



THE RESURRECTION PROJECT

Pre-application for Rental Apartment

YOUR CONTACT INFORMATION

Name _____

Home phone: (_____) _____

Address: _____

Cell phone: (_____) _____

City, State, ZIP: _____

Work phone: (_____) _____

E-mail: _____

Other phone: (_____) _____

UNIT TYPE & LOCATION

Unit size preferred: Studio 1 Bedroom 2 Bedroom 3 Bedroom 4 Bedroom

Do you require an apartment with special accommodations? Yes No If yes, which type of accommodation? _____

Please indicate in which area(s) or building(s) you are interested in applying.

Pilsen (all buildings)

- 2015 S. Morgan^A
- 963 W. Cullerton^A
- 967 W. 19th St.^A
- 2014 S. Racine^A
- 1648 S. Throop St.^A
- 1313 W. 19th St.^A
- 1427 W. Cullerton^A
- 1712 W. 17th St.^A
- 1714 W. 19th St.^A
- 2124 W. 19th St.^A
- 2012 W. 17th St.^A

Back of the Yards (all buildings)

- 4600 S. Wood St.^A
- 1234 W. 49th Pl.^B
- 1825 W. 45th St.^B
- 4440 S. Honore St.^B
- 4528 S. Hermitage Ave.^B
- 4610 S. Wood St.^B
- 4637 S. Honore St.^B
- 4716 S. Throop St.^B
- 4742 S. Elizabeth St.^B
- 5031 S. Hermitage Ave.^B
- 4744 S. Loomis Blvd.^B
- 4848 S. Ashland Ave.^B
- 4859 S. Throop St.^B
- 4937 S. Seeley Ave.^B
- 4949 S. Justine St.^B
- 5011 S. Elizabeth St.^B

You will be considered for openings in those that are marked.

^A Uses A limits on page 4 to determine maximum income city limit.

^B Uses B limits on page 4 to determine maximum income IHDA limit.

Little Village (all buildings)

- 2243 S. Central Park Ave.^A
- 2700 S. Drake^A
- 2301 S. Drake^A
- 1910 S. Albany^A

Senior Housing in Pilsen*

- Casa Maravilla - 2021 S. Morgan^A

* The head of household or spouse must be at least 55 years of age. All other household members must be at least 45 years old.

INCOME & HOUSEHOLD MEMBERS

All household members over the age of 18 who receive income, **must attach copies of their proof of income for the most recent 3 months.** Income can include any of the following sources, plus others:

- Employment Child Care Public Assistance SSI/ SSDI Veterans Benefits Alimony Pensions
- Child Support Military Pay Section 8/Subsidy Workers Compensation Money from family/others
- Other: _____ **Additional documents:** Copy of: Birth Certificates (All), Social Security Cards (All), ID (Adults only)

| <u>List all occupants that will live in the apartment</u> | <u>Age</u> | <u>Type of Income Received</u> | <u>F-T Student (Y/N)</u> |
|---|------------|--------------------------------|--------------------------|
| 1) _____ | _____ | _____ | _____ |
| 2) _____ | _____ | _____ | _____ |
| 3) _____ | _____ | _____ | _____ |
| 4) _____ | _____ | _____ | _____ |
| 5) _____ | _____ | _____ | _____ |
| 6) _____ | _____ | _____ | _____ |

Use another sheet if more space is needed

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The Resurrection Project
Property Management Office
2014 S. Racine Ave. Chicago, Illinois 60608

Tel. 312-248-8355 Fax 312-264-0680
TDD Eng. 800-855-2880 Esp. 800-501-0864





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How did you hear about The Resurrection Project Apartments?

- Television Newspaper Church/Mosque/Temple Community Organization
- Fair/Seminar Friend/Family TRP Client or Tenant Laundromat
- Sign/Billboard Flyer HUD City of Chicago CHAC/Section 8
- www.ResurrectionProject.org www.PilsenPortal.org Other website

Please provide the name or location of the referral source: _____

Race & Ethnicity Data (Optional)
Your response is optional and has no bearing on your eligibility.

- Non-Hispanic White
- Asian/Pacific Islander
- Native American/Alaskan
- Non-Hispanic Black/African-American
- Hispanic/Latino (any race)
- Other

In your current apartment, what is ...

Your Monthly rent: \$ _____
 # of bedrooms: _____
 Is Gas Included in rent? YES / NO
 Is electricity included? YES / NO

OFFICE USE ONLY

DATE

Completion of this Pre-Application does not guarantee an apartment, but is used to determine income eligibility. You will receive a letter in the mail informing you of your income eligibility.

CERTIFICATION: The information provided on this pre-application form is complete and true to the best of my knowledge. I understand that withholding or providing inaccurate information may lead to denial of this pre-application, to eviction (if falsehood is discovered after move-in), or to criminal prosecution. I understand that admission to this site is conditioned upon eligibility criteria set forth by federal law and rules and by this site's resident selection plan. I understand that, should I be accepted for admission, I must not maintain any other residence anywhere after move in.

Signature: _____

Date: _____

The Resurrection Project is an equal housing opportunity provider. We do not discriminate on the basis of race, color, national origin, sex, disability, religion, ancestry, sexual orientation, marital status, parental status, military discharge status, or source of income.

Denise Reyes has been designated to coordinate compliance with the nondiscrimination requirements of the Rehabilitation Act of 1973 contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR Part 8 dated June 2, 1988). You may contact her at the telephone or TDD listed below if you feel that you may have been discriminated against on the basis of disability.

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EQUAL HOUSING
OPPORTUNITY



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PRE-APPLICANT PREFERENCE STATUS

An *eligible* applicant who qualifies for a preference will receive housing before any other applicant who is not so qualified. Applicants with a verified preference take precedence over other applicants' place on the Waiting List, or date of submission of application. Please check any applicable preference (s).

1. Current Tenant Preferences (for federally assisted housing programs of The Resurrection Project - TRP)

I am currently a tenant in a TRP apartment and requesting a transfer because of:

- A. A unit transfer because of household size.
- B. A unit transfer based on the need for an accessible unit.
- C. A unit transfer of a non-handicapped individual living in a handicapped accessible unit to accommodate a handicapped applicant on the Waiting List. A lease addendum will be entered into with the non-handicapped tenant living in a handicapped accessible unit.

2. State Preferences - (per Sec. 10 and 11 of 20 ILCS 3805)

I was displaced from my previous residence as stated below:

- A. Displaced from an urban renewal area - _____
- B. Displaced as the result of a major disaster, such as a fire or flood, that resulted in extensive damage or has destroyed the unit - FEMA Vouchers
- C. Displaced by an activity carried on by an agency of the United States or by any State or local government body or agency - _____

3. Federal Preferences - (HUD pre-approved Community Preference)

I live and/or work in the following Chicago Community Area (s):

- | <u>Live</u> | <u>Work</u> | |
|--------------------------|--------------------------|--------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | 30-South Lawndale |
| <input type="checkbox"/> | <input type="checkbox"/> | 31-Lower West Side |
| <input type="checkbox"/> | <input type="checkbox"/> | 34-Armour Square |
| <input type="checkbox"/> | <input type="checkbox"/> | 35-Douglas |
| <input type="checkbox"/> | <input type="checkbox"/> | 37-Fuller Park |
| <input type="checkbox"/> | <input type="checkbox"/> | 39-Grand Boulevard |
| <input type="checkbox"/> | <input type="checkbox"/> | 59-McKinley Park |
| <input type="checkbox"/> | <input type="checkbox"/> | 60-Bridgeport |
| <input type="checkbox"/> | <input type="checkbox"/> | 61-New City |

4. No preference

- I am not claiming a preference

The Resurrection Project is required to verify any preference which is being claimed.

By signing below, I hereby authorize the release of information needed in order to determine the preference status. This information will be used only for purpose of determining the preference for this applicant.

Signature of Applicant

Date

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This Pre-Application must be completed in order to determine income eligibility for one of The Resurrection Project's (TRP) apartments. In order to fully process your pre-application in a timely manner, you must fill in the form completely and truthfully and provide the required documentation. Failure to submit all documentation will delay the process.

- You must list all the people that will be living with you in the apartment if you are accepted. You must provide **proof of income for every household member over the age of 18.**
 - With your pre-application, you must provide proof of income for the **three (3) most recent months** for all forms of income, (for example: pay stubs, a letter from Social Security or other agency). The more information you provide, the better. Additional requested documents include: Copy of Birth Certificates and social security cards from all household members and Government issued ID from all adults in the household.
- **For Casa Maravilla only:** Casa Maravilla is for households whose head, or spouse, or sole member is at least 55 years of age. All other household members, excluding spouse, must be at least 45 years old.
 - You must provide proof of age: a copy of a birth certificate, driver's license, immigration card, passport, military identification, or any other state, local, national or international documentation with current information about the age or birth of the person.
- We will calculate the total of your household's annual income. The stated monthly rent must be no more than 40% of your monthly income.
- Each of our affordable apartments is restricted to households who earn less than 30%, 40%, 50%, or 60% of the Area Median Income. If your household's income is above the maximum, your household is not eligible for our affordable units. This is determined by using the column in the chart below that corresponds to the number of persons in the household. The verified annual gross household income must be less than the income limit for the available affordable apartment(s).
- It may take up to two (2) weeks to process your application. You will be notified by U.S. mail if you are income-eligible, not eligible, or if we need more information to process your pre-application.
 - If you prequalify, you will be notified of an available unit or put on an active waiting list. When an apartment is available, you will be contacted to complete a Full Application. More information will be requested and a credit and criminal background report will be reviewed.
 - If you do not pre-qualify, your notification will describe the reason(s) for denial.
 - If your pre-application is incomplete or more information is needed you must submit information within 10 business days of the notification.
- The Resurrection Project is committed to compliance with the Fair Housing Amendments Act, Section 504 of the Rehabilitation Act, and all other Fair Housing and Civil Rights laws. Should you require a reasonable accommodation to these instructions or any of our policies, please contact us so that we may consider your request.

Maximum Annual Income by Household Size:
(As of 06/15/2017)

*A City limits
**B IHDA limits

| *A Limit | 1 person | 2 people | 3 people | 4 people |
|----------|----------|----------|----------|----------|
| 30% | 16,600 | 19,000 | 21,350 | 24,600 |
| 40% | 22,120 | 25,280 | 28,440 | 31,600 |
| 50% | 27,650 | 31,600 | 35,550 | 39,500 |
| 60% | 33,180 | 37,920 | 42,660 | 47,400 |

| **B Limit | 1 person | 2 people | 3 people | 4 people |
|-----------|----------|----------|----------|----------|
| 30% | 16,590 | 18,960 | 21,330 | 23,700 |
| 40% | 22,120 | 25,280 | 28,440 | 31,600 |
| 50% | 27,650 | 31,600 | 35,550 | 39,500 |
| 60% | 33,180 | 37,920 | 42,660 | 47,400 |

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