



SACRED HEART VILLAGE INC.

920 North Monroe Street
Wilmington, DE 19801-1337

Telephone: 302-654-5407

Facsimile: 302-654-6758

TTY: 302-428-0801

E-mail: mail@sacredheartvillage.org

Pre-application for Housing

1 Head of Household

Last name	First	Middle
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Number and street	Development or Housing Complex
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City	State	Zip Code
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Day Phone: _____ Evening Phone: _____ E-Mail: _____

Age: _____ Gender: _____ Annual Income: _____ Social Security Number: _____ - _____

2 Co-Applicant

Last name	First	Middle
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Relationship to you: _____

Day Phone: _____ Evening Phone: _____ E-Mail: _____

Annual Income: _____ Social Security Number: _____ - _____



(Please complete other side)



3 **Does anyone live with you now who is not listed above?** Yes No

Only two people may occupy a unit at Sacred Heart Village.

4 **Do you expect any change in your household composition?** Yes No

If you answered yes to either number 3 or 4, please explain: _____

5 **Are you now living in a subsidized unit?:** Yes No

6 **Do you or your co-applicant have any special housing needs?** Yes No

If yes, please explain: _____

7 **Are you and your co-applicant able to demonstrate the ability to comply with the terms of the lease, either independently or with assistance?:** Yes No

If no, please explain: _____

8 **Are you applying for a handicapped accessible unit?** Yes No

If yes, please explain your specific need for a handicapped accessible unit: _____

Applicant Certification:

I certify that the statements made on this pre-application form are true and complete to the best of my knowledge and belief. I understand that providing false statements or incomplete information may result in punishment under federal law.

Signature of Head of Household

Signature of Adult Co-Applicant

Date

Date