

OFFICE USE ONLY

Please Return Application to: Wyoming National Apartments 204 E. 2nd Street Casper, WY 82601	Date Rec'd		Annual Income		# Occupants	
	Time Rec'd		Set Aside %		App. Fee Paid	
	Manager's Signature:				Background CK ran	

APPLICATION FOR RESIDENCY

I. Applicant/Co-Applicant

Applicant's Name: _____	Co-Applicant's Name: _____
Driver License #: _____ State: _____	Driver License #: _____ State: _____
SS#: _____ DOB: _____	SS#: _____ DOB: _____
Phone #: _____ Cell #: _____	Phone #: _____ Cell #: _____
Email: _____	Email: _____
Student Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Not Student	Student Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Not Student
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated

II. Other Household Members

***List only children who are dependents of the household and will reside in the unit 50% or more of the time.* Check Student Status:**

Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student
Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student
Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student
Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student
Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student
Name: _____	Current Age: _____	DOB: _____	SS#: _____	<input type="checkbox"/> F/T	<input type="checkbox"/> P/T	<input type="checkbox"/> Not Student

Are there any other household members not listed on this or a separate application (i.e. spouse, roommate, etc)?

No Yes If yes, please explain: _____

Do you anticipate any changes in the size of your household *within the next 12 months*?

No Yes If yes, please explain: _____

III. Residency History

List the past **two** years of residency history. If additional space is needed, please attach additional pages to application:

Current Address: _____	Previous Address: _____
City, State, Zip: _____	City, State, Zip: _____
From: _____ To: _____	From: _____ To: _____
<input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other: _____	<input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other: _____
Landlord's Name: _____	Landlord's Name: _____
Landlord's Phone #: _____ Rent: _____	Landlord's Phone #: _____ Rent: _____

IV. Employment History

Applicant's Current Employer:	Co-Applicant's Current Employer:
Employer's Name: _____	Employer's Name: _____
Street Address: _____	Street Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone #: _____ Fax #: _____	Phone #: _____ Fax #: _____
Supervisor's Name: _____	Supervisor's Name: _____
Anticipated Gross Annual Income: _____	Anticipated Gross Annual Income: _____

WYOMING NATIONAL APARTMENTS

204 E. 2nd STREET | CASPER, WY 82601 | P: 307.472.1312

APPLICATION & RESIDENT SELECTION INFORMATION

Note to applicant: This page is for you to retain in reference to our resident selection criteria.

Submit your completed application to:
Wyoming National Apartments
204 E. 2nd Street, Casper, WY 82601
307-472-1312

The application must be signed and the following must be included for the application to be accepted:

- Copies of picture identification on all occupants age 18 and older.
- Copies of Social Security card or Birth Certificate on all occupants.

Once received, the application will be dated and reviewed for completeness. A pre-eligibility determination will be made based upon the information contained in the application.

Eligibility will be determined based upon the following factors:

- The applicant(s) meet the income criteria.
- References (i.e. employer, current & former landlords) will be contacted to verify employment, length of time on the job and verify rental payment history.
- A Credit & Criminal background check will be obtained and reviewed.
- **Once qualified** a \$39 application fee will be charged to **each adult applicant**.

Applicant(s) will be notified in writing within ten (10) days of receipt of the application as to the acceptance or denial of this application. If no unit is available at the time of acceptance, applicant's name will be placed on the waiting list.

Wyoming National Apartments is committed to the non-discrimination provision in the Fair Housing Act and Section 504 of the Americans with Disabilities Act. If you require assistance in the form of readers, interpreters, large print or any other way to enable you to fully participate in our housing program, please let us know and we will assist you to the fullest extent feasible.

USDA is an equal opportunity provider, employer and lender.
To file a complaint of discrimination write USDA, Director, Office of Civil Rights,
1400 Independence Ave., S.W., Washington D.C. 20250-9410
Or call (800)795-3272(voice) or (202)720-6382 (TDD)

