

Champion Park Homes Pre-Application

3617 Delaware Street
Rockford, IL 61102

815-963-2133

Champion Park Homes DOES NOT: Discriminate on the basis of handicapped status in the admission or access to, or treatment of, or employment in, its federally assisted programs and activities.

In order for your pre-application to be considered complete, the following items must be received:

- **All applicable information is to be completed on the pre-application, signed and dated.**
- **Driver's license or state photo identification for household members age 18 or older**
- **Social security cards for all household members**
- **Birth certificates for all household members**

In accordance with Federal Law, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, religion, familial status or disability.

To file a complaint of discrimination, write:

Office of Fair Housing and Equal Opportunity
U.S. Department of Housing and Urban Development (HUD)
Washington, DC 20410

The Equal Housing Coordinator Compliance Officer can be reached at (815) 963-2133.

This institution is an equal opportunity provider and employer.



This pre-application must be signed by the head of household applying for occupancy. Your application will be reviewed and a preliminary assessment will be made of your eligibility. Your name will be placed on the waiting list unless it is determined that you are ineligible. If you are determined to be ineligible you will be notified in writing.

Placement on the waiting list does not indicate that you are eligible for admission. A final determination of eligibility and qualification for preferences will be made when you are selected from the waiting list.

Your name will be placed on the waiting list according to preference(s) and the date and time your **complete** application is received.

Your pre-application will be assigned a place on the waiting list according to the bedroom size for which you qualify. You may also request to be placed on the waiting list for a unit size smaller than designated by the occupancy guidelines as long as the unit is not overcrowded according to standards. However, in this case, you must agree not to request a transfer for two years after admission, unless you have a change in family size or composition.

It is your responsibility to notify us in writing of any change of address, phone number, employment, income or household size.

When you have been selected from the waiting list, you will be notified by mail. The notice will include a date, time and location for an application interview, including procedure to reschedule the interview. If a notification letter is returned with no forwarding address, you will be removed from the waiting list without further notice.

If you miss a scheduled interview, we will send another notification letter with a new interview appointment time. If you fail to attend the second interview without approval, your application will be made inactive.

Current and previous landlords will be contacted and a credit check, criminal background and sex offender check will be performed on **all** adult household members. Lying or deliberate omission of relevant information from the application may result in rejection of the application.

At any point in the verification process if a negative verification report is received, the application process will be discontinued and you will be notified in writing that your application has been denied. Otherwise, when all of the verifications are received, eligibility will be determined. When a vacancy becomes available, you will be notified that you have been accepted for occupancy or rejected in writing.

The Occupancy Standards are as follows:

We will assign one bedroom for each two persons within the household, except in the following circumstances:

- Persons of the opposite sex (other than spouses, and children under age 5)
- Persons of different generations will not be required to share a bedroom
- Single person families will be allocated a one bedroom unit

The maximum number of persons per unit size is as follows:

1 Bedroom	2 persons
2 Bedroom	4 persons

We will consider granting exceptions to the occupancy standard upon your written request if we determine the exception is justified by the relationship, age, sex, health or disability of family members, or other personal circumstances.

If an offer of a unit is rejected by you, you will be offered the next suitable unit that becomes available. The second unit offer will be the final offer, unless there is good cause for refusing the offer. You must accept or refuse a unit offer within 3 business days of the date of the unit offer. Offers made by telephone will be confirmed by letter. If you refuse the final offer, your name will be removed from the waiting list.

CHAMPION PARK PRE-APPLICATION CARD

For office use only.

Date and Time Received: _____

Occupancy Standard for: 2BR 3BR 4BR 5BR

NAME (Head of Household): _____

ADDRESS: _____ CITY: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail Address: _____

Does anyone in your household have a disability and require special accommodation(s)? YES NO

If yes, please describe any accommodations required. _____

Please check all that apply and verifiable.

- Current resident of Winnebago County within the past 90 days Currently working
- Victim of Violence Against Woman's Reauthorization Act of 2002 Veteran or surviving spouse of Veteran
- Involuntarily displacement due to Disaster or Governmental Action Head of household/spouse is 62 years old or older
- Nursing home resident who has resided in a state – licensed nursing home for the past ninety calendar days and have been determined by the state – licensed nursing home as eligible for discharge
- In custody of Child Welfare System on or before his/her 18th birthday who has not yet reached the age of 24.
- Currently meet the HUD/Social Security definition of disabled Head Co-Head Spouse

Gross Household Income: Source: _____ \$ _____

(REPORT ALL INCOME) Source: _____ \$ _____

Source: _____ \$ _____

Household Data: Please List ALL persons who will live in the unit.

<u>NAME</u>	<u>SOCIAL SECURITY NUMBER</u>	<u>BIRTHDATE</u>	<u>AGE</u>	<u>RELATIONSHIP</u>	<u>STUDENT FT/PT/NA</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**PLEASE PROVIDE COPY OF DRIVER'S LICENSE OR STATE ID,
AND SOCIAL SECURITY CARDS FOR ALL HOUSEHOLD MEMBERS**

- | | | |
|---|--|---|
| <u>Race</u> | <u>Ethnicity</u> | |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> NOT Hispanic or Latino | <input type="checkbox"/> Asian | <input type="checkbox"/> White/Caucasian |
| | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | |

_____ _____
Head of Household Signature Date





Screening Reports, Inc.

729 N Route 83 Suite 321

Bensenville, Il 60106

Toll-Free Phone (866) 389-4042

Toll-Free Fax (866) 389-4043.

I/We Authorize Screening Reports to do a complete investigation of all information provided above. I have personally filled in and/or reviewed all information listed above. A complete investigation may include any or all of the following: Credit Report, Criminal Record, Rental History References and Personal Interviews with above references. I/We acknowledge that SRI Provides Reports to apartments and does not participate in the approval or denial process. I/We acknowledge that SRI monitors criminal activity and reports it promptly to the community. My/Our Signature(s) below authorizes all above listed companies to release rental, job history (including salary) and criminal record information.

Applicant Name

Social Security #

Date of Birth

Applicant Signature

Today's Date

Co-Applicant Name

Social Security #

Date of Birth

Co-Applicant Signature

Today's Date

To be completed by staff:

I certify that a criminal background check was completed:

(signature)

RESIDENCE INFORMATION

Please list all addresses and information for each adult in the household for the past 5 years starting with the most recent address. **DO NOT LEAVE ANY TIME UNACCOUNTED FOR.** Please use addition paper if needed.

Your Current Address (Include City, State and Zip code):

Do you Rent or Own? _____

Landlord's Name/Address: _____

Phone Number: _____

Dates you lived there: From: _____ To: _____

Address you lived at: _____

Do you Rent or Own? _____

Landlord's Name/Address: _____

Phone Number: _____

Dates you lived there: From: _____ To: _____

Address you lived at: _____

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