

Management Use Only

Date Application Returned: _____



Equal Housing Opportunity

City of Foster City – Home Rentals

If you are interested in leasing a home in the City of Foster City, please complete this RESIDENCY APPLICATION, keep a copy for your records and return this original by mail to:

HIP Housing Management, 520 So. El Camino Real, Suite 422, San Mateo, CA 94401 (650) 348-6820

You must contact this office every three months for status and to give us any changes (i.e., phone numbers, address, place of work, change in family size, etc.), or you will be dropped from the list. We will not call you until a vacancy is available. You may fax, call, or mail us with updates.

PROGRAM RESTRICTIONS - Households must meet the following restrictions at time of application and at time of move in:

Two (2) Bedroom House:	Minimum Household Size: 3 persons	Maximum Household Size: 5
Three (3) Bedroom House:	Minimum Household Size: 5 persons	Maximum Household Size: 7
Five (5) Bedroom House:	Minimum Household Size: 6 persons	Maximum Household Size: 11

PRIORITY WILL BE GIVEN TO HOUSEHOLDS BASED ON THE FOLLOWING CRITERIA:

- 1st Priority: Very Low Income (50% AMI) Living & Working in Foster City
- 2nd Priority: Low Income (80% AMI) Living & Working in Foster City
- 3rd Priority: Very Low Income (50% AMI) Living in Foster City
- 4th Priority: Low Income (80% AMI) Living in Foster City
- 5th Priority: Very Low Income (50% AMI) Employee of the City of Foster City
- 6th Priority: Low Income (80% AMI) Employee of the City of Foster City
- 7th Priority: Very Low Income (50% AMI) who are classroom teachers employed by San Mateo-Foster City School District, San Mateo Union High School District or the San Mateo County Community College District
- 8th Priority: Low Income (80% AMI) who are classroom teachers employed by San Mateo-Foster City School District, San Mateo Union High School District or the San Mateo County Community College District
- 9th Priority: Very Low Income (50% AMI) who Work in Foster City
- 10th Priority: Low Income (80% AMI) who Work in Foster City

APPLICANT:

_____ Last Name First Name Initial

_____ Current Home Address City State Zip Code

Email address _____

Telephone (Day or Message): () _____ Telephone (Evening): () _____

I am applying for the following: [] Two Bedroom [] Three-bedroom [] Five-bedroom

Do you have a Rental Voucher from the Housing Authority? _____ Yes _____ No

How many people live in the household?: _____

Employer Name _____ Address _____ Hrs worked per week _____

Estimated Annual Household Income (all family members 18 years and older combined) \$ _____

I understand and consent that further inquiries will be made to verify income, household size, credit history, rental history and ability to obtain utility services. I understand that an application fee of \$30 per adult will be due at the time of screening. I understand that management’s acceptance of this application and that my providing this information does not establish my eligibility for residency. I understand that false statements or information made on this application are grounds for ineligibility and immediate denial of housing.

Head of Household

Applicant Signature: _____

Date: _____