CLARK TERRACE II 2680 CLARK AVENUE NORCO, CA 92860 PHONE (951) 738-9094 FAX (951) 738-9089 TDD/TTY/Relay Service 711

Office Use Only	
Date Received:	
Time Received:	
Wait List. No.:	_

## APPLICATION FOR RESIDENCY

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

List the Head of Household and all other members who will be living in the unit and provide social security numbers for all household members.

37. 1					D 1	D1 1		I	1	
Member	Lost Nome		Einst Nama	NA/I	Relationship	Birth	A ~~	Cov	Sec. 9	Sac No
No. <b>Head</b>	Last Name		First Name	M/I	to Head Self	Date	Age	Sex	Soc. 8	Sec. No.
					Sen					
2										
3										
•	or any members of your any members of you			isability	No [ ] that requires the No [ ]	he amenitie	s of an	accessi	ble unit	?
I/We undo	erstand that the comm	nunity is a "S	smoke Free Comm Yes	-	I/We understar No [ ]	nd that smol	king is p	prohibi	ted anyv	where on
Current A	Address:									
Street City State Zip Code				Code	Area Code & Phone #					
Landlord's Name Area Code and Phone # Rent Amount					Length of Stay					
	ve lived at your cur			ears, pl	ease provide t	he name, a	address	and pl	hone nu	ımber
	mer landlords for th	e past five			ľ					
Name of Landlord Address				Phone			Dates you lived			
								_	there	
								Fro	m	То
	any member of the hordrug related crim					ly assisted	Yes	[ ]	No [	1
site for drug related criminal activity within the past three years?  2. Does any member of the household was illegal drugs or abuse also hold.								_	_	
2. Dues	2. Does any member of the household use illegal drugs or abuse alcohol? Yes [ ] No [ ]							J		
3. Have any members of the household been convicted and or adjudicated of a misdemeanor or felony?					Yes	[ ]	No [	]		
4. Are you or any members of your household subject to a lifetime sex offender registration in any state?					Yes	[ ]	No [	]		
5. List e	5. List every state you have ever resided in:									
			<b>T</b> 3.77	COME						

## *INCOME*

	Monthly Income	Monthly Income	Monthly Income
Monthly Income	Head of Household	Member #2	Member #3
Social Security			
SSI/Disability			
Pension/Annuity			
Employment/Salary			
General Relief			
Interest/Dividends			
Family Assistance			
Other			
TOTAL:			

## ASSETS

		1100210	7		
Assets Owned	Current Value	Annual Income Received	Owned by Whom	Comments	
Checking	v arue	mcome Received	W HOIH	Comments	
Savings/Money Market/CD					
Home/Real Estate					
Business					
Cash held					
Assets given away					
Life Insurance Accounts					
IRA/401K/KEOGH					
Other					
TOTAL					
HUD requires us to report the recooperation in completing the find bearing on your eligibility for Race of Head of Household:	Following quest housing.  [ ] White		American [ ] As	our entry will have no	
Ethnicity of Head of Household	Other _	Hawaiian or Other Pactic		no	
owner/management will rely upon applicant's credit, financial and required by the Housing and I we will not admit an applicant criminal activity within the paclassified as a sex offender.  The applicant(s) hereby apperson supplying them with the information and will hold them information are hereby authorized applicant(s).	character stand Urban Develop who has been st three years, releases the ow information from	ing. In addition, we coment Department (H) evicted from another who uses illegal drug ner/management, his/hom any liability whatsom any suit or reprisal what	onduct criminal b UD). Pursuant to federally assisted s or abuses alcoholer er employees and a ever concerning the tsoever. All holder	ackground checks as the HUD guidelines, site for drug related ol, and/or who is gents, and any firm or e release or use of this rs of any such	
Signature of Head of Household	1	Date			
Signature of Co-Applicant		Date			
Signature of Co-Applicant		Date			
PLEASE CHECK THE APPR How did you hear about this fac [ ] Inquiry [ ] Internet [ X ] H	ility: [ ] News <sub>]</sub>	paper Ad [ ] Church/A	gency [ ] Referra	I/Friend [ ] Telephone	
For Office Only					
Signature of Housing Administr	ator	Date			

THE FILING OF THIS APPLICATION IN NO WAY GUARANTEES YOU AN APARTMENT. A FINAL DETERMINATION OF ELIGIBILITY WILL NOT VE MADE UNTIL INFORMATION IS VERIFIED. INCOMPLETE OR UNSIGNED APPLICATIONS WILL BE RETURNED AND NOT ACCEPTED.

**EQUAL HOUSING OPPORTUNITY:** Clark Terrace II does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in its federally assisted programs and activities. Our Fair Housing Coordinator is designated to ensure compliance with the nondiscrimination requirements contained in Section 504 of the HUD Regulations and can be contacted at 516 Burchett Street, Glendale, CA 91203, Telephone (818) 247-0420 TDD: 711.