

**Tagiugmiullu Nunamiullu Housing Authority (TNHA)**

P.O. Box 409  
Barrow, Alaska 99723

Phone: (907) 852-7150  
Fax: (907) 852-2038

**RENTAL APPLICATION**

Date:		Original:		Barrow application:	
Time:		Update:		Village application:	

**APPLICATION MUST BE COMPLETELY FILLED OUT**

Tenant Name:		Date of Birth:	
Social Security #		Physical address:	
Mailing Address:		How long?	
		Monthly Rent:	
Home Phone:		Work Phone:	
Co-Tenant Name:		Date of Birth:	
Social Security #		Physical address:	
Mailing Address:		How long?	
		Monthly Rent:	
Home Phone:		Work Phone:	

**OCCUPANT COMPOSITION**

**(Who will be living in the unit with Tenant and any Co-Tenant)**

Name of Occupant	Relationship to Tenant(s)	Social Security Number	Date of Birth

**TAGIUGMIULLU NUNAMIULLU HOUSING AUTHORITY DOES NOT ALLOW PETS**

**EMPLOYER (Do not leave this blank if employed)**

Employer:	Job title:
Address:	Supervisors name:
Length of employment:                      Years                      Months	Net monthly income: \$

**Other income or Salary not listed:**

Name	Received from	Address	Amount Monthly
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Name	Received from	Address	Amount Monthly
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Name	Received from	Address	Amount Monthly
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**CREDIT REFERENCES**

Name	Mailing Address

**PERSONAL REFERENCES**

Name	Contact Number and Mailing Address	Relationship

*References should not be related to you or part of the same household*

**NAME AND ADDRESS OF CURRENT LANDLORD**

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Name	PREVIOUS LANDLORDS	Mailing Address

**Does any occupant listed on the application own any land, homes or buildings**  Yes  No  
**Is it leased**  Yes  No **Location:** \_\_\_\_\_

Name of person to contact in case of an emergency: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Has any member of your household been sued for nonpayment of an account?  Yes  No  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you ever had your wages attached for moneys owed?  Yes  No If yes, please explain:  
\_\_\_\_\_

Have you ever been evicted?  Yes  No If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Has any member of your household listed in your application ever participated in the North Slope Borough Rental Program or TNHA Programs i.e.: Low Rent, Mutual Help, LIPP, etc?  Yes  No If yes, please provide dates and circumstances of leaving the program:  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently homeless or being evicted from your present home? Please describe your situation, the date you may be evicted, as well as the reasons you understand you may be evicted. If homeless, please describe where you have been living during the last 2 years.


Other comments:

1. Have you or any adult occupants been convicted (whether by plea of “guilty” or “no contest”, by a jury or a judge) for any felony?  yes  no
  
2. Are you or any adult occupant required to register as a “Sex Offender” under A.S.12.63.010?  
 yes  no
  
3. Are you or any adult occupant the subject of pending criminal charges (misdemeanor or felony) at this time?  
 yes  no
  
4. If you answered “yes” to questions 1, 2, or 3 above, please explain in detail (for each charge or conviction, if more than one) the charges or conviction, sentence received, whether the original charge involved allegations of violence, date of conviction, location of sentencing court, date you completed your sentence, probation status and any current conditions of release:


Use back of page or additional pages if needed to respond fully.

If I or any member of my proposed household has been required to register as a Sex Offender under A.S. 12.63.010, have been convicted of a felony, or are currently charged, I understand that TNHA may review relevant criminal records at its option. I agree to provide additional documents relating to convictions, and to provide or sign additional releases, if needed for TNHA to verify or research criminal history information.

I hereby authorize TNHA to inspect my current residential unit. I do ( ) do not ( ) authorize TNHA to contact my current landlord.

I hereby authorize TNHA to obtain a consumer credit report reflecting my credit history, through the Credit Bureau of Alaska.

**Eligibility for NAHASDA Programs.** *In addition to administering rentals that are available to all qualified applicants, TNHA administers federally-funded programs available primarily to low-income Alaska Native/Native American families and individuals. If you would like to be considered for a NAHASDA rental program, provide the following information below:*

Occupant Name	Name of Tribe / ANCSA Corporation (village or regional) /Village Affiliation

**NOTICE:** BY SIGNING THIS APPLICATION, EACH PERSON DECLARES THAT ALL OF THE RESPONSES ARE TRUE AND COMPLETE AND AUTHORIZE THE TAGIUGMIULLU NUNAMIULLU HOUSING AUTHORITY TO VERIFY INFORMATION AND OBTAIN A COPY OF THEIR CREDIT REPORT. ANY FALSE

STATEMENT MAY RESULT IN THE REJECTION OF AN APPLICATION OR IMMEDIATE TERMINATION OF A RENTAL AGREEMENT

**Every adult over the age of eighteen (18) years who will live in the residence must furnish all applicable information and sign this application.**

\_\_\_\_\_  
Signature of Tenant (Head)                      Date

\_\_\_\_\_  
Signature of Co-Tenant                      Date

\_\_\_\_\_  
Signature (Other Adult Occupant)      Date

\_\_\_\_\_  
Signature (Other Adult Occupant)      Date

\_\_\_\_\_  
Signature (Other Adult Occupant)      Date

\_\_\_\_\_  
Signature (Other Adult Occupant)      Date

Please notify TNHA if any of the information on this application changes.

*If you believe you have been discriminated against, or have questions about the laws regarding discrimination, contact the Alaska State Commission for Human Rights, at 1-800-478-4692.*