



Date and Time Received:

Hill Park Apartments Market (non-subsidized) Waitlist Pre-Application

Last Name			First Name		MI		
Mailing Addre	ss			_Apt #			
City		State	Zip Code	_ Day Phone			
LIST ALL PER	RSONS WHO WILL B	E LIVING WITH	YOU. LIST YO	URSELF FIRST:			
First	Full Name Middle Initial	Last	Social Security Number (if available)	Relationship	Date of Birth	Student (Yes or No)	
1.				Head			
2.							
3.							
·			lity) Yes	oom unit (1-3 occ	cupants)		
Source(s):			Household Receives Each N		(ave	rage gross)	
Rental Assista	ance (if any): \$		Source:				
Applicant: Ple	ease Read all Attac	chments Befor	e Signing				
to avoid being	g removed from th	<u>e waitlist</u> . It is	ear the top of the waitlist. the applicant's responsibil Changes must be made in	lity to notify CCC	Housing o	f	
understand the information v	ne Building Criteria vill result in remov	for Hill Park A al from the wa	Application are true and control partments. I understand the itlist. I agree a complete in equent application will not	nat providing fals nvestigation of al	e or incom I informati	iplete on	
Applicant Sigr	nature				Date		