Pre-Application for Housing: Sundial

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 **(Sundial)** 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.

Name *		Relation to	Relation to Head of Household *		
		Head of Ho	lousehold		
First	Last	Spouse, Child, Other			
Email * C	ontact Phone # *	Alternate Phone #	Preferred Contact Method		
			Phone, E-Mail, Postal Mail		
Address *					
City	State	Zip	Code		
If you are homeless, please provide a	a mailing address wh	ere you receive mail. If y	ou do not have a mailing		
address, please select the appropriat	te contact method be	low.			
Ethnicity Disah	ility Status	Date of Rirth *	SSN/ITIN *		
Ethnicity Disab	ility Status	Date of Birth *	SSN/ITIN *		
	illity Status	Date of Birth *	SSN/ITIN *		
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			SSN/ITIN *
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		_	Native Hawaiian
□ Black or African American	☐ Chinese	☐ Guamanian or Chamorro	
	☐ Filipino	□ Samoan	
☐ Native Hawaiian or Other Pac	ific □ Japanese		Other Pacific Islander
slander	☐ Korean		
] White	☐ Vietnamese		
Other	☐ Other Asian		
Applicant Decline Acknowledg ☐ I do not wish to furnish informa Primary Language *	ement ation regarding ethnicit	y, race, disability or othe Secondary Languag	

Apartment Choice 1 *			
Available choices for Prefer	red Apartment Size are: Studio		
Household Inforn	nation		
Do you anticipate any houmonths? * O Yes O No Anticipated changes may not	sehold changes in the next 12 qualify at move-in.	By how many?	
Household Incom List total combined gross inc annual (yearly) basis.	ne and Assets come received from all sources by al	l members of the hou	usehold. Show amour
List total combined gross inc annual (yearly) basis.		es of employment et), Social Security, ds, disability,	usehold. Show amour Annual Amount *

Community Resident Selection Preferences This community may participate in programs requiring residency preferences. Preference eligibility will be verified prior to housing being offered.
Do you currently hold a Housing Choice Voucher? * ○ Yes ○ No
Please check all that apply * □ Mobility □ Vision □ Hearing

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 **Sundial**. 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.

Date

1/23/2025

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.

