



Dundee Housing Commission

Rawson Place Apartments

501 Rawson Street

Dundee, Michigan 48131

Sandra Benore, Executive Director

PRE-APPLICATION DUNDEE HOUSING COMMISSION

Applicant's Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

1. List yourself and all persons who will live in the rental unit with you

Family Member	Name	Social Security #	Date of Birth	Age	M/F
Head of House					
Spouse/Other Adult					
Live-in Aid/Dependent					

Do you anticipate any changes in family make-up? _____ If yes, explain: _____

2. If any family member is employed, complete the following:

Family Member	Employer & Address	Rate of Pay	Hours per week

3. If a family member is receiving Social Security, Social Security Disability, Supplemental Security Income, Pension, Annuity, Unemployment Benefits, Workman's Comp, General Assistance, or Governmental Assistance, complete the following:

Family Member	Source of Income	Amount of Income	Frequency

4. If a family member has Savings Accounts, Checking Accounts, Certificates of Deposit, Annuities, Stocks, Bonds or any Financial Securities, including Land Contracts, complete the following:

Type of Asset	Value of Asset	Institution/Address	%

Phone (734) 529-2828 Fax (734) 529-7089

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5. Does any member own real property? Yes/No If yes, give the approximate value and description: _____

6. Are you a resident of Dundee Village or Dundee Township? Yes/No

7. If any family member is disabled or physically handicapped, complete the following:

Family Member	Type of Disability	Length of Disability	Can member live alone?	Are barrier free facilities needed?

8. Are you living in substandard housing? Yes/No If yes, please explain: _____

9. Have you been or are you about to be involuntarily displaced? Yes/No If yes, please explain: _____

10. Are you paying more than 50% of income for rent? Yes/No

11. If you are presently renting, please indicate the amount of rent and amount paid for utilities:

Rent \$ _____ Utilities \$ _____

12. If you have ever rented, give name, address, and phone number of landlord and time during which you rented: _____

13. Have you ever been evicted? Yes/No If yes, give name of landlord and reason for eviction: _____

14. Why have you applied for housing? _____

15. Please list 3 credit references, not including utility or telephone companies. Include address and phone number:

1. _____
2. _____
3. _____



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16. Please list 3 personal references with address and phone number (no relatives)

1. _____
2. _____
3. _____

17. The following information is required for statistical purposes so that the U.S. Department of Housing and Urban Development may determine the degree to which the housing program is assisting minority families. Check one of the following:

- White Black Hispanic Asian or Pacific Islander
 American Indian or Alaskan Native Other

I understand that this is not a contract and does not bind either party. The above information is true and complete to the best of my knowledge. I have no objections to inquiries being made for the purpose of verifying the statements made herein and specifically give my permission to have my Federal Income Tax Reports examined (if filed).

WARNING: Section 101 of Title 18 U.S.C. provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies a material fact or makes any false, fictitious, or fraudulent statement or entry, shall be fined not more than \$10,000, imprisoned not more than 5 years, or both."

Signature of Applicant: _____ Date: _____

Received by: _____ Date: _____

Comments (For Housing Commission use only)