



OFFICE USE ONLY

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

PROPERTY NAME / NUMBER \_\_\_\_\_

UNIT NUMBER \_\_\_\_\_ ADDRESS \_\_\_\_\_

DATE UNIT WANTED \_\_\_\_\_ UNIT RENT \$ \_\_\_\_\_  
MM/DD/YYYY

OWNER / AGENT Stark Firs Management PHONE (503) 252-9454

OWNER / AGENT ADDRESS 14015 SE Stark St. , Portland, OR 97233

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.

INDIVIDUAL

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)

I HAVE APPLIED TO OTHER LOCATIONS MANAGED BY OWNER/AGENT IN THE LAST 60 DAYS  
WHERE? \_\_\_\_\_

FULL LEGAL NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

PREVIOUS NAMES, ALIASES OR NICKNAMES USED \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOC. SECURITY # \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
MM/DD/YYYY

PHOTO I.D. TYPE \_\_\_\_\_ # \_\_\_\_\_ / STATE \_\_\_\_\_ EXP. DATE \_\_\_\_\_  
MM/DD/YYYY

CURRENT STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DATE YOU MOVED IN \_\_\_\_\_  
MM/DD/YYYY

CURRENT LANDLORD NAME \_\_\_\_\_ LANDLORD PHONE (\_\_\_\_) \_\_\_\_\_

LANDLORD EMAIL \_\_\_\_\_ LANDLORD FAX (\_\_\_\_) \_\_\_\_\_

STREET ADDRESS (OR APARTMENT NAME) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FORMER STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
MM/DD/YYYY MM/DD/YYYY

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 \_\_\_\_\_

**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 has pet(s) \_\_\_\_\_

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	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #	OWNER
	MM/DD/YYYY						
	MM/DD/YYYY						
	MM/DD/YYYY						
	MM/DD/YYYY						
	MM/DD/YYYY						

VEHICLES

OTHER

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 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? \_\_\_\_\_

SCREENING

Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the individual's credit, 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 Bemrose Consulting PHONE (503) 419-6539

ADDRESS 12655 SW Center Street, Suite 540, Beaverton, OR 97005

EMAIL \_\_\_\_\_

If the application is approved, the individual 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 the individual fails to occupy the unit. If the individual 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 the individual: \_\_\_\_\_ 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, THE INDIVIDUAL 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.

SIGNATURE

*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 giving incomplete or false information is grounds for rejection of this application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I have received and read the Owner/Agent's rental criteria.*

INDIVIDUAL X DATE \_\_\_\_\_  PHOTO I.D. VERIFIED BY \_\_\_\_\_ (INITIALS)

OWNER/AGENT X DATE RECEIVED \_\_\_\_\_ TIME RECEIVED \_\_\_\_\_

OWNER/AGENT NOTES Application is only valid for 60 days from date submitted to office.



# 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](http://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\\_opp/assistance\\_animals](https://www.hud.gov/program_offices/fair_housing_equal_opp/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](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](http://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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MON, WED, FRI 9–11am and 1–4pm

## 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](http://portland.gov/rso)] or by contacting the Rental Services Office at (503) 823-1303 or [rentalservices@portlandoregon.gov](mailto: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.

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  
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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.

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**CITY OF PORTLAND • LOW BARRIER NON-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 individual is either approved or denied in compliance with all local, state and federal laws.

Individuals have 30 days to appeal denied applications, during which time they may correct, refute, or explain negative information forming the basis for the denial. Individuals 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 Individuals 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 individual:
  - 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 individual 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 individual 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.

**RENTAL HISTORY**

Individuals may not be rejected for rental history that included actions to recover possession pursuant to ORS 105.105 to 105.168 if the action:

1. Was dismissed or resulted in a general judgment for the individual before the individual submitted the application;
2. Resulted in a general judgment against the individual entered 3 or more years before the date of the application;
3. Resulted in a general judgment against the individual entered fewer than 3 years before the date of the application if the termination was based on a no-cause notice, or the result of a default judgment due to failure to appear and the individual presents credible evidence to Owner/Agent that the individual had already vacated the unit upon which the action was based at the time the notice of the action was served;
4. Resulted in a judgment or court record that was subsequently sealed or set aside pursuant to procedures in state law;
5. Insufficient rental history (unless the individual withholds rental history information in bad faith that might otherwise form the basis for a denial);
6. Information that Owner/Agent obtains from a verbal or written rental reference check with the exceptions of:
  - a) Defaults in rent
  - b) 3 or more material violations of a rental agreement within one year prior to the date of the application that resulted in notices issued to the resident
  - c) Outstanding balances due to Owner/Agent
  - d) Lease violations resulting in a termination with cause.

**RENT WELL GRADUATES**

If the individual fails to meet any criteria related to credit, evictions and/or rental history, and the individual 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 the individual is sufficient to demonstrate that the individual 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 individual.

**CRIMINAL CONVICTION CRITERIA**

Upon receipt of the Rental Application and screening fee, Owner/Agent will conduct a search of public records to determine whether the individual 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 the individual 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 the individual 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 the individual, 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, the individual should do so. Otherwise, the individual 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) A criminal conviction for misdemeanor offenses for which the dates of sentencing have occurred within the last 3 years from the date of the application (excluding court-mandated prohibitions that are present at the property for which the individual has applied);
- b) A criminal conviction for felony offenses for which the dates of sentencing have occurred within the last 7 years from the date of the application (excluding court-mandated prohibitions that are present at the property for which the individual has applied).

Criminal Conviction Review Process.

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

- (1) the individual has submitted supporting documentation prior to the public records search; or
- (2) the individual 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 individual.

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 the individual 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 the individual's written request (if made after denial) the unit was committed to another individual.