

Midwestern Oklahoma Development Authority

PO Box 549, Burns Flat OK 73624

Fax -580-562-3113

\$15.00 Processing Fee

Phone 580-562-3111

Approved ____ Denied ____

MUST BE 21 YEARS OF AGE

Name (first, middle, last) _____ DOB _____

Spouse or other (first, middle, last) _____ DOB _____

Social Sec. # _____ Spouse's Social Sec. # _____

Driver's License # _____ Cell Phone # _____

Present Address _____ City _____ State _____ Zip _____

Monthly payment \$ _____ How long have you lived there? _____ Rent _____ Own _____

Landlords Name _____ Telephone # _____ Is rent current? _____

Employer _____ How long? _____ Occupation _____ Phone # _____

Employer Address _____ City _____ State _____ Zip _____

Spouse's Employer _____ How long? _____ Phone # _____

Employer Address _____ City _____ State _____ Zip _____

APPLICATION MUST BE FILLED OUT COMPLETELY

Others Living in Household (children, friends, relatives, etc.) Only one family per household permitted.

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

of animals _____ Have you ever rented from MODA? _____

Current Family Income \$ _____ Make & Model of Vehicle _____

Have you ever been convicted of a felony? Yes _____ No _____ If yes, state the jurisdiction(s) Federal &/or State & County and nature of offense for all convictions (use reverse side if necessary) You will be denied if any charges for manufacturing/distribution.

I understand that a felony conviction or an untruthful answer to any questions on this form may disqualify me for housing with MODA and/ or may be grounds for eviction if discovered after I move in.

In case of emergency: **(Must be complete)** Two relatives (not living with you) **street address & phone #'s**

I hereby certify that the foregoing information is true and correct to the best of my knowledge and belief. Inquires may be made to verify the statements herein. I also understand that a \$250.00 security deposit will be paid at the time I am approved, and will hold the unit for 2 weeks. This deposit will be forfeited if I choose not to move in. The deposit will be applied as a housekeeping and damage deposit at the time I move in, and will be refunded when I move out, provided I give 30 days written notice of my intent to vacate, there are no damages, the house is clean, and carpets professionally cleaned, and rent is current. I also agree to pay a \$250.00 non-refundable animal deposit, (in units where animals are permitted only) at move-in or any time thereafter that I decide to attain an animal.

Date _____ Signature _____

List Any Rental References on other side of Application

AUTHORIZATION FOR RELEASE OF INFORMATION

CONSENT:

(I or We), _____ authorize and direct any Federal, State, or Local agency, organization, business, or individual to release to **Midwestern Oklahoma Development Authority**, any information or materials needed to complete and verify my application for housing. I understand and agree that this authorization or the information obtained with its use may be used in the final decision to lease or purchase a housing unit in my name.

INFORMATION COVERED:

I understand that, previous and current information regarding me or my household may be needed. Verifications and inquiries that may be requested include but are not limited to: Identity, Marital Status, Employment, Income, Rental Activity and Criminal Activity and Credit.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED:

The groups or individuals that may be asked to release the above information (depending on requirements) includes but not limited to: Previous landlords, Present employers, Public Housing Agencies, Courts, Banks and other Financial Institutions, Credit providers, Credit bureaus and Utility Companies. I understand that I have a right to notification of any adverse information found and a chance to disprove incorrect information.

CONDITIONS:

I agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file with MODA, and will stay in effect for a year and one month from the date signed. I understand I have a right to review my file and correct any information that I can prove is incorrect.

SIGNATURES

Signature

date

Signature

date