WORK FORCE HOUSING PROGRAM

RENTAL APPLICATION

Please review the qualifications for rental eligibility and complete the attached application.
You can drop off your application and information to
Coastal Community Development Corporation's office located at 1000 Main Street Suite100-B, Hilton Head
or email it to info@ccdc-sc.org.

You can also mail your application to our office at 1000 Main Street Suite100-B, Hilton Head SC 29926
Please note that applications that are sent via postal mail may take longer to receive a response.

Before submitting your application:

Did you remember to provide all documentation needed to process your application?
Did you remember to sign every space requesting a signature?

Coastal Community Development Corporation

843-715-4209 | info@ccdc.org

Please note that you will also be asked to complete our online process to run your background check and review your credit file.

EQUAL HOUSING OPPORTUNITY

Coastal Community Development Corporation

Application Requirements, Qualifications and Prioritization Please read through this document thoroughly. If you have any questions or are unsure of how to fulfill these requirements, please contact us at 843-715-4209.

Application Requirements

Every household member over the age of 18 must submit the following documents for qualification:

Most recent Federal tax return
Most recent pay stubs covering one (1) month and/or a letter from employer with employment and income verification
Most recent bank statements covering one (1) month
Copy of a State or Federal photo ID or Valid Passport

Qualifications and Prioritization

First priority is given to eligible households that have been or will be involuntarily displaced from the municipality or unincorporated county in which they resided or reside and work at a Local Business in, in which the available unit is located.

Second priority is given to eligible households that reside and work at a Local Business within the municipality or unincorporated county in which the available unit is located.

Third priority is given to eligible households that work at a Local Business within the municipality or unincorporated county in which the available unit is located.

Fourth priority is given to eligible households that reside and work at a Local Business within Beaufort or Jasper County, South Carolina.

Fifth priority is given to eligible households that work at a Local Business within Beaufort or Jasper County, South Carolina.

Local Business Definition

To qualify as a Local Business, the business must meet all of & 'A" below or all of "B'.

A.) (1) a business physically located within Beaufort or Jasper County, South Carolina, holding a business license with the Town of Hilton Head Island, Town of Bluffton, Town of Port Royal, Town of Hardeeville, Beaufort County or Jasper County, South Carolina or one that can provide other verification of business status physically located in Beaufort or Jasper County, South Carolina, and

(2) A minimum of seventy-five percent (75%) of the business' clients or customers are physically located in Beaufort or Jasper County, South Carolina, and (3) the employees/owners must work in Beaufort or Jasper County, South Carolina to perform their job. Or

B.) A business physically located in Beaufort or Jasper County, South Carolina who employs two or more Qualified Employees, which qualified employees must work in Beaufort or Jasper County, South Carolina to perform their job.

Beware of Fraud and Report Abuse

Beware of fraud schemes. Do not pay money to file an application or move up on the waiting list. It is best to get a receipt for any money you pay and get a written explanation of any money paid for anything other than rent (such as maintenance charges).
If you are aware of anyone who has falsified an application or f anyone lies to persuade you to make false statements, report them to Program Manager of the Coastal Community Development Corporation.

Notice of Records Check

Please note that the information provided will be used to determine rental eligibility. A credit rating, rental history and criminal background check will be conducted. Unfavorable credit rating scores will not automatically disqualify any applicant.

I have read and understand the preceding information:

Signature of Applicant:_____

Signature of Co-Applicant:_____

Coastal Community Development Corporation
WORKFORCE HOUSING APPLICATION
(Attach sheet for employment/income information for additional household members age 18 and older)

Applicant:_____ Co-Applicant:_____

Date of Birth:_____ Date of Birth: _____

Social Security Number: _____ Social Security Number: _____

Current Address:_____ Current Address: _____

City/St/Zip:_____ City/State/Zip: _____

Phone #:_____ Phone #: _____

Email: _____ Email: _____

Do you currently own your home? ☐ YES ☐ NO Do you currently own other property? ☐ YES ☐ NO

If YES, what are your plans with the home(s)? _____

SECTION I - GENERAL INFORMATION

Dependent(s)

Name	Age
1.	
2.	
3.	
4.	

Other Household Occupants

Name	Age
1.	
2.	
3.	
4.	

SECTION II. EMPLOYMENT INFORMATION

Applicant

Employer: _____

Supervisor: _____ Phone#: _____

Position: _____ Length of Employment: _____

Gross Annual Income: _____ Gross Monthly Income: _____

Employer: _____

Supervisor: _____ Phone#: _____

Position: _____ Length of Employment: _____

Co-Applicant

Employer: _____

Supervisor: _____ Phone#: _____

Position: _____ Length of Employment: _____

Gross Annual Income: _____ Gross Monthly Income: _____

Employer: _____

Supervisor: _____ Phone#: _____

Position: _____ Length of Employment: _____

I have read and understand the preceding information:

Signature of Applicant:_____

Signature of Co-Applicant:_____

SECTION III: RENTAL HISTORY INFORMATION

Applicant's Previous Rental History

Current Full Address, (City, State Zip):_____

Landlord Name / Mortgage Holder : _____

Monthly Payment : _____ Phone # _____E-Mail: _____

How Long? _____ Please check one _____ Own _____ Rent

Reason For Leaving: _____

Prior Full Address, (City, State Zip):_____

Landlord Name / Mortgage Holder : _____

Monthly Payment : _____ Phone # _____E-Mail: _____

How Long? _____ Please check one _____ Own _____ Rent

Reason For Leaving: _____

Co- Applicant's Previous Rental History

Current Full Address, (City, State Zip):_____

Landlord Name / Mortgage Holder : _____

Monthly Payment : _____ Phone # _____E-Mail: _____

How Long? _____ Please check one _____ Own _____ Rent

Reason For Leaving: _____

Prior Full Address, (City, State Zip):_____

Landlord Name / Mortgage Holder : _____

Monthly Payment : _____ Phone # _____E-Mail: _____

How Long? _____ Please check one _____ Own _____ Rent

Reason For Leaving: _____

_____ _____

Applicant's Signature Date Co-Applicant's Signature Date

Privacy Act Notice: The information contained in your application is to be used by Coastal Community Development Corporation or its assignees in determining whether you, the applicant, qualify as a prospective tenant under the Workforce Housing Program. The information obtained will not be disclosed outside this agency. You do not have to provide us with this information, but if you do not your application for approval as a prospective tenant may be delayed or rejected. The application will be used only to determine your household's eligibility for the Workforce Housing Program.

Information for Government Monitoring Purposes

The following information is requested in order to monitor compliance with federal statutes that prohibit discrimination in housing.
You are not required to provide this information, but are encouraged to do so.

Applicant	Co-Applicant
☐ I do not wish to provide this information	☐ I do not wish to provide this information
Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino	Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino
Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White or Caucasian	Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White or Caucasian
Sex: ☐ Female ☐ Male	Sex: ☐ Female ☐ Male