RENTAL HOUSING APPLICATION

Please select the affordable housing developments you would like to apply for. Pay close attention to the number of bedrooms offered as they differ between the housing developments. Only apply for housing developments that meet the number of bedrooms needed. At the end of the application, be sure to sign the Applicant’s Certification for each affordable housing development you have selected.

☐ Borinquen Bella
  - 1, 2 & 3 Bedrooms
  - No Pets

☐ Madres Unidas
  - 2 & 3 Bedrooms
  - Accessible Units
  - No Pets

☐ Tierra Linda
  - 1, 2 & 3 Bedrooms
  - Accessible Units
  - No Pets

☐ Humboldt Park Residence
  - Studios Only
  - Accessible Units
  - No Pets

FOR OFFICE USE ONLY

Date Applied: ___________________________       Annual Income: $__________________________
Wait List #: _____________________________       Interviewed By: ___________________________
Ward: ____________________________________       Approved By: ____________________________

DO NOT LEAVE ANY LINES BLANK. IF NOT APPLICABLE, WRITE N/A.

Applicant’s Name: ____________________________ | Co-Applicant’s Name: ____________________________
Telephone: ____________________________ | Telephone: ____________________________
Cell Phone: ____________________________ | Cell Phone: ____________________________
Email: ____________________________ | Email: ____________________________

THIS APPLICATION IS FOR:

____ 0-Studio      ____ 1-BR Apartment      ____ 2-BR Apartment      ____ 3-BR Apartment

_____ Do you require a unit for any special needs? (Sect. 504, hearing and/or visual impaired, other)

Is there anything you’d like us to know about your special needs? ____________________________

____________________________________________________________________________________

_____ Do you have a car?     Year: __________ Make: __________ Model: __________

Year: __________ Make: __________ Model: __________
HOUSEHOLD INFORMATION:

Complete the table below beginning with yourself and listing all other people who will live with you in the apartment.

<table>
<thead>
<tr>
<th>NAME</th>
<th>DATE OF BIRTH</th>
<th>SSN OR ITIN</th>
<th>M/F</th>
<th>RELATION TO HEAD OF HOUSEHOLD</th>
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How did you hear about LUCHA? ________________________________________________________________

_____________________________________________________________________________________

Why do you wish to move at this time? _______________________________________________________________________________________

_____________________________________________________________________________________

HOUSING HISTORY:

Applicant’s Present Address: ____________________________ Co-Applicant’s Present Address: ____________________________

____________________________________________________________________________________

Landlord: ____________________________ Landlord: ____________________________

Landlord’s Phone: ____________________________ Landlord’s Phone: ____________________________

How long have you lived there? ____________________________ How long have you lived there? ____________________________

Monthly Rent: $__________________________ Monthly Rent: $__________________________

Monthly gas and electric cost: $__________________________ Monthly gas and electric cost: $__________________________

Previous Address: ____________________________ Previous Address: ____________________________

Previous Landlord: ____________________________ Previous Landlord: ____________________________

Landlord’s Phone: ____________________________ Landlord’s Phone: ____________________________
**HOUSING HISTORY CONTINUED:**

<table>
<thead>
<tr>
<th>How long did you live there?</th>
<th>How long did you live there?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Rent: $___________</td>
<td>Monthly Rent: $_____________</td>
</tr>
<tr>
<td>Monthly gas and electric cost: $________</td>
<td>Monthly gas and electric cost: $_____________</td>
</tr>
<tr>
<td>Reason for moving: ________________________________</td>
<td>Reason for moving: ________________________________</td>
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</tbody>
</table>

**IF YOU OWN YOUR OWN HOME:**

<table>
<thead>
<tr>
<th>Monthly Mortgage: $___________</th>
<th>Balance on Mortgage: $___________</th>
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<tbody>
<tr>
<td>Real Estate Taxes Per Year: $___________</td>
<td>Insurance Premium Per Year: $___________</td>
</tr>
<tr>
<td>Monthly Gas &amp; Electric Cost: $___________</td>
<td>Other Expenses: ________________________________</td>
</tr>
</tbody>
</table>

**OTHER REAL ESTATE YOU MAY OWN:**

<table>
<thead>
<tr>
<th>Description and Address:</th>
<th>Current Market Value: $___________</th>
<th>Balance Due on Mortgage: $___________</th>
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</table>

**What are your plans for the Real Estate if you move to one of our apartments?**

<table>
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<tr>
<th>Have you given away, sold any property or other assets in the past two years?</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>If yes, please describe:</td>
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</table>

**INCOME AND ASSETS:**

Our housing program requires you to be income eligible as defined by published guidelines. In order to determine your eligibility, it is necessary for you to provide the following information related to your income and assets. This information will be verified at the time your name comes up on the waiting list.

Be sure to include all sources of income that may include, but not be limited to: Wages, SSI, SSDI, Veteran’s Benefits, Survivor’s Benefits, Other Pensions, AFDC, General Relief, Aid to the Blind, Alimony, Child Support, Unemployment Compensation, Worker’s Compensation, etc.

<table>
<thead>
<tr>
<th>Applicant’s Employer:</th>
<th>Co-Applicant’s Employer:</th>
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<tr>
<td>Address:</td>
<td>Address:</td>
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</table>
INCOME AND ASSETS CONTINUED:

Phone: __________________________________________ | Phone: __________________________________________

Title/Position: ____________________________________ | Title/Position: ____________________________________

Length of Employment: ____________________________ | Length of Employment: ____________________________

Complete the table below beginning with yourself and listing all other people who will live with you in the apartment.

<table>
<thead>
<tr>
<th>NAME</th>
<th>SOURCE OF INCOME</th>
<th>WEEKLY, MONTHLY, BI-MONTHLY</th>
<th>ANNUAL GROSS AMOUNT</th>
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</table>

List all checking and savings accounts, retirement plans, mutual funds, certificates of deposit, etc. in the table below:

<table>
<thead>
<tr>
<th>NAME</th>
<th>FINANCIAL INSTITUTION</th>
<th>CURRENT BALANCE</th>
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</table>

List any Stocks and Bonds that you own:

Name of Stock: ____________________________________   Number of Shares: __________________

Value: $___________________________________________  Annual Income: $_____________________
CREDIT REFERENCES:

For Applicant

Name: ________________________________
Address: _______________________________________
________________________________________________
Account Number: ________________________________

For Co-Applicant

Name: ________________________________
Address: _______________________________________
________________________________________________
Account Number: ________________________________

PERSONAL REFERENCE:

For Applicant

Name: ________________________________
Phone: ________________________________
Relationship: ___________________________

For Co-Applicant

Name: ________________________________
Phone: ________________________________
Relationship: ___________________________

EMERGENCY CONTACT:

If we are unable to reach you, please list a person we may contact.

For Applicant

Name: ________________________________
Address: _______________________________________
________________________________________________
Phone: ________________________________
Relationship: ___________________________

For Co-Applicant

Name: ________________________________
Address: _______________________________________
________________________________________________
Phone: ________________________________
Relationship: ___________________________
ELIGIBILITY FOR PREFERENCE STATUS:

The following information will need to be verified prior to the offer of an apartment.

Please check any and all categories that apply to your situation:

_____ Displaced from an urban renewal area.

_____ Displaced by a disaster, such as a fire or flood, that resulted in extensive damage or has destroyed the unit.

_____ Displaced by an activity carried on by an agency of the United States or by any State or local government body or agency.

Is there any additional information you would like us to know about your situation? __________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

Please note that completion of this section is optional. The Federal Government requires that we obtain the following information in order to monitor the owner’s compliance with Equal Housing Opportunity and Fair Housing laws. The law provides that an applicant may not be discriminated against on the basis of the information supplied below or whether or not the information is furnished.

For Applicant

Race: □ American Indian or Alaskan Native □ Asian □ Black or African American □ White □ Native Hawaiian or Other Pacific Islander

Ethnicity: □ Hispanic or Latino □ Non-Hispanic or Non-Latino

Marital Status: □ Married □ Separated □ Unmarried □ Widowed □ Divorced

Highest Education Level: □ No High School Diploma □ High School Diploma □ GED Diploma □ Vocational Certificate □ Some College-Never Completed □ Associate’s Degree □ Bachelor’s Degree □ Master’s Degree □ Doctoral Degree

Do you have a disability? □ Yes □ No

Are you a U.S. Veteran? □ Yes □ No

Are you a Union member? □ Yes □ No

For Co-Applicant

Race: □ American Indian or Alaskan Native □ Asian □ Black or African American □ White □ Native Hawaiian or Other Pacific Islander

Ethnicity: □ Hispanic or Latino □ Non-Hispanic or Non-Latino

Marital Status: □ Married □ Separated □ Unmarried □ Widowed □ Divorced

Highest Education Level: □ No High School Diploma □ High School Diploma □ GED Diploma □ Vocational Certificate □ Some College-Never Completed □ Associate’s Degree □ Bachelor’s Degree □ Master’s Degree □ Doctoral Degree

Do you have a disability? □ Yes □ No

Are you a U.S. Veteran? □ Yes □ No

Are you a Union member? □ Yes □ No
BACKGROUND & CREDIT CHECK AUTHORIZATION:

I/We, ____________________________________________________________, authorize

The Landlord/Manager/Agent:

☐ Borinquen Bella LP
☐ Madres Unidas LP
☐ Tierra Linda LP
☐ HPR Preservation LP

to check my/our background and credit references as needed to comply with tenant eligibility procedures. I/We fully understand that I/We may have to pay a fee of $30.00 per adult for the background and credit check fees. It is a nonrefundable fee.

Applicant Signature: _______________________________ Date: ________________________________

Date of Birth: __________________________ SSN/ITIN: ________________________________

Co-Applicant Signature: _______________________________ Date: ________________________________

Date of Birth: __________________________ SSN/ITIN: ________________________________
APPLICANT’S CERTIFICATION:

Please read each item below carefully before you sign.

1. I hereby certify that the information provided in this application is correct to the best of my knowledge.

2. I understand that this is a preliminary application and the information provided does not guarantee housing. Additional information and verifications may be necessary to complete the application process.

3. I hereby give (managing agent) authorization to verify the information in this application.

4. WARNING: Section 1001 of the Title 1B of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the U.S. as to any matter within its jurisdiction. It is a criminal offense to make willfully false statements or misrepresentations on this preliminary application and may be grounds for denying residency.

_________________________________________  ______________________________
Applicant’s Signature                        Date

_________________________________________  ______________________________
Co-Applicant’s Signature                     Date
Madres Unidas

APPLICANT’S CERTIFICATION:

Please read each item below carefully before you sign.

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_______________________________________________  _________________________
Applicant’s Signature                              Date

_______________________________________________  _________________________
Co-Applicant’s Signature                           Date

EQUAL HOUSING OPPORTUNITY
Tierra Linda

APPLICANT’S CERTIFICATION:

Please read each item below carefully before you sign.

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_______________________________________________  ______________________
Applicant’s Signature                      Date

_______________________________________________  ______________________
Co-Applicant’s Signature                   Date
Humboldt Park Residence

APPLICANT’S CERTIFICATION:

Please read each item below carefully before you sign.

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_______________________________________________  _________________________
Applicant’s Signature                                                Date

_______________________________________________  _________________________
Co-Applicant’s Signature                                           Date

EQUAL HOUSING OPPORTUNITY