

Application for Placement on the Waiting List

Property: _____ Phone: _____
Address: _____

Applicant

First Name: _____ Last Name: _____
Address: _____ Apt #: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
DOB: _____ SSN: _____
Driver's License #: _____

Spouse/Co-Applicant

First Name: _____ Last Name: _____
Address: _____ Apt #: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
DOB: _____ SSN: _____
Driver's License #: _____

For Management Use Only

Received Date: _____
Received Time: _____
Gross Annual Income: _____
Income is below:
60% 50% 30%
Unit Size/Type: _____
Family Size: _____
MOB Unit Requested:
Yes No
Waiting List Updates:
Initial Update Due (6-12 months)

Size or Type of Apartment Desired: 0 bed 1 bed 2 bed 3 bed Accessible
Mobility Unit Requested: Yes No

Name(s) of all additional people who will occupy the apartment

Name: _____ SSN: _____ DOB: _____
Name: _____ SSN: _____ DOB: _____
Name: _____ SSN: _____ DOB: _____
Name: _____ SSN: _____ DOB: _____

Person(s) to contact in case we are unable to contact you directly

Name: _____ Phone: _____ Relationship: _____
Name: _____ Phone: _____ Relationship: _____



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Residence/Rental History

Address: _____ City / State / Zip: _____ Rent (\$): _____
Landlord Name: _____ Landlord Phone: _____ Deposit (\$): _____
Move In Date: _____ Move Out Date: _____

Gross Income: (Income for all members of household must be included)

Monthly Pension (\$): _____ Child Support (\$): _____
Social Security (\$): _____ Social Security #2 (\$): _____
Unemployment (\$): _____ Public Assistance (\$): _____
Other (\$): _____ Source: _____

Current Employer: _____
Monthly salary (\$): _____ Hourly wage (\$): _____
Tips/Other (\$): _____ Avg. hours/week: _____

Current Employer #2: _____
Monthly salary (\$): _____ Hourly wage (\$): _____
Tips/Other (\$): _____ Avg. hours/week: _____

Assets: (Include assets belonging to all members of household)

Name of the Bank: _____ Checking Balance (\$): _____
Savings Balance (\$): _____
Additional Banks: _____ Account Type: _____
Stock Value (\$): _____ CD Value (\$): _____
Value of Home/Real Estate (\$): _____ Amount still owed on Home/Real Estate (\$): _____
Income (interest dividends, etc.) earned from all assets per year (\$): _____

Additional Questions

Is anyone in the household a student enrolled in an institution of higher education? Yes No

Minority & Ethnicity information is requested for statistical/reporting purposes only, and is OPTIONAL

Minority: White Black Asian Pacific Islander Native American
Ethnicity: Hispanic Non-Hispanic



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Qualifications: (Please check Yes or No)

Are you currently an illegal user of a controlled substance?	Yes	No
Do you require the features of a mobility-impaired accessible apartment and wish to be placed on the waiting list for such apartments?	Yes	No
Do you require an apartment designed for hearing or sight-impaired?	Yes	No
Have you even been convicted of a crime against any person or property?	Yes	No
Are you or any member of the household subject to a lifetime sex offender registration requirement in any state?	Yes	No
Have you ever been convicted of the illegal manufacture or distribution of a controlled substance?	Yes	No
Are you currently living in HUD subsidized housing?	Yes	No
Do you currently have a Section 8 voucher?	Yes	No
Has your tenancy or subsidy ever been terminated for fraud, non-payment of rent or failure to cooperate with recertification procedures?	Yes	No
Have you recently been displaced through no fault of your own due to flood, fire, etc?	Yes	No

Please list **all states** in which any household member has resided: _____

Tracking

How did you learn about this apartment community? Is there a resident we can thank for referring you?

Every line of this application must be filled in. If an item does not apply to you, write "N/A." The application must be complete, signed, and returned to the property you are applying with before you can be placed on the waiting list. To remain on the waiting list, you must make contact every 6 months.

I/We understand that upon receipt of the completed application for tenancy, our name will be placed on the waiting list, processed for admission, or may be rejected based on preliminary eligibility determination. If placed on the waiting list, this application will be recorded by date and time received by management.

I/We certify that to the best of my/our knowledge, all statements made herein are true and correct. False, fraudulent, and/or misleading information disclosed above may be grounds for denial of tenancy or subsequent eviction.

Signature of Applicant: _____ Date: _____

Signature of Spouse/Co-Applicant: _____ Date: _____

Signature of Additional Adult: _____ Date: _____

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