

PRE-APPLICATION

East Tawas Housing Commission
304 W. Bay St.
East Tawas, MI 48730
989 362 4963-Fax 989 362 0225

Date:\_\_\_\_\_ We only have One Bedroom units, is this sufficient ?Yes \_\_\_\_\_ No\_\_\_\_\_
Is a barrier free unit needed? Yes\_\_\_\_\_ No\_\_\_\_\_ Do you need an assistance animal? Yes\_\_\_\_\_ No\_\_\_\_\_
Would you require a live-in Aide? Yes\_\_\_\_\_ No\_\_\_\_\_

Applicant's Full Name\_\_\_\_\_
Present Address \_\_\_\_\_ City \_\_\_\_\_
State\_\_\_\_\_ Zip code \_\_\_\_\_ Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_
Driver's License # \_\_\_\_\_

Co-Applicant's Full Name\_\_\_\_\_
Present Address \_\_\_\_\_ City \_\_\_\_\_
State\_\_\_\_\_ Zip code \_\_\_\_\_ Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_
Driver's License # \_\_\_\_\_

Income: (Please fill in accurate monthly total received)

Social Security\_ \$ \_\_\_\_\_ Pension\_ \$ \_\_\_\_\_ Annuities \_ \$ \_\_\_\_\_ Wages/Salary\_ \$ \_\_\_\_\_ SSI\_ \$ \_\_\_\_\_
Disability\_ \$ \_\_\_\_\_ Workman's Compensation\_ \$ \_\_\_\_\_ Unemployment \_ \$ \_\_\_\_\_ Welfare Assistance\_ \$ \_\_\_\_\_
Alimony/Child Support\_ \$ \_\_\_\_\_ Trust Fund\_ \$ \_\_\_\_\_ Money/Gifts Given Regularly\_ \$ \_\_\_\_\_
Other Income received monthly that is not previously listed \_ \$ \_\_\_\_\_ (Explain)

Assets: (Please fill in accurate balance totals/estimate value as of today's date)

Savings\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Checking\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Certificate of Deposit\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Stocks\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Bonds\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Securities\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Land Contract/Rental\_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Safety Deposit Box \_ \$ \_\_\_\_\_ Name & Address \_\_\_\_\_
Cash\_ \$ \_\_\_\_\_ Coin Collection\_ \$ \_\_\_\_\_ (value) Other\_ \$ \_\_\_\_\_
Do you own Property/Real Estate? \_\_\_\_\_ if so, what is the value of the property/real estate \_ \$ \_\_\_\_\_

Has the Applicant ever been evicted? Yes\_\_\_\_\_ No\_\_\_\_\_ Has the Co-Applicant ever been evicted? Yes\_\_\_\_\_ No\_\_\_\_\_
Is the Applicant a citizen of the United States? Yes\_\_\_\_\_ No\_\_\_\_\_ Is the Co-Applicant a citizen of the United States?
Yes\_\_\_\_\_ No\_\_\_\_\_ If not, do you have an Alien Registration Card? Yes\_\_\_\_\_ No\_\_\_\_\_

If you presently rent, what is your monthly rent \$ \_\_\_\_\_ Utilities \$ \_\_\_\_\_

Due to a long waiting list, I understand that this is a short version of the regular application. The total application process
will be completed once my name/application moves up the waiting list. This pre-application does not bind either party.
When signing my name below I attest:

- (a) the above information is correct, true and complete to the best of my knowledge.
  - (b) I give permission to the East Tawas Housing Commission to inquire and verify any information that has been provided by the Applicant or Co-Applicant.
  - (c) I give permission to the East Tawas Housing Commission to inquire about my Credit History.
  - (d) I give permission to the East Tawas Housing commission to conduct a Criminal Background History, such as drug convictions, gun possession convictions, felony convictions, fraud involvement (false information to landlord/creditor), alcoholism, vandalism, prostitution, misdemeanor convictions, continual arrest record and negative behavior in the community.
  - (e) I have received the HUD Fact booklet.
  - (f) I have received the "Think about this.....is fraud worth it?" sheet.
- A final decision on eligibility cannot be made until all verifications are complete.  
Federal Law prohibits the East Tawas Housing Commission from discriminating against individuals with disabilities.

Application Signature \_\_\_\_\_  
 Co-Applicant Signature \_\_\_\_\_  
 Date \_\_\_\_\_

Management Signature \_\_\_\_\_  
 Date \_\_\_\_\_

***CHECK LIST BEFORE SUBMITTING***

**Applicant & Co-Applicant MUST SUPPLY copies of the following items when submitting application. If information is not complete, or is not sufficient in order to determine eligibility, the application will be rejected. Please make sure you have fulfilled all requirements needed. Thank you.**

- \_\_\_\_\_ Copy of Social Security Card
- \_\_\_\_\_ Copy of Benefit Letter from Social Security, SSI or State SSI OR Proof of income from other sources (items such as, but not limited to; pension, wages, rent received, interest on stocks/bonds, savings, annuities, workman's compensation, unemployment, trust fund, alimony)
- \_\_\_\_\_ Copy of Driver's License or State ID
- \_\_\_\_\_ Signature of Applicant & Co-Applicant on appropriate lines of application.
- \_\_\_\_\_ Copy of Birth Certificate.

Applicant & Co-Applicant Comments, requests or concerns:

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**FOR OFFICE USE ONLY**

Application received by Mail \_\_\_\_\_ In Person \_\_\_\_\_ By Fax \_\_\_\_\_  
 Date & Time Received \_\_\_\_\_ Received by \_\_\_\_\_