify will make you ineligible to move forward with your application.

If Yes, Describe: _____

CURRENT EMPLOYMENT

Company: _____ Occupation/Title: _____

How Long? _____ Gross Income: \$ _____ (From Prior Year Tax Filing)

Street Address: _____

City: _____ State: _____ Supervisor: _____

PREVIOUS EMPLOYMENT

Company: _____ Occupation/Title: _____

How Long? _____ Gross Income: \$ _____)

Street Address: _____

City: _____ State: _____ Supervisor: _____

CURRENT RESIDENCE

Type (Apt, Home, Condo): _____ Square Feet (SF): _____ SF

Bedrooms: _____ Rent Amount: \$ _____ /Month

Street Address: _____

City: _____ State: _____ Zip: _____

How long at this Address? _____ Current Lease Expiration Date: _____

Desire for Moving? _____

CURRENT LANDLORD

Name: _____

Address: _____

Phone: _____ E-Mail: _____

PREVIOUS RESIDENCE – 1 **Use as many blocks – we need 10 years of residency**

Type (Apt, Home, Condo): _____ Square Feet (SF): _____ SF

Bedrooms: _____ Rent Amount: \$ _____ /Month

Street Address: _____

City: _____ State: _____ Zip: _____

Start Date: _____ End Date: _____

PREVIOUS LANDLORD - 1

Name: _____

Address: _____

Phone: _____ E-Mail: _____

PREVIOUS RESIDENCE - 2

Type (Apt, Home, Condo): _____ Square Feet (SF): _____ SF

Bedrooms: _____ Rent Amount: \$ _____ /Month

Street Address: _____

City: _____ State: _____ Zip: _____

Start Date: _____ End Date: _____

PREVIOUS LANDLORD - 2

Name: _____

Address: _____

Phone: _____ E-Mail: _____

Vehicle Information

Make and Model _____ Year _____

License No & State _____ Are you the owner of vehicle? Yes No

PERSONAL REFERENCES

Full Name: _____ Relationship: _____

E-Mail: _____ Phone: _____

Full Name: _____ Relationship: _____

E-Mail: _____ Phone: _____

Full Name: _____ Relationship: _____

E-Mail: _____ Phone: _____

FINANCIAL INFORMATION

Bank: _____ Account # _____ Routing # _____

Branch Location _____ Type: ☐ Checking ☐ Savings

Bank: _____ Account # _____ Routing # _____

Branch Location _____ Type: ☐ Checking ☐ Savings

Credit Card: _____ Card # _____ - _____ - _____ - _____ Limit: \$ _____

☐ Visa ☐ MasterCard ☐ Discover ☐ Amex ☐ Diner's Club

Credit Card: _____ Card # _____ - _____ - _____ - _____ Limit: \$ _____

☐ Visa ☐ MasterCard ☐ Discover ☐ Amex ☐ Diner's Club

Credit Card: _____ Card # _____ - _____ - _____ - _____ Limit: \$ _____

☐ Visa ☐ MasterCard ☐ Discover ☐ Amex ☐ Diner's Club

CONSENT AND ACKNOWLEDGMENT

I hereby certify that I am at least 18 years of age. Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords, employers, and personal references. Applicant hereby authorizes owner/agent to obtain any and all Unlawful Detainer, Credit Reports, Tele checks, and/or Criminal Background Reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.

Applicant's Signature _____ **Date** _____

I understand that any monies owing WDC, for unpaid rent, damages, court fees, eviction, etc. will be sent to a collection company. The collection company adds an additional fee that I will be responsible for paying as well.

Signature Date Social Security #

Print Name

CONSUMER DISCLOSURE

I/we, the undersigned, authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, OFAC search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, and bank representatives. This investigation is for resident screening purposes only and is strictly confidential. This report contains information compiled from sources believed to be reliable, but the accuracy of which cannot be guaranteed. I hereby hold Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information. These reports are being processed by On-Site.com, P.O. Box 1514, Los Altos, CA 94023-1514, (877) 222-0384. A summary of your rights under the Fair Credit Reporting Act is available by visiting or writing (Para información en español, visite o escriba): <http://www.ftc.gov/credit>

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742
- On-Site Manager, Inc., P.O. Box 1514, Los Altos, CA, 94023-1514, (877) 222-0384

California Residents

Under California law, these consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

Signature: _____

Name Printed: _____

Date: _____

If you would like to receive a copy of any investigative consumer report at no cost to you, please initial here: _____

If you would like to receive a copy of any credit report at no cost to you, please initial here: _____

PLEASE NOTE:

Under Section 1786.22 of the California Civil Code, if you wish to dispute the accuracy or completeness of any item in the consumer report, you may contact the consumer reporting agency named above and request an investigation. You also may view the file maintained on you by the above credit reporting agency during normal business hours. You can receive a copy of your file by providing proper identification and paying any related-copy costs. You may also receive a summary of the file by telephone. The agency is required to have employees available to explain your file to you, and they must explain any coded information in your file. You can bring someone with you to view the file, so long as they have identification.

Washington Residents

In the event of a denial or other adverse action, you have a right to obtain a free copy of the consumer report from the screening company or credit reporting agency

Massachusetts Residents

An applicant for employment or for housing or an occupational or professional license with a sealed record on file with the commissioner of probation may answer 'no record' with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. An applicant for employment or for housing or an occupational or professional license with a sealed record on file with the commissioner of probation may answer 'no record' to an inquiry herein relative to prior arrests or criminal court appearances. In addition, any applicant for employment or for housing or an occupational or professional license may answer 'no record' with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.