



PREAPPLICATION FOR PROJECT-BASED UNITS IN CARY HORIZON, CARY IL
(PLEASE PRINT LEGIBLY)

Head of Household _____ Age _____ Race _____
 Address _____ Apt _____
 City _____ State _____ Zip Code _____
 Phone () _____ Social Security Number _____

LIST ALL PERSONS WHO WILL LIVE IN THE RENTAL UNIT, STARTING WITH THE HEAD OF HOUSEHOLD:

Full Name (including Middle Initial)	Relationship	Sex	Age	Birthdate	Birthplace	Income per month
	HEAD					\$
						\$
						\$
						\$
						\$
						\$

MONTHLY INCOME (before taxes) FOR ALL HOUSEHOLD MEMBERS LIVING WITH YOU \$ _____

Is your family homeless? _____ Does your family contain a Veteran? _____ Does your family contain a disabled person? _____
 Do you need a handicap-accessible unit? _____ Do you need a sensory-impaired unit? _____

Check all sources of income that you receive:

___ Wages ___ TANF ___ Social Security ___ SSI ___ Pension(s) ___ Disability Compensation
 ___ Unemployment ___ Alimony ___ Child Support ___ Babysitting ___ Caretaking

Please specify any other income you receive: _____
 Employer's Name and address: _____

ASSETS

Check all that apply:

___ Checking Account ___ Savings Account ___ Stocks ___ Bonds ___ Real Estate ___ Other: _____

Head of Household Signature: _____ Date: _____

Please complete the criminal background check form located on the back of this pre-application. All family members 17 years of age and older must complete a criminal background check form. Please ask for additional copies if needed. Pre-applications will not be processed without all necessary information filled out and criminal background check forms attached.

