



Affordable Housing Corporation of Lake County

**FOR OFFICE USE ONLY**

Date Rec'd: \_\_\_\_\_

Time Rec'd: \_\_\_\_\_

Initials: \_\_\_\_\_

**Rental Housing Support Program Pre-Application Form**

Head of Household (Use Legal Name): \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Email Address: \_\_\_\_\_

Can you claim any of the following preferences?

Displaced from an urban renewal area?    \_\_\_ Yes    \_\_\_ No

Displaced as a result of government action?    \_\_\_ Yes    \_\_\_ No

Displaced as a result of a major disaster?    \_\_\_ Yes    \_\_\_ No

Has anyone in your household ever been convicted of any crime other than traffic violations?  
\_\_\_ Yes    \_\_\_ No    If yes, explain the charge and the year it occurred on a separate piece of paper.

Have you ever been evicted? \_\_\_ Yes    \_\_\_ No    If yes, please indicate the year: \_\_\_\_\_

Total Number of Persons in Household: \_\_\_\_\_

Total Gross Annual Household Income: \$ \_\_\_\_\_

Total Household Assets:

\$ \_\_\_\_\_ Checking Account Balance

\$ \_\_\_\_\_ Savings Account Balance

\$ \_\_\_\_\_ Other Account Balance (Describe here \_\_\_\_\_)

\$ \_\_\_\_\_ Other Account Balance (Describe here \_\_\_\_\_)

\$ \_\_\_\_\_ Other Account Balance (Describe here \_\_\_\_\_)

Do any household members:

- \_\_\_ Yes    \_\_\_ No    Have interest in any real estate, boat or mobile home?
- \_\_\_ Yes    \_\_\_ No    Have you sold any real estate in the last two years?
- \_\_\_ Yes    \_\_\_ No    Own any stocks or bonds?
- \_\_\_ Yes    \_\_\_ No    Have any other bank accounts not described above? If yes, list here: \_\_\_\_\_
- \_\_\_ Yes    \_\_\_ No    Have any life insurance policies? If yes, state policy information here: \_\_\_\_\_



<b>HOUSEHOLD COMPOSITION</b>				
Household Members	Date of Birth	Age	Social Security Number	Indicate: (S) Single, (M) Married, (W) Widowed, (D) Divorced, (P) Separated
1				
2				
3				
4				
5				
6				
7				
8				

Are any of the children in the household not related to one of the adult household members?  
 \_\_\_ Yes \_\_\_ No. If yes, state that absent parent's name and address below.

If any of the adults are separated or divorced, list name and address of spouse/ex-spouse below.

**LOCATION PREFERENCES**

AHC will attempt to accommodate location preferences whenever possible. However, availability is based upon participating property owners.

Are you willing to move to another town or neighborhood in order to participate in the program?  
 \_\_\_ Yes \_\_\_ No

Which three Lake County communities would you prefer to live in?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Are there reasons that location is particularly important to your household? Please select the items that apply to you:

- \_\_\_ Want to keep children in their school district
- \_\_\_ Proximity to child care
- \_\_\_ Proximity to public transportation
- \_\_\_ Proximity to employment
- \_\_\_ Other (Describe here: \_\_\_\_\_)
- \_\_\_ Other (Describe here: \_\_\_\_\_)



**TOTAL GROSS HOUSEHOLD INCOME**

Write the amount of money received from each source for every household member.

HOUSEHOLD MEMBER	Employer(s) Name	Total Gross Monthly Wages	SS/SSI Monthly	Child Support Monthly	Public Aid Monthly	Pension / Retirement Monthly	Other Monthly
1							
2							
3							
4							
5							
6							
7							
8							
<b>Total:</b>							

Describe the source of any other income here: \_\_\_\_\_

Does anyone outside your household pay for any of your bills or give you money regularly?  
 \_\_\_Yes \_\_\_No If yes, explain here: \_\_\_\_\_

**All adults of the household that may live in a unit subsidized by the Rental Housing Support Program must sign and date the following page.**



**CERTIFICATIONS AND SIGNATURES**

All adults of the household that may live in a unit subsidized by the Rental Housing Support Program must sign and date the below. In so doing, I/we do hereby swear and attest that all of the information on this Pre-Application is true and correct and authorize the Affordable Housing Corporation of Lake County to verify all information. WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODE, STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRADULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.

\_\_\_\_\_  
Signature Head of Household \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Other Adult \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Other Adult \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Other Adult \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Other Adult \_\_\_\_\_  
Date

**PRE-APPLICATION SUBMITTAL**

Pre-applications can be submitted by dropping off or mailing to:

Affordable Housing Corporation of Lake County  
1590 S Milwaukee Ave, Suite 312  
Libertyville, IL 60048

or via Fax at 847-263-9381

For questions, please contact Jeni Luna at 847-263-7478 extension 19.

