Assisted Housing Complexes Managed by Human Resource Development & Employment, Inc. Application Processing Form

| Bed | Bedroom Size: | | Accessible Unit Needed: Y N | |
|--------------------|--|---|-----------------------------|--|
| : | | | | |
| Telephone Number: | | Mailing Address: | | |
| Data | Timo | Notes: | <u>Initials</u> : | |
| | | | | |
| | | | | |
| Date: | Time: | | | |
| Date: | Time: | | | |
| Date: | Time: | | | |
| | | | | |
| uments Needed | <u>l:</u> | | | |
| Child Suppor | tTANF | Pension Alimony | Employment Annuity | |
| | | | Property er | |
| s: (Seniors/Dis | | | Medicare PhysicianOther | |
| <i>lies)</i> Child | Care | | | |
| nents Needed: | | | | |
| cateSocia | l Security Card _ | Photo ID | Landlord Verification | |
| cCrimi | nal Check | NSOPR _ | Existing Tenant Search | |
| ty Verification | | | | |
| | Date: Date: Date: Date: Date: Date: Date: Pre-Applicant Rejection of the second of the secon | Date: Maili Date: Time: Date: Time: Date: Time: Date: Time: Date: Time: Date: Time: Pre-Application Received D Rejection Letter Date: Pre-Application Received D Rejection Letter Date: Child Support TANF Other Checking Savings Life Insurance Stock/Bo ss: (Seniors/Disabled) F Illies) Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care Child Care | Date: Time: | |