



The Resurrection Project Affordable Housing Pre-Application

The Pre-Application Process

This packet includes a Pre-Application which you must complete in order to determine income eligibility for one of The Resurrection Project's (TRP) apartments. In order for TRP to fully process your pre-application you must fill in the form completely and truthfully.

You must list all the people that will be living with you in the apartment if you are accepted.

- **WE NEED INCOME INFORMATION FOR EVERY HOUSEHOLD MEMBER AGED 18 OR OVER.**
 - 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 give us the better.
 - Failure to submit proof of all income will delay the process.
- **It takes up to two 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.
- We will calculate the total of your household's annual income. The stated monthly rent must be no more than 30% 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) income of your household must be less than the income limit for the available affordable apartment(s).
- **If you prequalify, you will be put on an active waiting list.** If you do not pre-qualify or if your file is incomplete, you will still remain on file. If your income changes and you believe that your new information may pre-qualify you, you may submit your new information for review.
- If you are next on the waiting list when an apartment becomes available, you will be contacted to complete a full application, at which time a credit report and criminal background will be reviewed.

Maximum Income by Household Size

| Limit | 1 person | 2 person | 3 person | 4 person | 5 person | 6 person | 7 person | 8 person |
|-------|----------|----------|----------|----------|----------|----------|----------|----------|
| 30% | 15,850 | 18,100 | 20,350 | 22,600 | 24,450 | 26,250 | 28,050 | 29,850 |
| 40% | 21,120 | 24,120 | 27,160 | 30,160 | 32,560 | 35,000 | 37,400 | 39,800 |
| 50% | 26,400 | 30,150 | 33,950 | 37,700 | 40,700 | 43,750 | 46,750 | 49,750 |
| 60% | 31,680 | 36,180 | 40,740 | 45,240 | 48,840 | 52,500 | 56,100 | 59,700 |





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NAME: _____

Address: _____ Home phone: _____

City: _____ State: _____ Cell phone: _____

Zip code: _____ Work phone: _____

Email: _____ Other phone: _____

How did you hear about TRP Apartments?

TV: What channel/Network? _____

Newspaper: Which one? _____ Date _____

Church/Mosque/Temple: Which one? _____

Fair/Seminar: Which one? _____ When? _____

Friend: Name _____ Phone# _____

Former TRP Client: Explain _____

Laundromat: Which one? _____

Referred by an Organization: Which one? _____

Sign: Location _____

H.U.D. CHAC/Section 8 City of Chicago

Website: Resurrection project.org? YES/NO Pilsen Portal.org? YES/NO

Other website: Which One?: _____

Other: Explain _____

Race & Ethnicity:

Optional: for statistical purposes only

Non-Hispanic White

Asian/Pacific Islander

Native American/Alaskan

Non-Hispanic Black/African-American

Hispanic/Latino (any race)

Other

What is your current...

Monthly rent: \$ _____

of bedrooms: _____

Gas Included: YES / NO

Electricity Included: YES / NO

OFFICE USE ONLY

DATE RECEIVED:

BY:

We are an equal housing opportunity provider. We do not discriminate on the basis of race, color, national origin, sex, disability, familial status (having children under age 18), age, religion, ancestry, sexual orientation, marital status, parental status, military discharge status, or source of income.



The Resurrection Project
1818 S. Paulina Chicago, Illinois 60608

Tel. 312-666-1323 Fax 312-942-1123
TDD Eng. 800-855-2880 Esp. 800-501-0864



EQUAL HOUSING
OPPORTUNITY



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INCOMPLETE PRE-APPLICATIONS WILL NOT BE ACCEPTED. COMPLETION OF THIS PRE-APPLICATION DOES NOT GUARANTEE YOU AN APARTMENT, BUT DETERMINES YOUR INCOME ELIGIBILITY. PROCCESING MAY TAKE UP TO 2 WEEKS. YOU WILL RECEIVE A LETTER IN THE MAIL INFORMING YOU OF YOUR INCOME ELIGIBILITY

Name: _____

Unit type preferred: [] Studio [] 1 Bedroom [] 2 Bedroom [] 3 Bedroom [] 4 Bedroom

Special accommodations required? _____

If yes, what type: _____

Does any household member aged 18 or older receive income from any of the following sources?

- | | | | |
|--|-------------------------------------|---|---|
| <input type="checkbox"/> Employment | <input type="checkbox"/> Child Care | <input type="checkbox"/> Public Assistance | <input type="checkbox"/> SSI/ SSDI |
| <input type="checkbox"/> Veterans Benefits | <input type="checkbox"/> Alimony | <input type="checkbox"/> Child Support | <input type="checkbox"/> Lottery Winnings |
| <input type="checkbox"/> Military Pay | <input type="checkbox"/> Pensions | <input type="checkbox"/> Section 8/ Subsidy | <input type="checkbox"/> Workers Compensation |
| <input type="checkbox"/> Money Received from Non-Household Members | | | |
| <input type="checkbox"/> Other _____ | | | |

ALL INCOME EARNERS AGED 18 OR OLDER MUST ATTACH COPIES OF THEIR PROOF OF INCOME FOR THE MOST RECENT 3 MONTHS

| PLEASE LIST BELOW ALL OCCUPANTS THAT WILL LIVE IN APARTMENT | AGE | TYPE OF INCOME RECEIVED (IF OVER 18) |
|---|-----|--------------------------------------|
|---|-----|--------------------------------------|

- | | | |
|----------|-------|-------|
| 1) _____ | _____ | _____ |
| 2) _____ | _____ | _____ |
| 3) _____ | _____ | _____ |
| 4) _____ | _____ | _____ |
| 5) _____ | _____ | _____ |
| 6) _____ | _____ | _____ |
| 7) _____ | _____ | _____ |
| 8) _____ | _____ | _____ |

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: _____



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PRE-APPLICANT PREFERENCE STATUS

1. Existing Tenant Preferences (for federally assisted housing programs)

- 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

- A. Displaced from an urban renewal area.
- B. Displaced by a disaster, such as a fire or flood, that resulted in extensive damage or has destroyed the unit.
- 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

- A. HUD Pre-approved Preference - Community Residence Preferences to applicants who live or work in Chicago Community Areas:
 - 31-Lower West Side
 - 34-Armour Square
 - 35-Douglas
 - 60-Bridgeport.

4. No preference

- I am not claiming a preference

In order to determine the preference status, we are required to verify the preference. This information will be used only for purpose of determining the preference for this applicant.

I hereby authorize the release of the requested information.

Signature of Applicant

Date

