



DATE: _____ TIME: _____ PROPERTY NAME: GRANDVIEW HOMES

APPLICANT SIZE OF UNIT: ___ 2 BR (2-5 persons) ___ 3 BR (4-6 persons)

NAME: _____ SOCIAL SECURITY NUMBER: _____ - _____ - _____

CURRENT ADDRESS: _____ APT. NO. _____

CITY: _____ STATE: _____ ZIP CODE: _____ RACE/ETHNICITY OF HOH: _____

HOW LONG HAVE YOU LIVED AT THIS ADDRESS? _____ CURRENT RENT: _____

HOME PHONE NUMBER: _____ WORK PHONE NUMBER: _____ CELL NUMBER: _____

PREVIOUS ADDRESS: _____

LIST ANOTHER CONTACT PERSON: _____ CONTACT PHONE NO: _____

LIST EACH PERSON BELOW WHO WILL LIVE IN THE APARTMENT INCLUDING YOURSELF First Contact: _____ Source: _____

LAST NAME	FIRST NAME	BIRTH DATE	RELATIONSHIP TO YOU	SOCIAL SECURITY NUMBER (Required)	CURRENT ANNUAL INCOME (Required)
			Head of Household		

2. DOES ANYONE LIVE WITH YOU WHO IS NOT LISTED ABOVE? YES NO IF YES, EXPLAIN: _____

3. DOES ANYONE PLAN TO LIVE WITH YOU IN THE FUTURE WHO IS NOT LISTED ABOVE? YES NO IF YES, EXPLAIN: _____

4. DO YOU OR ANY MEMBER OF YOUR HOUSEHOLD HAVE ANY SPECIAL HOUSING NEEDS? YES NO IF YES, EXPLAIN: _____

5. LIST ALL ASSETS (HUD CLASSIFIES ASSETS AS FOLLOWS): CASH HELD IN SAVINGS AND CHECKING ACCOUNTS, SAFETY DEPOSIT BOXES, HOMES, ECT., TRUSTS EQUITY IN RENTAL PROPERTY OR OTHER CAPITAL INVESTMENTS, STOCKS, BONDS, TREASURY BILLS, CERTIFICATES OF DEPOSITS, MONEY MARKET FUNDS, IRA ACCOUNTS, KEOUGH ACCOUNTS, RETIREMENT AND PENSION FUNDS, LUMP SUM RECEIPTS SUCH AS INHERITANCES, ONE TIME LOTTERY WINNINGS, SETTLEMENTS ON INSURANCE, CAPTIAL GAINS, ECT., PERSONAL PROPERTY HELD AS AN INVESTMENT.

ASSET ACCT.# PLACE

6. HAVE YOU SOLD OR GIVEN AWAY REAL PROPERTY OR OTHER ASSETS WITHIN THE PAST TWO YEARS? YES NO IF YES, EXPLAIN _____

APPLICANT CERTIFICATION: I CERTIFY THAT THE ABOVE STATEMENTS MADE ON THIS PRE-APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF, I UNDERSTAND THAT PROVIDING FALSE STATEMENTS OR INCOMPLETE INFORMATION MAY RESULT IN FINES UP TO \$10,000 AND IMPRISONMENT FOR UP TO FIVE YEARS.

THIS PRE-APPLICATION IS SUBJECT TO APPROVAL AND DOES NOT CONSTITUTE AN AGREEMENT TO LEASE. ALL INFORMATION MUST BE VERIFIED BEFORE THE APPLICATION CAN BE PROCESSED. THIS PRE-APPLICATION IS ONLY TO ESTABLISH YOUR PLACE ON THE WAITING LIST. ONCE YOUR NAME IS AT THE TOP OF THE WAITING LIST, YOU MUST COMPLETE THE HUD APPLICATION WHICH ALSO DOES NOT CONSTITUTE AN AGREEMENT TO LEASE UNTIL ALL INFORMATION HAS BEEN VERIFIED AT WHICH TIME IT WILL BE PROCESSED.

I/WE OPERATE IN ACCORDANCE WITH THE FAIR HOUSING LAW. I/WE DO NOT DISCRIMINATE AGAINST ANY PERSON IN THE TERMS, CONDITIONS OR PRIVILEGES OF SALE OR RENTAL OF A SWELLING OR N THE PROVISIONS OF SERVICES OF FACILITIES IN CONNECTION THEREWITH, BECAUSE OF RACE, COLOR, SEX, HANDICAP, FAMILIAL STATUS OR NATIONAL ORIGIN.

THE NATIONAL AND STATE SEX OFFENDER REGISTER OR THE DRU SJODIN NATIONAL SEX OFFENDER PUBLIC WEBSITE WILL BE VERIFIED ON ALL HOUSEHOLD MEMBERS AGE 18 AND OLDER DURING THE ANNUAL RECERTIFICATION PROCESS.

The Pre-application must be signed by all adult household members 18 years and older.

HEAD OF HOUSEHOLD DATE ADULT HOUSEHOLD MEMBER DATE

ADULT HOUSEHOLD MEMBER DATE MANAGER DATE