#### Pre-Application for Housing: Sunset Creek

**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 Creek)** 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 to Head of Household *		
				Head of Ho	busehold
First	MI	Last		Spouse, Child	d, Other
Email *	C	Contact Phone # *		e Phone #	Preferred Contact Method *
					Phone, E-Mail, Postal Mail
Address *					
City		State		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	Disabilit	ty Status	Date of Birth *	SSN/ITIN *		
Hispanic, Non-Hispanic	Disabled,	Not Disabled				
Race * □ American Indian or Alask	a Native	<b>Asian Detail</b> □ Asian India		Pacific Islander Detail □ Native Hawaiian		
□ Asian		□ Chinese		Guamanian or Chamorro		
Black or African American	า	🗆 Filipino		□ Samoan		
□ Native Hawaiian or Other Pacific		□ Japanese		□ Other Pacific Islander		
Islander		□ Korean				
□ White		□ Vietnamese				
□ Other		□ Other Asian				
Applicant Decline Acknow			v, race, disability or	other household composition.		
Primary Language *			Secondary Lang	uage		

Household Member 2	2				
Name *				Relation to H	ead of Household *
First	MI	Last		Spouse, Child, C	Other
Ethnicity	Disabilit	ty Status	Date of E	Birth *	SSN/ITIN *
Hispanic, Non-Hispanic	Disabled,	Not Disabled			
Race * □ American Indian or Alaska	a Native	<b>Asian Detail</b> □ Asian India			<b>fic Islander Detail</b> ative Hawaiian
□ Asian		□ Chinese		□G	uamanian or Chamorro
Black or African Americar	r	🗆 Filipino		□ Sa	amoan
□ Native Hawaiian or Other	Pacific	□ Japanese		□ 0	ther Pacific Islander
Islander		□ Korean			
□ White		□ Vietnamese			
□ Other		□ Other Asian			
Applicant Decline Acknow □ I do not wish to furnish inf Primary Language *				ability or other I <b>ry Language</b>	household composition.
				, , , ,	
Household Member 3 Name *				Relation to H	ead of Household *
		Last		Relation to H	
Name *	MI I			Spouse, Child, C	Dther
Name *	MI I	Last <b>ty Status</b>	Date of E	Spouse, Child, C	
Name *	MI I Disabilit			Spouse, Child, C	Dther
Name * First Ethnicity	MI I Disabilit Disabled,	ty Status		Spouse, Child, C Birth * Paci	Dther
Name * First Ethnicity Hispanic, Non-Hispanic Race *	MI I Disabilit Disabled,	ty Status Not Disabled Asian Detail		Spouse, Child, C Birth * ₽aci □ Ni	Other SSN/ITIN *
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail □ Asian India		Spouse, Child, C Birth * Paci □ Ni □ G	Other SSN/ITIN * fic Islander Detail ative Hawaiian
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		Spouse, Child, C Birth * Paci □ N □ G □ Sa	Other SSN/ITIN * fic Islander Detail ative Hawaiian uamanian or Chamorro
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean		Spouse, Child, C Birth * Paci □ N □ G □ Sa	SSN/ITIN *
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese		Spouse, Child, C Birth * Paci □ N □ G □ Sa	SSN/ITIN *
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other Islander White Other Applicant Decline Acknow I I do not wish to furnish inf	MI Disabilit Disabled, a Native Pacific	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian	Date of E	Spouse, Child, C Birth * Paci □ Ni □ G □ Si □ O	SSN/ITIN *
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 E	Spouse, Child, C Birth * Paci □ N □ G □ Sa □ O	Other SSN/ITIN * fic Islander Detail ative Hawaiian uamanian or Chamorro amoan ther Pacific Islander

Household Member 4	Ļ				
Name *				Relation to H	ead of Household *
First	MI I	Last		Spouse, Child, C	Other
Ethnicity	Disabilit	ty Status	Date of E	Birth *	SSN/ITIN *
Hispanic, Non-Hispanic	Disabled,	Not Disabled			
Race * □ American Indian or Alaska	a Native	<b>Asian Detail</b> □ Asian India			<b>fic Islander Detail</b> ative Hawaiian
□ Asian		□ Chinese		🗆 Gi	uamanian or Chamorro
Black or African Americar	า	🗆 Filipino		🗆 Sa	amoan
□ Native Hawaiian or Other	Pacific	□ Japanese			ther Pacific Islander
Islander		□ Korean			
□ White		□ Vietnamese			
□ Other		□ Other Asian			
Applicant Decline Acknow □ I do not wish to furnish inf			y, race, disa	-	household composition.
Primary Language *			Seconda	ry Language	
Primary Language *			Seconda	ry Language	
Primary Language * Household Member 5	;		Seconda	ry Language	
	;				ead of Household *
Household Member 5 Name *				Relation to He	
Household Member 5		Last			
Household Member 5 Name *	MI I	Last ty Status		Relation to He	
Household Member 5 Name * First Ethnicity	MI I Disabilit	ty Status		Relation to He	Other
Household Member 5 Name * First	MI I Disabilit			Relation to He	Other
Household Member 5 Name * First Ethnicity	MI I Disabilit Disabled,	ty Status		Relation to He Spouse, Child, C Birth * Paci	Other
Household Member 5 Name * First Ethnicity Hispanic, Non-Hispanic Race *	MI I Disabilit Disabled,	ty Status Not Disabled Asian Detail		Relation to He Spouse, Child, C Birth * Paci □ Na	Other SSN/ITIN * fic Islander Detail
Household Member 5 Name * First Ethnicity Hispanic, Non-Hispanic Race * C American Indian or Alaska	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail □ Asian India		Relation to He Spouse, Child, C Birth * Paci □ Na □ Ge	Other SSN/ITIN * fic Islander Detail ative Hawaiian
Household Member 5 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		Relation to Ho Spouse, Child, C Birth * Paci □ Na □ Go □ Sa	Other  SSN/ITIN *  fic Islander Detail  ative Hawaiian  uamanian or Chamorro
Household Member 5 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean		Relation to Ho Spouse, Child, C Birth * Paci □ Na □ Go □ Sa	SSN/ITIN * SSN/ITIN * fic Islander Detail ative Hawaiian uamanian or Chamorro amoan
Household Member 5 Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African Americar Native Hawaiian or Other Islander White	MI Disabilit Disabled, a Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese		Relation to Ho Spouse, Child, C Birth * Paci □ Na □ Go □ Sa	SSN/ITIN * SSN/ITIN * fic Islander Detail ative Hawaiian uamanian or Chamorro amoan
Household Member 5 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		Relation to Ho Spouse, Child, C Birth * Paci □ Na □ Go □ Sa	SSN/ITIN * SSN/ITIN * fic Islander Detail ative Hawaiian uamanian or Chamorro amoan
Household Member 5 Name * 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	Date of E	Relation to He Spouse, Child, C Birth * Paci □ Na □ Gu □ Sa □ Ot	SSN/ITIN *
Household Member 5 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	Disabilit Disabled, a Native Pacific	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian	Date of E	Relation to He Spouse, Child, C Birth * Paci □ Na □ Gu □ Sa □ Ot	SSN/ITIN *

Household Member 6						
Name *				Relation to	Head	of Household *
First	MIL	_ast		Spouse, Child	d, Other	
Ethnicity	Disabilit	ty Status	Date of I	Birth *		SSN/ITIN *
Hispanic, Non-Hispanic	Disabled,	Not Disabled				
Race * □ American Indian or Alaska	a Native	<b>Asian Detail</b> □ Asian India				<b>slander Detail</b> e Hawaiian
□ Asian		□ Chinese			Guam	anian or Chamorro
Black or African American	1	🗆 Filipino			Samo	an
□ Native Hawaiian or Other	Pacific	□ Japanese			Other	Pacific Islander
Islander		□ Korean				
□ White		□ Vietnamese				
□ Other		□ Other Asian				
Applicant Decline Acknowl				ability or oth <b>Iry Langua</b> g		sehold composition.
			oooonae	ay Languag	90	
L						
Household Member 7 Name *		act				of Household *
Name *		_ast		Spouse, Child		
Name *		_ast t <b>y Status</b>	Date of I	Spouse, Child		
Name * First Ethnicity	Disabilit		Date of I	Spouse, Child		
Name * First Ethnicity	<b>Disabilit</b> Disabled,	ty Status	Date of I	Spouse, Child Birth * Pa	d, Other	
Name * First Ethnicity Hispanic, Non-Hispanic Race *	<b>Disabilit</b> Disabled,	ty Status Not Disabled Asian Detail	Date of B	Spouse, Child Birth * Pa	d, Other acific I	SSN/ITIN *
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska	Disabilit Disabled, Native	ty Status Not Disabled Asian Detail □ Asian India	Date of I	Spouse, Child Birth * Pa	d, Other acific I	SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska	Disabilit Disabled, A Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese	Date of I	Spouse, Child Birth * Pa	d, Other acific I Native Guam	SSN/ITIN * slander Detail e Hawaiian aanian or Chamorro
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other	Disabilit Disabled, A Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean	Date of I	Spouse, Child Birth * Pa	d, Other acific I Native Guam	SSN/ITIN * slander Detail e Hawaiian hanian or Chamorro an
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American Native Hawaiian or Other Islander	Disabilit Disabled, Native	ty Status Not Disabled Asian Detail Asian India Chinese Filipino Japanese Korean Vietnamese	Date of B	Spouse, Child Birth * Pa	d, Other acific I Native Guam	SSN/ITIN * slander Detail e Hawaiian hanian or Chamorro an
Name * First Ethnicity Hispanic, Non-Hispanic Race * American Indian or Alaska Asian Black or African American 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	v, race, dis	Spouse, Child Birth * Pa	d, Other acific I Native Guam Samo Other	SSN/ITIN * slander Detail e Hawaiian eanian or Chamorro an Pacific Islander

## **Preferred Apartment Size**

Apartment Choice 1 \*

Available choices for Preferred Apartment Size are: 3 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	<b>ALL SOURCES (</b> 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.

Do you currently hold a Housing Choice Voucher? \*  $\odot$  Yes  $\ \odot$  No

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? \* O Yes O No

### **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 Creek**. 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
	5/1/2024

## **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.

