Pre-Application for Housing: Sunset Pines

Disclaimer: Only **ONE** pre-application can be submitted per household and/or applicant. Members in one household cannot submit separate individual applications. Duplicate applications will not be accepted. This pre-application is used exclusively to establish a waiting list for this property **(Sunset Pines)** and is not considered a full or final application. Fill in all required fields (indicated by a red '*'). Incomplete applications will not be processed.

Household Member Information

The First Household member is always the Head of Household (HoH). Select the **"Add Household Member"** button for each additional household member.

Household Member 1

| Name * | | | | Relation t | to Head of Household * | | |
|---------------|----|------------------|-----------|----------------------|----------------------------|--|--|
| | | | | Head of Household | | | |
| First MI Last | | | | Spouse, Child, Other | | | |
| Email * | Co | ontact Phone # * | Alternate | e Phone # | Preferred Contact Method * | | |
| Address * | | | | | Phone, E-Mail, Postal Mail | | |
| | | | | | | | |
| | | | | | 7. 0. 1 | | |
| City | | State | | 2 | Zip Code | | |

If you are homeless, please provide a mailing address where you receive mail. If you do not have a mailing address, please select the appropriate contact method below.

| Ethnicity | Disabili | ty Status | Date of Birth * | SSN/ITIN * |
|---|-----------|--------------------------------------|------------------------|--|
| Hispanic, Non-Hispanic | Disabled, | Not Disabled | | |
| Race * □ American Indian or Alask | a Native | Asian Detail □ Asian India | | Pacific Islander Detail □ Native Hawaiian |
| □ Asian |] Asian | | | Guamanian or Chamorro |
| 🗆 Black or African American | | 🗆 Filipino | | □ Samoan |
| □ Native Hawaiian or Other Pacific | | □ Japanese | | Other Pacific Islander |
| Islander | ander | | | |
| □ White | | □ Vietnamese | | |
| □ Other | er | | | |
| Applicant Decline Acknow □ I do not wish to furnish in | | | y, race, disability or | other household composition. |
| Primary Language * | | Secondary Language | | |
| | | | | |

| Household Member 2 | | | | | |
|--|---|--|-------------|---|---|
| Name * | | | Re | elation to Head | l of Household * |
| | | | | | |
| First | MI I | Last | Sp | ouse, Child, Othe | r |
| Ethnicity | Disabilit | ty Status | Date of Bir | th * | SSN/ITIN * |
| | | | | | |
| Hispanic, Non-Hispanic | Disabled, | Not Disabled | | | |
| Race * □ American Indian or Alaska | a Native | Asian Detail □ Asian India | | | Islander Detail e Hawaiian |
| □ Asian | | □ Chinese | | 🗆 Guan | nanian or Chamorro |
| Black or African American | ı | 🗆 Filipino | | 🗆 Samo | ban |
| □ Native Hawaiian or Other | Pacific | □ Japanese | | □ Other | r Pacific Islander |
| Islander | | □ Korean | | | |
| □ White | | □ Vietnamese | | | |
| □ Other | | □ Other Asian | | | |
| Applicant Decline Acknow □ I do not wish to furnish inf | | | | - | usehold composition. |
| Primary Language * | | | Secondary | Language | |
| Primary Language * | | | Secondary | Language | |
| Primary Language * Household Member 3 Name * | | | | | l of Household * |
| Household Member 3 | | Last | Re | | |
| Household Member 3 Name * First | MI I | | Re | elation to Head | r |
| Household Member 3 Name * | MI I | Last ty Status | Re | elation to Head | |
| Household Member 3 Name * First | MI I Disabilit | | Re | elation to Head | r |
| Household Member 3 Name * First Ethnicity | MI I Disabilit Disabled, | ty Status | Re | elation to Head ouse, Child, Othe th * Pacific | r |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * | MI I Disabilit Disabled, | ty Status Not Disabled Asian Detail | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ | r SSN/ITIN * |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * C American Indian or Alaska | MI I Disabilit Disabled, | ty Status Not Disabled Asian Detail □ Asian India | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska | MI Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other | MI Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro ban |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other Islander | MI Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro ban |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other Islander White | MI Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean | Re | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro ban |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other Islander White | MI Disabilit Disabled, a Native Pacific | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian | Date of Bir | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo □ Other | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro ban r Pacific Islander |
| Household Member 3 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander White Other Applicant Decline Acknow | MI Disabilit Disabled, a Native Pacific | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian | Date of Bir | elation to Head ouse, Child, Othe th * Pacific □ Nativ □ Guan □ Samo □ Other | r SSN/ITIN * Islander Detail e Hawaiian nanian or Chamorro ban r Pacific Islander |

| Household Member 4 | ļ. | | | | | |
|--|---|--|--------------|--------------------------------|--|--|
| Name * | | | | Relation to | Head | of Household * |
| | | | | | | |
| First | MI | Last | | Spouse, Chil | d, Other | |
| Ethnicity | Disabilit | ty Status | Date of | Birth * | | SSN/ITIN * |
| | | | | | | |
| Hispanic, Non-Hispanic | Disabled, | Not Disabled | | | | |
| Race * □ American Indian or Alaska | a Native | Asian Detail □ Asian India | | | | slander Detail e Hawaiian |
| □ Asian | | □ Chinese | | |] Guam | anian or Chamorro |
| Black or African Americar | ı | 🗆 Filipino | | |] Samo | an |
| □ Native Hawaiian or Other | Pacific | □ Japanese | | |] Other | Pacific Islander |
| Islander | | □ Korean | | | | |
| □ White | | □ Vietnamese | | | | |
| □ Other | | □ Other Asian | | | | |
| Applicant Decline Acknow □ I do not wish to furnish inf | | | v, race, dis | ability or oth | ner hou | sehold composition. |
| Primary Language * | | | Second | ary Langua | ge | |
| | | | | | | |
| Household Member 5 | ; | | | | | |
| | | | | | | |
| Name * | | | | Relation to | o Head | of Household * |
| Name * | | | | Relation to |) Head | of Household * |
| Name * First | MI | Last | | Relation to | | |
| | | Last ty Status | Date of | Spouse, Chil | | |
| First | | | Date of | Spouse, Chil | | |
| First | Disabilit | | Date of | Spouse, Chil | | |
| First Ethnicity | Disabili Disabled, | ty Status | Date of | Spouse, Chil Birth * | d, Other | |
| First Ethnicity Hispanic, Non-Hispanic Race * | Disabili Disabled, | ty Status Not Disabled Asian Detail | Date of | Spouse, Chile Birth * Pa | d, Other acific I | SSN/ITIN * |
| First Ethnicity Hispanic, Non-Hispanic Race * □ American Indian or Alaska | Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail □ Asian India | Date of | Spouse, Chil Birth * Pa | d, Other acific I | SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other | Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese | Date of | Spouse, Chil Birth * Pa | d, Other acific I I Native I Guam I Samo | SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander | Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean | Date of | Spouse, Chil Birth * Pa | d, Other acific I I Native I Guam I Samo | SSN/ITIN * slander Detail e Hawaiian hanian or Chamorro an |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander White | Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese | Date of | Spouse, Chil Birth * Pa | d, Other acific I I Native I Guam I Samo | SSN/ITIN * slander Detail e Hawaiian hanian or Chamorro an |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander | Disabilit Disabled, a Native | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean | Date of | Spouse, Chil Birth * Pa | d, Other acific I I Native I Guam I Samo | SSN/ITIN * slander Detail e Hawaiian hanian or Chamorro an |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander White | Disabilit Disabled, a Native Pacific | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian | | Spouse, Chil Birth * | d, Other acific I I Native I Guam I Samo I Other | SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro an Pacific Islander |
| First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander White Other Applicant Decline Acknow | Disabilit Disabled, a Native Pacific | ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian | v, race, dis | Spouse, Chil Birth * | d, Other acific I I Native I Guam I Samo I Other | SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro an Pacific Islander |

Preferred Apartment Size

Apartment Choice 1 *

Available choices for Preferred Apartment Size are: 2 Bedroom

Household Information

Do you anticipate any household changes in the next 12 months? * O Yes O No By how many?

Anticipated changes may not qualify at move-in.

Household Income and Assets

List total combined gross income received from all sources by all members of the household. Show amount on annual (yearly) basis.

| COMBINED HOUSEHOLD INCOME FOR ALL HOUSEHOLD MEMBERS | ALL SOURCES (Include all sources of employment (gross) except self-employment (net), Social Security, SSI, pensions, interest and dividends, disability, unemployment, gift income, alimony and child support on an annual (yearly basis). | Annual Amount * |
|---|--|------------------|
| COMBINED HOUSEHOLD ASSETS FOR ALL HOUSEHOLD MEMBERS | ALL SOURCES (Include NET liquid assets such as Checking and Savings account balances, Life Insurance value, 401K, Real Estate Equity, Stocks, Bonds, Mutual Funds, etc.). | Value or Balance |

Community Resident Selection Preferences

This community may participate in programs requiring residency preferences. Preference eligibility will be verified prior to housing being offered.

Does any member of your household require a unit accessible to those living with specific disabilities?

O Yes O No

Please check all that apply *
□ Mobility □ Vision □ Hearing

Does any household member require a live-in attendant? *

Pre-Application Signature and Consent

- 1. To the best of my/our knowledge and belief, I/we certify that the foregoing information is true, complete and correct.
- 2. I/we certify that if selected to move into this property, the unit I/we occupy will be my/our only residence.
- 3. I/we understand that the above information is being collected to determine my/our eligibility for an apartment with rent below market rate.
- 4. I/we understand that adverse credit reports may disqualify my/our application for occupancy.
- 5. I/we understand that false statements or information are punishable under federal law.
- 6. I/we understand we must provide written notification of any changes to the information on this form, especially address changes.
- 7. I/we understand that this pre-application is solely to obtain a place on the waiting list for **Sunset Pines**. This pre-application does not guarantee the availability or act as an offer of housing.
- 8. I/we understand that the completion of a full application and participation in an eligibility interview that includes verification of the information provided must occur prior to an offer of housing.

| Signature of Head of Household * | Date |
|----------------------------------|----------|
| | 6/5/2024 |

Fair Housing Statement

MidPen Housing Management Corp. and its affiliates comply with the Fair Housing Act, the Rehabilitation Act of 1973 and the Fair Housing Act Amendments of 1988 prohibiting discrimination based on race, color, national origin, disability, sex, religion, and familial status and Title VI of the Civil Rights Act of 1964 prohibiting discrimination on the basis of disability in any program or activity receiving federal financial assistance. We do not discriminate and do not deny or limit services, terms, conditions, privileges or facilities based on race, color, creed, religion, sex, sexual orientation, age, disability, medical condition, marital status, familial status, source of income, national origin or gender, in any and all aspects of applicant/resident relations, including without limitation, accepting and processing applications, selecting residents from eligible applicants on the waiting list, assigning units, certifying and re-certifying eligibility for assistance, granting accommodation, and terminating tenancies.

