

Thank you for your interest in Five Points Crossing, owned and managed by Woda Cooper Companies.

We are an income restricted, tax credit, multi-family community, opening Fall 2023. Our maximum income limits per household are below:

1 person household- \$28,140

2 person household- \$32,160

3 person household- \$36,180

4 person household- \$40,140

Located in Rocky Mount, NC, we currently have 1 and 2-bedroom apartments available. Each unit has 1 bathroom, washer/dryer connections, laminate flooring, ceiling fans, white appliances, and dark cabinetry.

Amenities include a community room, laundry center, business center, fitness center, and 24-hour emergency maintenance.

We are minutes from shopping, dining, and entertainment.

Application is not complete without the following:
Complete an application along with the \$35 money order or cashier's check application fee (per adult)
Birth Certificates for everyone in the household
Social Security cards for everyone in household
Valid photo ID for all adults
Proof of income (most recently dated)

Credit check- no landlord debt, evictions, or utility debt

We process credit, rental history, and criminal background as well as verification of income and assets (bank, retirement accounts, etc)

Please call (252)-382-9400 to make an appointment or email us at <u>fivepointscrossing@wodagroup.com</u>. We look forward to assisting you!

## **Rental Application**



Office Use Only Date Received Mgr. Initials			
Applicant Name			
Address	City_	State	Zip
Rent Own Live w	/Family How many days'	notice will you need to give? _	
Phone number(s)			
Email			
1br 2br 3b	r Floor level/preferer	nces (not guaranteed)	
How did you hear about us?			
Do you receive rental assistance	ce?From V	Vhom?	N/A
Last Name First Name [	M.I. Relationship Gender Soc to HOH	ial Sec # DOB ID#	/State Marital Student Status* Y/N
*Marital Status- Single, Married	, Divorced, Separated, Widowed		
Do you have a pet? Yes N	No		
INCOME INFO List all income received including Rental income, child support, gir	g employment, self-employmen ft income, or any other income.	t, social security, disability, pens	sions, VA, settlement income,
Source of Income	Amount	Per/Month/Week/Bi- weekly	Who Receives it?

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## **ASSET INFO**

List all assets, including any cash on hand, checking, savings, 401K, retirement accounts, whole life insurance, stocks, real estate, and any other assets.

Bank/Company Name	Type (listed above)	Cash Value	Who Owns it?
Will you require any reason	able accommodations?	Yes	No
If yes, how may we acc	ommodate you:		
status, age, and disability. I understands that the result	By signing below, the applicates of such background check	ant gives permission to pro could affect the approval o	e, color, national origin, religion, sex, familial cure a criminal/credit background check and of this application. All information provided is n result in denial of occupancy, or termination
Applicant Signature			Date
Co-applicant Signature			Date
Co-applicant Signature			Date
Co-applicant Signature			Date

