

Senator Mike O'Pake
goggleWorks
Center for the Arts
Apartments



135 Washington Street • Reading, PA • 19601

A Spectacular New Multi-Family Apartment Community

Phone: (610)898-6137 OR (484)256-4865 FAX: (610)898-6154

135 Washington Street, Reading, PA 19601

CARRIE NEISWENDER Email: goggleworksapartments@boscovs.com

RENTAL RATES & APARTMENT SIZES:

Rental rates are subject to change at any time.

Two-Bedroom - 2 Baths

\$1,159.00

Approximately Sq. Ft. 1316

Two-Bedroom - 2 Baths - Balcony Level & 5th Floor

\$1,318.00

Approximately Sq. Ft. 1349

APPLICATION FEE: \$25.00 PER ADULT (18 YEARS OR OLDER)

PAYABLE TO: GOGGLEWORKS APARTMENTS

DUE AT TIME OF APPLICATION

Water, Sewer, Trash Removal & Pest Control are included
in the monthly rental rates.

Garage parking available (\$65.00 per month).

Handicapped accessible units available.



RENTAL APPLICATION for GOGGLE WORKS APARTMENTS

FOR MANAGEMENT USE ONLY	
Date & Time Application Received:	
Requested Accessible Unit:	
Tax Credit Set Aside:	

HOUSEHOLD COMPOSITION: List the head of your household and all members who will live in your home. All questions must be answered. Enter the race & ethnicity codes by using the following definitions: Race Codes: 1. American Indian or Alaska Native, 2. Asian, 3. Black or African American, 4. Native Hawaiian or other Pacific Islander, 5. White, (choose all that apply), or enter a D if you do not wish to provide this information. Ethnicity Codes: Y if Hispanic or Latino, N if Not Hispanic or Latino, or enter a D if you do not wish to provide this information.

Member No.	Full Name, including middle initial, if applicable	Relationship to HOH	Race	Ethnicity	Dis-abled [Y/N]	Gender [M/F]	Date of Birth	Age	Full Time Student [Y/N]	Social Security No.
1		Head of Household								
2										
3										
4										
5										
6										
7										
8										

STUDENT STATUS: Are all of the residents full time students?

Yes No

If yes: Are/is the full-time adult student(s) married and filing a joint tax return?

Yes No

If yes: Is full-time adult student receiving assistance under Title IV of the Social Security Act: AFDC or TANF?

Yes No

If yes: Is full-time adult student enrolled in a job training program comparable to the Job Training Partnership Act?

Yes No

If yes: Is the full-time adult student a single parent residing with his/her minor child(ren), and such parent is not a dependent of another individual, and the child(ren) are not dependents of another individual other than the non-resident parent of the child(ren)?

Yes No

If yes: Did the full-time adult student previously receive foster care assistance under Part B of E Title IV of the Social Security Act?

Yes No

RENTAL HISTORY: Current Address: _____

Rent: \$ _____ Length of Residency: _____ Landlord's Name: _____

Landlord's Phone#: _____ Landlord's Address: _____

If less than three years, provide previous address: _____

Rent: \$ _____ Length of Residency: _____ Previous Landlord's Name: _____

Landlord's Phone#: _____

Landlord's Address: _____



CONTACT INFORMATION:

Home Phone: _____ Work Phone: _____
Cell Phone: _____ E-mail address: _____

ANNUAL INCOME: For each type of income that your household receives or expects to receive, enter the gross amount of income you anticipate receiving from each source during the next 12 months:

SOURCE	HOH	CO-HEAD OR OTHER ADULT	OTHER ADULT	OTHER ADULT	HOUSEHOLD TOTAL
Gross Salary including any Overtime Pay					
Commissions/Tips/ Bonuses/Fees					
Alimony/Child Support					
TANF					
SSP					
Social Security					
SSI					
Pensions/Retirement Funds, etc.					
Unemployment Benefits					
Worker's Compensation/Disability					
Student Financial Assistance					
Income from Business					
Recurring Income or Gifts					
Other:					
				TOTAL:	

EMPLOYMENT:

HEAD OF HOUSEHOLD: I am not employed at this time.

Current Employer: _____ Position: _____ Supervisor: _____

Address: _____ Phone: _____ Fax: _____

Current Wages: \$ _____ per: (circle one) Hour Week Month Year

Hours Worked Per Week: _____ Tips or Commissions Per Week: \$ _____ Annual Bonus: \$ _____

Do you have more than one job? Yes No


CO-APPLICANT OR OTHER ADULT MEMBER: I am not employed at this time.

Current Employer: _____ Position: _____ Supervisor: _____

Address: _____ Phone: _____ Fax: _____

Current Wages: \$ _____ per: (circle one) Hour Week Month Year



Hours Worked Per Week: 

Tips or Commissions Per Week: \$ _ Annual Bonus: \$
Do you have more than one job? Yes No



Does any member of your household who is not now working, expect to work for any period during the next twelve months? Yes No N/A – All adults currently work.

ASSETS: Assets include cash (wherever held), all bank accounts, stocks, bonds, money market accounts, IRA's, annuities, retirement/pension funds, 401K's, 403B's, cash value of whole or universal life insurance policies, equity in real estate or capital investments, items held as an investment, (jewelry, art, coin or stamp collections, etc), etc. You must also include the value of any assets disposed of in the past 24 months for less than fair market value.

ASSETS	CASH VALUE	INCOME FROM ASSETS	NAME OF FINANCIAL INSTITUTE	ACCOUNT NUMBER
Checking Account				
Savings				
Certificate of Deposit				
Mutual Funds/ Stocks/Bonds				
401K/IRA/Other Retirement Account				
Real Estate				
Life Insurance				
Savings Bonds				
Other				
TOTAL:				

I/We have no assets at this time.

Have you disposed of any assets at less than fair market value within the last 24 months? Yes No

OTHER:

Have eviction charges ever been filed against you at a District Magistrate's office for nonpayment and/or late payment of rent to your landlord or for any other reason? Yes No

Have you or any other household member or person you wish to reside with you ever been convicted of a crime? (Omit only minor Traffic Violations; DUI is considered a crime.) Yes No

Have you or any other household member or person you wish to reside with you been released from jail in the past five (5) years? Yes No

Are there any special housing needs or reasonable accommodations, (Examples; a unit for mobility impaired, visually impaired or hearing impaired person, a live-in aide, etc.), that the household will require to meet the needs of a disabled family member ? Yes No. If Yes, please list: _____

EMERGENCY CONTACT:

Name: _____ Relationship: _____ Phone: _____

Address: _____



I/We certify that if selected, the unit I/we occupy will be my/our only residence. I/We understand the above information is being collected to determine my/our eligibility. I/We authorize the owner/manager to verify all information provided on this application and to contact previous or current landlords or other sources of credit and verification information, which may be released to appropriate federal, state, or local agencies. I/We certify that the statements made in this application are true and complete to the best of my/our knowledge and belief. I/We understand that providing false statements or information is punishable under federal law.

ALL ADULT HOUSEHOLD MEMBERS MUST SIGN BELOW:

Head of Household Signature: _____ Date:

Co-Head or Adult Member: _____ Date:

Adult Member: _____ Date:

Adult Member: _____ Date:

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense for any person to make false or fraudulent statements to any department or agency of the United States Government or public housing authority as to any matter within its jurisdiction or to make unauthorized disclosures or improper use of the information collected hereunder.

FOR MANAGEMENT USE ONLY:

Received Social Security Cards	<input type="checkbox"/>	Received Income Verification	<input type="checkbox"/>	Passed Criminal	<input type="checkbox"/>
Received Birth Certificates	<input type="checkbox"/>	Received Asset Verification	<input type="checkbox"/>	Passed Credit	<input type="checkbox"/>
Received Photo Ids	<input type="checkbox"/>	Received Rental Verification	<input type="checkbox"/>	Passed Home Inspection	<input type="checkbox"/>

03/2011



APPLICATION FEE: \$25.00 PER ADULT (18 YEARS OR OLDER)
PAYABLE TO: GOGGLEWORKS APARTMENTS
DUE AT TIME OF APPLICATION

GoggleWorks Apartments

ITEMS REQUIRED FOR APPLICATION PROCESS IDENTIFICATION

FOR ALL HOUSEHOLD MEMBERS REQUIRED:

- Valid Picture ID/Drivers License

INCOME:

- 1 months consecutive paystubs for all occupants
- Name, Address and phone number of employer
- Entitlement Awards Letters if applicable (SSA, SSD, SSI, Pension, etc.)

(Provide the following if source is to be used as qualifying income)

- Alimony/Child Support orders

ASSETS:

(provide the following assets support if the interest earned/cash value is to be counted as income)

- Checking Accounts- 1 month most recent statement
- Savings Accounts- 1 month most recent statement
- Life Insurance- most recent statement or letter from Life Insurance Company (if applicable) .
- Stocks, Mutual Funds & Misc Investment Accounts- Current Statements
- **RENTAL**

REFERENCE:

- Name, mailing address and current phone number of present landlord
- Name, mailing address and current phone number of previous landlord
- If current residence is owned, provide copy of current mortgage statement.
- If current landlord cannot be reached, provide evidence of last 6 months rent paid

RETURN ALL ITEMS TO: GOGGLEWORKS APARTMENTS
C/O CARRIE NEISWENDER 135 WASHINGTON STREET, READING, PA 19601
cneiswender@boscovs.com 610-898-6154(fax) 610-898-6137(office)



GOGGLEWORKS APARTMENTS

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, do hereby authorize any

- Public or private welfare Agency
- Social Service Agency
- Bureau of Employment Security
- Domestic Relations Agency
- Berks County Office of Aging
- Pennsylvania Department of Public Welfare
- U.S. Social Security Administration
- U.S. Veteran's Administration
- Current or former Landlords
- Insurance Carrier
- Creditor or credit references
- National Crime Information Center
- Governmental Agency
- Local or State Police
- Probation/Parole Officers
- Relative, associate or other like person acquainted with me or likely to have
- Knowledge concerning any item or information about me.

To obtain from and/or release to Our City Reading, Inc., Management office for Goggleworks Apartments, any information which may at any time be requested regarding my income, assets, family composition, credit standing or capacity, social security eligibility, supplemental security income eligibility, benefits received, payment status, entitlement and termination dates, information regarding criminal activity (including release of all criminal records), information regarding previous or present eviction proceedings and any other data or information concerning a health maintenance program to determine the nature and extent of the disability or handicap which is listed on the application for admission or recertification form for continued occupancy, to include records and other information relating to treatment and diagnosis of myself or any member of the household. A photocopy of this Authorization from shall be considered effective and valid as the original.

(Date)

(Signature)

(Address)





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CARRIE NEISWENDER goggleworksapartments@boscovs.com

RESIDENT SELECTION CRITERIA & APPLICATION PROCESS

We are committed to providing Equal Opportunity Housing to ALL applicants. In compliance with the Fair Housing Act, we do not discriminate on the basis of Race, Color, Religion, Sex, Handicap, Familial Status, National Origin, Age or any other protected class. All applicants are evaluated according to our Rental Criteria and held to the same standards. Your approval or denial will be based on five factors: Income, Employment Stability, Rental References, Credit History and Criminal Background. All requirements must be met to be considered for residency. We require that all applicants review our Rental Criteria prior to submitting an application. After reviewing, if you feel that you qualify, we encourage you to submit your application as soon as possible; our homes are rented on a first come basis.

Applicants – All applicants must complete separate applications. Occupants that are not prospective lease holders (i.e. children) that are 18 years old or older must also complete a separate application of their own. Applications are to be entirely filled out by the applicant himself/herself and signed by the applicant. A valid state or government photo identification will need to be presented when submitting an application to verify identity.

Co-Signers – Co-Signer has read and agreed to the Co-Signer Agreement and Lease. Co-Signer(s) may be approved or rejected at the sole discretion of the Landlord. Co-Signer(s) are subject to credit approval (see Credit section below) and may be asked for additional financial information and be subject to additional background checks and approvals as determined by the Landlord.

Application fee – An application fee of \$25.00 per adult (anyone occupying the unit over the age of 18) must be paid at the time of application. Checks should be made payable to: GoggleWorks Apartments, LLC

Rental History – Applicants must have acceptable rental or mortgage history. Acceptable rental history is defined as:

No more than three late payments in the last 2 years.

No more than one NSF check in the last 2 years.

No outstanding financial obligation to previous landlord(s).

No history of forcible detainers (evictions).

No major lease violations or conduct of illegal activity, as determined at the sole discretion of the Landlord

No damage to property, other than general wear and tear, as determined at the sole discretion of the Landlord.

If any of the above are determined to have occurred, the application will be subject to denial unless you can provide a reasonable explanation or justification satisfactory to Landlord. Rental history is expected to reveal timely payment history, no damage to the property and the applicant's propensity to comply with lease terms.

Criminal History – An authorized criminal background check will be run on all prospective residents, the results of which must be satisfactory to Landlord.

Employment – Applicants must provide evidence of a minimum of 6 months of current permanent employment at the time of submission of the application. Landlord reserves the right, in its sole and complete discretion, to approve an Applicant with less than six months full-time employment, provided that the Applicant pay an additional deposit in an amount established by Landlord. If applicant has less than 6 months of current permanent employment, an employment contract would be permitted.

Income – The verifiable household gross income of applicant(s) must be at least three times the monthly rent. Married couples' incomes will be combined for a gross total of their own. Roommates will be required to qualify separately, meaning each must have a verifiable gross income of at least three times the monthly rent. Income will be verified either through pay stubs, employer contact, tax records, or bank statements for the self-employed. If you are self-employed, verification can be provided by a prepared financial statement supplied by your CPA or by providing the preceding years tax returns along with one month's bank statements. Unverifiable income will not be considered when calculating your gross income to meet this prerequisite. A total debt-to-income ratio will be reviewed based on total gross income verified and monthly debt appearing on credit report.

Credit – An authorized credit check will be run on all applicants and Co-Signer(s). Landlord will verify credit history. Landlord evaluates credit history information with a scoring method that weighs the indicators of future rent payment performance, but Landlord retains the right to reject an application no matter an applicant's ultimate scoring. An unsatisfactory credit report can disqualify an applicant from renting an apartment or a Co-Signer from guaranteeing payment, including one that reflects past or current bad debts, late payments or unpaid bills, liens, judgments, or bankruptcies. If an application is rejected for poor credit history, the applicant or Co-Signer will be given the name, address and telephone number of the credit reporting agency that provided the credit report but will not be told the content of the credit report. An applicant rejected for unsatisfactory credit is encouraged to obtain a copy of the credit report from the credit reporting agency, correct any erroneous information that may be on the report and resubmit an application.

Occupancy Standards - No more than two people per bedroom may occupy the apartment, unless there are special circumstances approved by Landlord.

Pet Policy –\$200.00 non-refundable upfront fee. \$25.00 per month per pet in addition to monthly rent. (maximum 2 pets per unit, 25 pound weight limit- see pet policy for complete details)

Renter’s insurance is required for all residents. Proof of insurance must be provided prior to occupancy.

No Smoking Allowed in building, parking garage or on common patio.

Security deposit and first month’s rent must be paid in full at lease signing.

In the event an application fails to meet our Rental Criteria and is denied, applicant will receive a written notice stating the reason(s) for the denial and their security deposit will be refunded.

If there are findings of falsification of any information provided on the application, it will be subject to automatic denial and forfeit of security deposit.

Failure to meet rental criteria standards (Income, Employment Stability, Rental References, Credit History and Criminal Background) will subject your application to denial. Incomplete applications and not providing necessary documentation within a reasonable time frame will also subject application to denial.

After approval of application, lease appointment will be set by management office.

The application process usually takes 2-7 business days depending on the ability to obtain prompt verifications.

If you do not fully understand our criteria or application process, please do not hesitate to contact us with any questions you may have.

By signing below, you are acknowledging you have received and reviewed the Rental Criteria.

Applicant Signature

Date

Property Manager

Date