# Pre-Application for Housing: Paulson Park I

**Disclaimer:** Only **ONE** pre-application can be submitted per household and/or applicant. Members in one household cannot submit separate individual applications. Duplicate applications will not be accepted. This pre-application is used exclusively to establish a waiting list for this property **(Paulson Park I)** and is not considered a full or final application. Fill in all required fields (indicated by a red '\*'). Incomplete applications will not be processed.

### **Household Member Information**

The First Household member is always the Head of Household (HoH). Select the "Add Household Member" button for each additional household member.

Name *			Relatio	n to He	ad of Household *
			Head o	of House	ehold
First	/I L	ast	Spouse, Child, Other		
Email *	Con	tact Phone # *	Alternate Phone	# P	referred Contact Method *
				Р	hone, E-Mail, Postal Mail
Address *					
City		State		Zip Co	de
lf you are homeless, please prov	iida a m		ara vau racaiva mail		
address, please select the appro		contact method bel	OW.		
		01-1 -	Date of District		CONTINU *
Ethnicity	isabilit	y Status	Date of Birth *		SSN/ITIN *
		y Status  Not Disabled	Date of Birth *		SSN/ITIN *
Hispanic, Non-Hispanic Dis	sabled, l		Date of Birth *		SSN/ITIN * ic Islander Detail tive Hawaiian
Hispanic, Non-Hispanic Dis Race * □ American Indian or Alaska N	sabled, l	Not Disabled  Asian Detail	Date of Birth *	□ Na	ic Islander Detail
Hispanic, Non-Hispanic Dis Race * □ American Indian or Alaska N □ Asian	sabled, l	Not Disabled  Asian Detail  Asian India	Date of Birth *	□ Na	ic Islander Detail tive Hawaiian amanian or Chamorro
Hispanic, Non-Hispanic Dis  Race *  □ American Indian or Alaska N  □ Asian  □ Black or African American  □ Native Hawaiian or Other Pa	sabled, l	Not Disabled  Asian Detail  ☐ Asian India  ☐ Chinese	Date of Birth *	□ Nat □ Gu □ Sai	ic Islander Detail tive Hawaiian amanian or Chamorro
Hispanic, Non-Hispanic Dis  Race *  □ American Indian or Alaska N  □ Asian  □ Black or African American  □ Native Hawaiian or Other Pa	sabled, l	Not Disabled  Asian Detail  ☐ Asian India  ☐ Chinese  ☐ Filipino	Date of Birth *	□ Nat □ Gu □ Sai	ic Islander Detail tive Hawaiian amanian or Chamorro moan
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	sabled, l	Not Disabled  Asian Detail  Asian India  Chinese  Filipino  Japanese  Korean  Vietnamese  Other Asian		□ Nan □ Gu □ San □ Oth	ic Islander Detail tive Hawaiian amanian or Chamorro moan ner Pacific Islander

Name *			Relati	on to Head	of Household *	
ivanic			Kolati	on to mead	or riouscrioiu	
First	MI Last		Spouse	Spouse, Child, Other		
Ethnicity	Disability Status		Date of Birth * SSN/ITIN		SSN/ITIN *	
Hispanic, Non-Hispanic	Disabled, Not	Disabled				
<b>Race *</b> □ American Indian or Alas	_	s <b>ian Detail</b> Asian India			Islander Detail e Hawaiian	
□ Asian		Chinese		□ Guan	nanian or Chamorro	
☐ Black or African America	an 🗆	Filipino		□ Samo	oan	
☐ Native Hawaiian or Othe	er Pacific 🛚	Japanese		☐ Other	Pacific Islander	
Islander —		Korean				
□ White		Vietnamese				
□ Other		Other Asian				
Primary Language *						
Timury Language			Secondary Lar	nguage		
Household Member	3		Secondary Lar	nguage		
	3		_		of Household *	
Household Member			Relati	on to Head		
Household Member	3 MI Last		Relati			
Household Member		itatus	Relati	on to Head		
Household Member Name *	MI Last		Relati	on to Head	r	
Household Member Name *  First  Ethnicity	MI Last  Disability S  Disabled, Not		Relati	on to Head	r	
Household Member Name *  First  Ethnicity  Hispanic, Non-Hispanic  Race *	MI Last  Disability S  Disabled, Not  As  ka Native	Disabled	Relati	on to Head e, Child, Other Pacific □ Native	SSN/ITIN *	
Household Member Name *  First  Ethnicity  Hispanic, Non-Hispanic  Race *	MI Last  Disability S  Disabled, Not  As  ka Native	Disabled sian Detail Asian India	Relati	on to Head e, Child, Other Pacific □ Native	SSN/ITIN *  Islander Detail e Hawaiian nanian or Chamorro	
Household Member Name *  First  Ethnicity  Hispanic, Non-Hispanic  Race *	Disability S Disabled, Not  As ka Native   an   er Pacific	Disabled  sian Detail Asian India Chinese Filipino Japanese	Relati	Pacific   Ruan	SSN/ITIN *  Islander Detail e Hawaiian nanian or Chamorro	
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Household Member Name *  First  Ethnicity  Hispanic, Non-Hispanic  Race *  American Indian or Alasi  Asian  Black or African America  Native Hawaiian or Other Islander	MI Last  Disability S  Disabled, Not  As  ka Native   an   er Pacific	Disabled  Sian Detail Asian India Chinese Filipino Japanese Korean Vietnamese	Relati	Pacific   Ruan	SSN/ITIN *  Islander Detail e Hawaiian nanian or Chamorro oan	
Household Member Name *  First  Ethnicity  Hispanic, Non-Hispanic  Race *  American Indian or Alasi  Asian  Black or African America  Native Hawaiian or Othe Islander  White	MI Last  Disability S  Disabled, Not  As  ka Native   an   er Pacific   an   wledgement	Disabled  sian Detail Asian India Chinese Filipino Japanese Korean Vietnamese Other Asian	Relati Spouse Date of Birth *	Pacific ☐ Native ☐ Guan ☐ Samo	SSN/ITIN *  Islander Detail e Hawaiian nanian or Chamorro oan Pacific Islander	

Apartment Choice 1 *			
Available choices for Preferi	red Apartment Size are: <b>1 Bedroom</b>		
Household Inforn	nation		
months? * O Yes O No	sehold changes in the next 12	By how many?	
Anticipated changes may not	quality at 1110ve-iii.		
Household Incom		l members of the hol	usehold. Show amour
Household Incom	ne and Assets come received from all sources by al	es of employment et), Social Security, ds, disability,	usehold. Show amour Annual Amount *

Community Resident Selection Preferences

This community may participate in programs requiring residency preferences. Preference eligibility will be verified

prior to housing being offered.
Does any member of your household require a unit accessible to those living with specific disabilities?
O Yes O No
Please check all that apply * □ Mobility □ Vision □ Hearing
Does any household member require a live-in attendant? * ○ Yes ○ No
Is the Head of Household, Spouse or co-head (if applicable) 62 years of age or older? * ○ Yes ○ No
Do you or any member of the Household live or work in the City of Mountain View? * ○ Yes ○ No

## **Pre-Application Signature and Consent**

- 1. To the best of my/our knowledge and belief, I/we certify that the foregoing information is true, complete and correct.
- 2. I/we certify that if selected to move into this property, the unit I/we occupy will be my/our only residence.
- 3. I/we understand that the above information is being collected to determine my/our eligibility for an apartment with rent below market rate.
- 4. I/we understand that adverse credit reports may disqualify my/our application for occupancy.
- 5. I/we understand that false statements or information are punishable under federal law.
- 6. I/we understand we must provide written notification of any changes to the information on this form, especially address changes.
- 7. I/we understand that this pre-application is solely to obtain a place on the waiting list for **Paulson Park I**. This pre-application does not guarantee the availability or act as an offer of housing.
- 8. I/we understand that the completion of a full application and participation in an eligibility interview that includes verification of the information provided must occur prior to an offer of housing.

Signature of Head of Household *	Date

# **Fair Housing Statement**

MidPen Housing Management Corp. and its affiliates comply with the Fair Housing Act, the Rehabilitation Act of 1973 and the Fair Housing Act Amendments of 1988 prohibiting discrimination based on race, color, national origin, disability, sex, religion, and familial status and Title VI of the Civil Rights Act of 1964 prohibiting discrimination on the basis of disability in any program or activity receiving federal financial assistance. We do not discriminate and do not deny or limit services, terms, conditions, privileges or facilities based on race, color, creed, religion, sex, sexual orientation, age, disability, medical condition, marital status, familial status, source of income, national origin or gender, in any and all aspects of applicant/resident relations, including without limitation, accepting and processing applications, selecting residents from eligible applicants on the waiting list, assigning units, certifying and re-certifying eligibility for assistance, granting accommodation, and terminating tenancies.

