

Landlord Intent to Participate

Landlord Information

Name: _____

Address: _____

City : _____ IL Zip Code + 4 _____ Phone # _____

Contact Person _____

Email Address _____ Fax# _____

Project Information

Address: _____

City: _____

Manager (if applicable) _____

Manager Phone# _____ Manager Fax# _____

Total Units in Project

	Eff	1BR	2BR	3BR	4BR	5BR
Participating						
Non-Participating						
Total Units						

Unit information

Address	Bedrm Size	Proposed rent	Handicap Accessible	*Special Needs	Occupied Y or N

*Designate if you serve a specific special needs population