

## Exhibit E - City of Santa Clara - Preference Criteria Form

The City has established a priority system for allocating the limited number of affordable **rental units**. Priority shall be given to income eligible households/applicants who meet the City of Santa Clara Preference Criteria below. Please note the Preference Criteria will not be allowed if not permitted by state or federal law or other fair housing restrictions.

The preference system will be used to establish a ranking of applicants. Households that meet priority 1, will be reviewed first, then 2<sup>nd</sup> priority, so on so forth. Preferences will be evaluated at the time of opportunity drawing submission and verified prior to occupancy. If it's discovered that an applicant does not meet the preference or lacks evidence that they meet the preference, they will lose their priority ranking number.

PREFERENCE/PRIORITY CRITERIA	
1 <sup>st</sup> Priority Level <b>(Live AND Work)</b>	<p>At least one household member who <b>both</b> (lives and works)</p> <ul style="list-style-type: none"> <li>• Currently lives within the City Limits of the City of Santa Clara and for at least the past 6 months at the time of application</li> </ul> <p style="text-align: center;"><b>AND</b></p> <ul style="list-style-type: none"> <li>• Currently operates a business or is currently employed by a business or a public or quasi-public agency in the City of Santa Clara for at least the past 6 months at the time of application.</li> </ul>
2 <sup>nd</sup> Priority Level <b>(Lives)</b>	At least one household member who currently lives within the City Limits of the City of Santa Clara and for at least the past 6 months at the time of application.
3 <sup>rd</sup> Priority Level <b>(Works)</b>	At least one household member who currently operates a business or is currently employed by a business or a public or quasi-public agency in the City of Santa Clara and for at least the past 6 months at the time of application.
4 <sup>th</sup> Priority Level <b>(All others)</b>	Any other qualified applicant household without regard to residency or employment.
<b>Note:</b>	<ul style="list-style-type: none"> <li>• <i>The qualifying household member must be the person or a dependent of a person whose name will appear on the lease and who will use the unit as their primary residence.</i></li> <li>• <i>For residency and employment based preferences the person must currently meet the criteria and for at least the past 6 months at the time of application (drawing entry).</i></li> </ul>

**IMPORTANT:** In order to properly prioritize the applicants, the Property Manager and/or the Administrator requests documents/materials supplemental to the items listed on the Application Document Checklist. In order for the households to be considered for a City Preference you must submit the supplemental materials with the rental application. If the documentation requested on this application is not sufficient to prove you meet one of the Preferences categories, please make sure you include additional evidence/documentation. If you don't provide clear and substantial evidence/documentation with the application along with the Preference Criteria Form when you submit your Rental Application Package you will not be eligible for the Preference you claim to meet. Additional proof or clarification cannot be submitted or accepted separately; everything must be included in the packet when you submit it for review.

**I/We, certify that I/we meet the following preference/priority:**

- PRIMARY APPLICANT:                     1<sup>st</sup> Priority    2<sup>nd</sup> Priority    3<sup>rd</sup> Priority    4<sup>th</sup> Priority
- Co- APPLICANT:                         1<sup>st</sup> Priority    2<sup>nd</sup> Priority    3<sup>rd</sup> Priority    4<sup>th</sup> Priority
- Additional CO- APPLICANT:         1<sup>st</sup> Priority    2<sup>nd</sup> Priority    3<sup>rd</sup> Priority    4<sup>th</sup> Priority
- Dependent:                               1<sup>st</sup> Priority    2<sup>nd</sup> Priority    3<sup>rd</sup> Priority    4<sup>th</sup> Priority

**Exhibit E - City of Santa Clara - Preference Criteria Form – Continued**

Please see definitions on page 1	Questions	Answers	Supplemental Documentation Needed
<p><b>Preference/Priority 1</b></p> <p><b>LIVES AND WORKS</b></p>	<p>Does your household have at least one member who <b>both</b> (lives and works)</p> <p>Currently lives within the City Limits of the City of Santa Clara and for at least the past 6 months at the time of application</p> <p><b>AND</b></p> <p>Currently operates a business or is currently employed by a business or a public or quasi-public agency in the City of Santa Clara for at least the past 6 months at the time of application.</p> <p>If yes, who does?</p> <p><input type="checkbox"/> Full Name: _____</p>	<p>Please check one:</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p><b>If yes, please provide:</b></p> <p><input type="checkbox"/> Submit the last 6 months bills for two different utility bills with your physical address and name (e.g. PG&amp;E, Water or Cable).</p> <p><b>NOTE:</b> If your documentation has a PO Box and not your physical address you must also submit a copy of the application you filled out to obtain a PO BOX from the Post Office.</p> <p><input type="checkbox"/> Submit a letter from your employer, on company letter head verifying that you work within (inside) the city limits of the City of Santa Clara. It must be signed and dated by the HR Manager. It should reflect your start date and hours per week worked. If you are self-employed submit a copy of your business license for the current year.</p>

## Exhibit E - City of Santa Clara - Preference Criteria Form - Continued

Please see definitions on page 1	Questions	Answers	Supplemental Documentation Needed
<p><b>Preference/Priority 2</b></p> <p><b>LIVES</b></p>	<p>Does your household have a member who currently lives within the City Limits of the City of Santa Clara and for at least the past 6 months at the time of application?</p> <p>If yes, who does?</p> <p><input type="checkbox"/> Full Name: _____</p>	<p>Please check one:</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p><b>If yes, please provide:</b></p> <p><input type="checkbox"/> Submit the last 6 months bills for two different utility bills with your physical address and name (e.g. PG&amp;E, Water or Cable).</p> <p><b>NOTE:</b> If your documentation has a PO Box and not your physical address you must also submit a copy of the application you filled out to obtain a PO BOX from the Post Office.</p>
<p><b>Preference/Priority 3</b></p> <p><b>WORKS</b></p>	<p>Does your household have a member who currently operates a business or is currently employed by a business or a public or quasi-public agency in the City of Santa Clara and for at least the past 6 months at the time of application?</p> <p>If yes, who does?</p> <p><input type="checkbox"/> Full Name: _____</p>	<p>Please check one:</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<p><b>If yes, please provide:</b></p> <p><input type="checkbox"/> Submit a letter from your employer, on company letter head verifying that you work within (inside) the city limits of the City of Santa Clara. It must be signed and dated by the HR Manager. It should reflect your start date and hours per week worked. If you are self-employed submit a copy of your business license for the current year.</p>
<p><b>Preference/Priority 4</b></p> <p><b>ALL OTHERS</b></p> <p>Any other qualified applicant household without regard to residency or employment.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

Certifications on next page



## Exhibit E - City of Santa Clara - Preference Criteria Form – Continued

I/we certify under penalty of perjury that all of the information stated on this form is true and complete. I/we have made no misrepresentations, nor did I omit any pertinent information. I/we also understand that I/we must submit clear and substantial evidence with the application and the preference criteria form in order to be considered. No proof - No form - No Preference.

Date \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Signature \_\_\_\_\_

Co- Applicant Name: \_\_\_\_\_ Signature \_\_\_\_\_

Additional Applicant Name: \_\_\_\_\_ Signature \_\_\_\_\_

Additional Applicant Name: \_\_\_\_\_ Signature \_\_\_\_\_

Adult Household Member Name: \_\_\_\_\_ Signature \_\_\_\_\_

Adult Household Member Name: \_\_\_\_\_ Signature \_\_\_\_\_