



MULTIFAMILY NW
The Association Promoting Quality Rental Housing

CITY OF PORTLAND, OREGON
STANDARD FINANCIALLY RESPONSIBLE RENTAL APPLICATION

TO BE COMPLETED BY EACH FINANCIALLY RESPONSIBLE ADULT APPLICANT

ALL UNITS
SUBJECT TO
AVAILABILITY

FARRELL
REALTY & PROPERTY MANAGEMENT



OFFICE USE ONLY

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

PROPERTY NAME / NUMBER _____

UNIT NUMBER _____ ADDRESS _____

DATE UNIT WANTED _____ UNIT RENT \$ _____ NON-REFUNDABLE SCREENING CHARGE \$ **45**

OWNER / AGENT **Farrell Realty & Property Management** PHONE **503-283-1900**

OWNER / AGENT ADDRESS **4772 N Lombard St. Portland, OR 97203**

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.

APPLICANT

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)

APPLICANT HAS APPLIED TO OTHER LOCATIONS MANAGED BY OWNER/AGENT IN THE LAST 60 DAYS WHERE?

Owner/Agent may refuse to process this application if Applicant has repeated and verifiable violations of a Rental Agreement with Owner/Agent within 365 days of submission of this application. Rental Agreement violations are repeated and verifiable when: i) at least 3 violations have occurred within a 1 year period, and the most recent violation occurred within 365 days before the submission of this application; ii) Resident received notice of each of the 3 violations in writing at the time each violation occurred; and iii) none of the 3 violations were cured (as provided in ORS 90.392) or resulted in a general judgment for the Applicant before the Applicant submitted the application. If Owner/Agent refuses to process this application for this reason, Owner/Agent shall provide Applicant with copies of the relevant notices considered.

APPLICANT FULL LEGAL NAME _____ EMAIL _____

PREVIOUS NAMES, ALIASES OR NICKNAMES USED _____

DATE OF BIRTH _____ SOC. SECURITY # _____ APPLICANT PHONE (____) _____

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 _____

APPLICANT FORMER STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____ FROM _____ MM/DD/YYYY TO _____ 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 _____

CURRENT EMPLOYER _____ PHONE (____) _____

HR EMAIL _____ HR FAX (____) _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____ GROSS MONTHLY INCOME \$ _____

OTHER MONTHLY INCOME: SOURCE _____ \$ _____ / SOURCE _____ \$ _____

ARE YOU SELF-EMPLOYED? YES NO

PREVIOUS ADDITIONAL EMPLOYER _____ PHONE (____) _____

HR EMAIL _____ HR FAX (____) _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

POSITION _____ HOW LONG? _____ IF ADDITIONAL EMPLOYER, GROSS MONTHLY INCOME \$ _____

THE FOLLOWING INFORMATION IS SUBJECT TO CHANGE PRIOR TO EXECUTION OF RENTAL AGREEMENT.

THE FOLLOWING ARE MAXIMUM AMOUNTS. THE ACTUAL AMOUNT CHARGED WILL DEPEND ON UNIT SIZE, SCREENING RESULTS, AND OTHER FACTORS.

RENT

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 _____

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.)

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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 EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS? YES NO IF YES, DATE _____ MM/DD/YYYY

HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS? YES NO IF YES, DATE _____ MM/DD/YYYY

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 has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the applicant's credit, income, employment, 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 **Background Investigations, Inc.** PHONE **503-639-6000**

ADDRESS **7668 SW Mohawk St. Tualatin OR 97062**

EMAIL **applications@biinc.com**

If the application is approved, applicant will have **24** 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 applicant fails to occupy the unit. If applicant 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 applicant: _____ 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, APPLICANT 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 Owner/Agent may refuse to process or deny this application if it is materially incomplete, fails to include information regarding my identification or income, or if I intentionally withheld or misrepresented required information. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of tenancy. I understand that I am welcome to provide supplemental evidence to mitigate potentially negative screening results. Applicants may provide evidence of mitigating circumstances and requests for reasonable accommodation/modification to the following location for review, consideration and response:

I have received and read the Owner/Agent's rental criteria.

APPLICANT **X** _____ DATE _____ SUPPLEMENTAL EVIDENCE PROVIDED? YES NO

OWNER/AGENT **X** _____ SUPPLEMENTAL EVIDENCE RECEIVED? YES NO

PHOTO I.D. VERIFIED BY _____ (INITIALS) DATE RECEIVED _____ MM/DD/YYYY TIME RECEIVED _____

OWNER/AGENT NOTES _____

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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

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

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 | ጽሑፊዎች ለ ጽሑፊዎች ጽሑፊዎች ጽሑፊዎች

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.

CITY OF PORTLAND • STANDARD 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 Applicant is either approved or denied in compliance with all local, state and federal laws. Applicants are welcome to provide supplemental evidence to mitigate potentially negative screening results.

Applicants have 30 days to appeal denied applications, during which time they may correct, refute, or explain negative information forming the basis for the denial. Applicants 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 Applicants 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 applicant:
 - 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 applicant 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 applicant 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.
6. Applicants have the right to a refund of the screening charge paid in conjunction with this application and recover damages as set forth in ORS 90.295(5) and (6)(b).

INCOME CRITERIA

1. Monthly income must be 2 times the monthly stated rent*, or 2.5 times the monthly stated rent if the monthly rent amount is below the maximum monthly rent for a household earning no more than 80 percent of the median household income as published annually by the Portland Housing Bureau. https://www.multifamilynw.org/PHB_Rent_Income_Limits Income sources shall include, but are not limited to: wages, rent assistance (non-governmental only), and monetary public benefits and are based on the cumulative financial resources of all financially responsible applicants. Applicants failing to qualify under this section may, at Owner/Agent's discretion, be required to pay an additional security deposit in the amount of half a month's rent.

*If applicant will be using local, state or federal housing assistance as a source of income, "monthly stated rent" as used in this section means that portion of the rent that will be payable by applicant and excludes any portion of the rent that will be paid through the assistance program.

2. Twelve months of verifiable employment will be required if used as a source of income.
3. Applicants using self-employment income will have their records verified through the state corporation commission, and will be required to submit records to verify their income, which records may include the previous year's tax returns.

RENTAL HISTORY CRITERIA

1. Twelve months of verifiable contractual rental history from a current unrelated, third party landlord, or home ownership, is required. Less than twelve months verifiable rental history will require a security deposit not to exceed one and a half month's rent and/or qualified co-signer.
2. Three or more notices for nonpayment of rent within one year will result in denial of the application.
3. Three or more dishonored checks within one year will result in denial of the application.
4. Rental history reflecting any past due and unpaid balances to a landlord will result in denial of the application except for unpaid rent, including rent reflected in judgments or referrals of debt to a collection agency, that accrued on or after April 1, 2020, and before March 1, 2022.
5. Rental history including three or more noise disturbances or any other material non-compliance with the rental agreement or rules within the past two years will result in denial.

EVICTON HISTORY CRITERIA

Five years of eviction-free history is required except for general eviction judgments entered on claims that arose on or after April 1, 2020, and before March 1, 2022. Eviction actions that were dismissed or resulted in a judgment for the applicant or when the applicant has provided supplemental evidence proving that they suffered a job loss due to no fault of their own will not be considered. If your eviction was related to a non-behavioral issue, you may provide supplemental evidence as instructed herein and that information will be considered.

CREDIT CRITERIA

1. Negative credit scoring or adverse debt showing on consumer credit report may result in denial or require additional security deposits or acceptable cosigners.
2. Ten or more unpaid collections (not related to medical expenses) will result in denial of the application.

FAIR HOUSING LAWS

Landlord has a non-discrimination policy as required by federal, state or local law

and does not discriminate against any applicant because of the race, color, religion, sex, sexual orientation, gender identity, national origin, marital status, familial status or source of income of the applicant.

BANKRUPTCIES

Chapter 7 Bankruptcies filed within one (1) year of the application or current pending bankruptcies will result in a denial of the application. Any negative or adverse debt showing on a consumer credit report within the last two (2) years (not related to educational or medical expenses) that is reported following a bankruptcy, or multiple bankruptcy filings will result in denial of the application. Applicants with a current Chapter 13 bankruptcy may be approved if the bankruptcy is over 3 years old, in good standing, and no negative or adverse debts have been established since.

CRIMINAL CONVICTION CRITERIA

Upon receipt of the Rental Application and screening fee, Owner/Agent will conduct a search of public records to determine whether applicant 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), or pending charges that have not yet been adjudicated 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 applicant 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 Applicant 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 applicant, or any proposed occupant, has a Conviction, or pending charges that have not yet been adjudicated 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, applicant should do so. Otherwise, applicant 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, or pending charges that have not yet been adjudicated for any of the following, subject to the results of any review process, shall be grounds for denial of the Rental Application.

- a) Felonies involving: murder, manslaughter, arson, rape, kidnapping, child or other violent/predatory sex crimes or manufacturing or distribution of a controlled substance.
- b) Felonies not listed above involving: 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 applicant 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 the residents, the landlord or the landlord's agent, where the date of disposition has occurred in the last 7 years.
- c) Misdemeanors involving: drug related crimes, person crimes, sex offenses, domestic violence, violation of a restraining order, stalking, weapons, criminal impersonation, possession of burglary tools, financial fraud crimes, where the date of disposition has occurred in the last 5 years.
- d) Misdemeanors not listed above involving: theft, criminal trespass, criminal mischief, property crimes or any other crime if the conduct for which applicant 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 the residents, the landlord or the landlord's agent, where the date of disposition has occurred in the last 3 years.
- e) Conviction of any crime that requires lifetime registration as a sex offender, or for which applicant is currently registered as a sex offender, will result in denial.

Criminal Conviction Review Process.

Owner/Agent will engage in an individualized assessment of the applicant's, or other proposed occupant's, Convictions, or pending charges that have not yet been adjudicated if applicant has satisfied all other criteria (the denial was based solely on one or more Convictions) as required by local, state and federal law, and:

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

Landlord will also perform an individualized assessment if no supplemental information is received as required by any local, state or federal law.

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

How to apply

1. Fill out rental application completely
2. Pay \$50 application (we accept the follow forms of payment)
 - A. Exact cash
 - B. Check
 - C. Money order
 - D. Venmo (QR code below)
3. Copy of state or federally issued photo id

Applications can be emailed to jeffr@farrellrealty.com or submitted in person during business hours at 4772 N Lombard St., Portland, OR 97203.

Jeff Rhoades

@Jeff-Rhoades-10



venmo