GreenTrees is in Huntley, IL  
11417 E. Main St.

GENERAL DESCRIPTION

Tenancy: Must be 62 years or older or disabled adult of any age. Children CANNOT live at the properties.

The apartments are all 1 bedroom, approx. 640 square feet in size.

The apartments are all on ground level and have their own exterior entrance. There is a patio on the back each apartment. The tenant is allowed to garden both in the back and front of their apartment, if they wish.

There is no garage or storage space at the properties.

The tenant is responsible for the electric. This is everything: heat, water heating, cooking, lights, air conditioning. Each apartment has a wall-mounted air conditioner. The electric bill at GreenTress (Huntley) is on average for the entire complex, $74.00 per month. Of course, individual usage varies. The landlord pays the water, sewer and garbage.

There is NO assigned PARKING.

There is a community room at each complex, and there are some social gatherings. Community Room can be reserved by tenants for their own private functions, at no charge.

The tenant may have a maximum of one pet, not exceeding 25 lbs. in size. It must be spayed or neutered and must be current on inoculations. There is an additional $200 pet deposit.

The smoke-free policy states that the only place you may smoke is on your own rear patio. No smoking anywhere else on the property including, but not limited to: inside the apartments, community room, laundry room, parking lot, dumpster enclosures, lawn areas, etc.

RENT:
Green Trees Huntley
$375 minimum rent, $615 maxim rent (the rent is determined on a sliding scale based on household income) Security deposit: $375. Pet deposit is an additional $200
RENTAL HOUSING APPLICATION
GreenTrees

11417 E. Main St., Huntley, IL 60142

I hereby apply for a rental housing living unit in this housing complex, and for rental assistance, if I am eligible and if it is available. I certify that this will be my permanent residence and I will not maintain a separate subsidized rental unit in a different location.

PRELIMINARY INFORMATION PERTAINING TO APPLICANT(S)

Applicant's Name: ___________________________________________ Age: ______

Co-Applicant's Name: _________________________________________ Age: ______

Others Living in the Unit:

Name ______________________________________________________ Age: ______
Name ______________________________________________________ Age: ______
Name ______________________________________________________ Age: ______

Present Address: ____________________________________________

Telephone Number: ___________________ Approximate Annual Family Income: $________

Source(s) of Income: ___________________ Approximate Net Worth: $________

Are you a U. S. citizen? Yes / No

Are you a student under the age of 24? Yes / No If Yes – Are you a veteran? Yes/No Are you married? Yes/No

Do you request consideration for an income adjustment based on a disability? Yes / No

Do you need special accommodations or modifications to the living unit based on a disability? Yes / No

SIGNED:

__________________________________________ (Owner or Agent)

__________________________________________ (Applicant)

__________________________________________ (Co-Applicant)

(Date Received)

The information solicited on this application is requested by the apartment owner in order to assure the Federal Government, acting through USDA Rural Development, that Federal Laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, marital status, age, and handicap are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner (or managing agent) is required to note the race, ethnicity and sex of individual applicants on the basis of visual observation or surname.

HEAD OF HOUSEHOLD
(check as appropriate)

Race

____ American Indian / Alaskan Native

____ Black or African American

____ Native Hawaiian or Other Pacific Islander

____ White

____ Other

Ethnicity

____ Hispanic or Latino

____ Not Hispanic or Latino

Marital Status

____ Married

____ Separated

____ Unmarried

Sex

____ Male

____ Female

(FOR MANAGEMENT USE ONLY)

Eligibility Determination: ____________________________ (Attach copy of Notification Letter)

Date: ____________________________

Eligible

Unit size(s): __1 bdr. ___ 2 bdr. ___ 3 bdr. ___ 4 bdr. Date Purged from Waiting List: ______

Ineligible - Reason(s):

__________________________________________

__________________________________________

__________________________________________

COMMENTS:

__________________________________________

PN 370 (10-11-06)
McHenry County Housing Authority (MCHA) requires all applicants or participants (Head of Household and listed household members) 17 and older to submit to a criminal background screening. The background screening may be conducted prior to admission, at any recertification, prior to moves, or at any time relating to any alleged criminal violation for the purposes of determining initial or continuing eligibility. This authorization and release form is valid during the application process, and if accepted into a MCHA housing program, for the entire duration of participation in the program.

I hereby consent and authorize the McHenry County Housing Authority to obtain information and report copies from any and all Law Enforcement agencies relative to any of which said agencies may have a record(s). I agree to indemnify and save harmless any Law Enforcement agency and its employees from any action arising out of release of information.

In connection with application for rental of McHenry County Housing Authority owned/managed properties, I give permission to McHenry County Housing Authority to request and receive information required to verify employment, depository accounts and credit history. This includes permission to run credit check reports.

I agree that a photocopy, fax or scan of this authorization may be used in lieu of the original.

_________________________  ______________________
Signature                             Date

_________________________  ______________________
Witness                                Date

Name: __________________________________________

                  Last            First            Middle

Address: __________________________________________

            Street               City               State               Zip

Date of Birth: ___________________  Social Security # ___________________

Driver’s License # ___________________  State ___________________

List all other names used (Nicknames, Maiden Name, Married Name):

Race _______  Sex _______

McHenry County Housing Authority is an Equal Opportunity Provider and Employer  REV 2/2017