

Northern Illinois Regional Affordable Community Housing (NI ReACH)
Properties Pre-Application
3617 Delaware Street, Rockford, IL 61102
(815) 963-2133



PRE-APPLICATION FOR HOUSING

Household Information

Head of household

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Current Mailing Address

Street _____

City _____ State _____ Zip Code _____

Phone number _____ Can you receive text on this number? Yes or NO

Email address _____

Can we use this email to send you information electronically? Yes or No

Spouse/Cohead of household

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male _____ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male ___ Female _____

Other Household members

Name _____ Birthdate _____

Social Security Number _____ Male ___ Female _____

Income Information

Please list all income for the household

Social Security?	Amount:	Frequency:
SSI?	Amount:	Frequency:
Pension/Annuity?	Amount:	Frequency:
Veterans Benefits?	Amount:	Frequency:
Disability?	Amount:	Frequency:
Unemployment?	Amount:	Frequency:
Workman’s Compensation?	Amount:	Frequency:
TANF/Public Assistance/ Food Stamps?	Amount:	Frequency:
Employment?	Amount:	Frequency:
Do you receive Alimony?	Amount:	Frequency:
Do you receive Child Support?	Amount:	Frequency:
Military Pay?	Amount:	Frequency:
Net Income from Business?	Amount:	Frequency:
Contributions from friends/relatives?	Amount:	Frequency:
Income from Assets?	Amount:	Frequency:
Other Income?	Amount:	Frequency:
**Grants or Scholarships	Amount:	Frequency:

** Only count income in excess of the amounts received for tuition

The following will be used to determine your preliminary preference point determination. Preference points are initially assigned based on your application self-certification. At a later time, we will require independent verification of the factors that qualify you for each preference prior to providing any housing assistance. Please place a check mark by each preference point you are claiming.

___ Winnebago Residency (You have lived in Winnebago County for the immediate and consecutive past ninety calendar days)

___ Stephenson Residency (You have lived in Stephenson County for the immediate and consecutive past ninety calendar days)

___ Elderly (Head of Household or spouse is over 62)

___ Disabled (Head of Household or spouse meets the HUD/Social Security definition of disability)

___ Working (Head of Household or spouse are currently working at least 20 hours per week.)

___ Veteran (You are a veteran or a spouse of a veteran).

___ VAWA (You are a victim of violence in reference to the Violence against Women’s Reauthorization Act of 2013)

___ Nursing Home Resident who has resided in a state-licensed nursing home and is eligible

The following information is requested by the Federal Government in order to monitor compliance with federal laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information but are encouraged to do so. This information will not be used in the evaluation of your application or to discriminate against you in any way. However, if you choose not to furnish it, Management is required to note race/ethnicity on the basis of visual observation or surname.

<input type="checkbox"/> I do not wish to furnish this information Ethnicity of Applicant (A) or Co-Applicant (C) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Race/National Origin of Applicant (A) or Co-Applicant (C) <input type="checkbox"/> American Indian/ Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
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The Occupancy Standards are as follows: Please read before checking your preferences

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 the age of 5)

- Persons of different generations will not be required to share a bedroom
- Single persons families will be allocated a one-bedroom unit

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

- 1 Bedroom = 2 persons or 3 persons * Varies by Location
- 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.

Please mark all programs/complexes that you wish to be on the waitlist. You will only be placed on waitlist that are open and you qualify for by occupancy standards

Housing Choices – Winnebago County

1-bedroom – Winnebago County

- Collier Gardens apartments (Rockford, IL)
- Robert Johnston garden apartments (S. Beloit, IL)
- D’Agnolo Apartments (Rockton, IL)

2-bedroom - Winnebago County

- Collier Gardens (Rockford, IL)
- Champion Park (Rockford, IL)
- Westcott (Rockford, IL)

3-bedroom – Winnebago County

- Champion Park (Rockford, IL)
- Westcott Homes (Rockford, IL)

4-bedroom – Winnebago County

- Champion Park (Rockford, IL)

5-bedroom – Winnebago County

- Champion Park (Rockford, IL)

Housing Choices – Stephenson County

Efficiencies – Stephenson County

- Westport Village (Freeport, IL)

1-bedroom – Stephenson County

- Hosmer and Brewster Apartments (Freeport, IL)
- Westport Village (Freeport, IL)

2-bedroom – Stephenson County

- Westport Village (Freeport, IL)
- Hosmer Apartments (Freeport, IL)

3-bedroom – Stephenson County

- Westport Village (Freeport, IL)

4-bedroom – Stephenson County

- Westport Village (Freeport, IL)

Community Programs – Please check availability of community programs. If a waitlist is closed, you will not be added to that waitlist and will have to reapply when it is open.

Rental Housing Support Program Efficiencies, 1, 2 and 3 bedrooms

- Boone County
- Winnebago County
- Jo Davies County
- Ogle County
- Dekalb County
- Davis Junction County
- Valley View Apartments (Rockford, IL)
- Grand Apartments (Rockford, IL)
- Village Green Apartments (Pecatonica, IL)

Housing Choice Voucher Program (Section 8) – Bedroom size is determined per family by Occupancy rate

- Winnebago County
- Boone County
- Stephenson County

This institution is an equal opportunity provider and employer.

This application must be signed by all adults 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 and the date and time your complete application is received.

Your 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 changes of address, phone number, employment, income, or household size.

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.

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.

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 have 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.

APPLICANT CERTIFICATION

I/We certify that the information given to the NI ReACH (PHA) on family composition and characteristics, income, assets, and expenses, is accurate and complete.

I understand that false statements or information are punishable under Federal Law and grounds for denial or termination of housing assistance.

I understand that any attempt to obtain any rent subsidy or rent reduction by false information, impersonation, failure to disclose or other fraud, and any act of assistance to such attempt is crime under:

WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODE, STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.

SIGNATURE OF HEAD OF HOUSEHOLD

DATE