



# City of San José Housing Department Affordable Housing Rental Pre-Application

### Universal Application

The following application is universal and was developed to apply to all housing opportunities. Questions asked do not apply to all opportunities, including the one you are currently applying to.

### All Household Members May Appear on Only One Application per Listing

All applications containing any person who appears on more than one application will be removed.

1. What is the address of the listing for which you are applying?

### Tell Us About Yourself

2. Your Name

3. Your Date of Birth

First Name

Middle Name (Optional)

Last Name

mm/dd/yy

4. How many people will live in the unit?

6. What is the total annual household gross (before taxes are taken out) income from all sources for every person in your household?

\$ \_\_\_\_\_ per year

5. What unit sizes are you interested in?

Although units sizes will typically be allocated based on occupancy, please provide your preferred unit size for determining your preference in this opportunity or establishing a waitlist (otherwise for only)

Do you or another member of your household have a housing voucher or subsidy?

Yes

No

Studio

1 Bedroom

2 Bedroom

3 Bedroom

3+ Bedroom

7. How did you hear about this listing?

8. How do you prefer to be contacted?

Email

Phone

Letter

Text

### Now We Need to Know How to Contact You

9. Your Residential Address

If you are homeless, enter either the shelter address or an address close to where you stay

10. Your Mailing Address

If different than your residential address

Street Address

Unit

Street Address

Unit

City

State

Zip

City

State

Zip

11. Your Phone Number

12. Your Alternate Phone Number

13. Your Email

Phone Number

Phone Number

Leave blank if you don't have one

Home

Work

Cell

Home

Work

Cell

14. Is there someone else you'd like us to contact if we can't reach you? **Optional**

First Name

Last Name

Phone Number

Email

Street Address

Unit

City

State

Zip

If you have additional contacts please include them on a separate sheet of paper and attach with your application.

15. How do you know this person?

Family Member

Friend

Other \_\_\_\_\_

Social Worker or  
Housing Counselor

\_\_\_\_\_  
Name of Agency

Applicant Information



Household Information

**Tell Us About Your Household**

**16. Who else will live in the unit you are applying for?**

Name			Date of Birth	Relationship
_____	_____	_____	_____	_____
First Name	Middle Name (optional)	Last Name	mm/dd/yy	
_____	_____	_____	_____	_____
First Name	Middle Name (optional)	Last Name	mm/dd/yy	
_____	_____	_____	_____	_____
First Name	Middle Name (optional)	Last Name	mm/dd/yy	
_____	_____	_____	_____	_____
First Name	Middle Name (optional)	Last Name	mm/dd/yy	

If you have additional household members please include them on a separate sheet of paper and attach with your application.

Someone in my household will turn 18 years old within 60 days and is a full-time student

I anticipate changes to my household within the next 12 months

**There may be assistance available for your household if you meet one of the following criteria**

- |   |   |
|---|---|
| <input type="checkbox"/> 17. Someone in my household requires a unit with ADA accessible features (Please check all that apply) | <input type="checkbox"/> 19. Someone in my household has a developmental disability or mental illness         |
| <input type="checkbox"/> Mobility <input type="checkbox"/> Vision <input type="checkbox"/> Hearing                              |   |
| <input type="checkbox"/> 18. Someone in my household has served in the US Military.   | <input type="checkbox"/> 20. Someone in my household is a transition age youth (TAY) aging out of foster care |

**21. Thinking about the past 30 days, do any of these affect your housing situation? (Answering this question will not negatively impact your chances of qualifying for housing)**

- |   |   |
|---|---|
| <input type="checkbox"/> I have somewhere to stay, but it isn't permanent<br>Includes staying with friends or family, living in a hotel/motel, or living in a medical or other facility and those who have received an eviciotn notice or will imminently lose their current residence. | <input type="checkbox"/> I'm homeless<br>Includes living outside, or in your car, or staying at a shelter, or a motel/hotel paid for with an emergency voucher. |
|---|---|

How long have you been in a temporary housing or homeless situation? \_\_\_\_\_

Not applicable



Demographics

### Demographics

In order to help us assess affirmative Fair Housing effectiveness, please check the category which best describes the race and your ethnicity of your household. Check all that apply. Optional

These optional questions will not affect your eligibility for housing in any way. Your answers are kept completely confidential and used only for statistical purposes.

#### 22. Race

American Indian or Alaska Native

Black or African American

Other

Asian

Native Hawaiian or  
Other Pacific Islander

Asian Indian

Native Hawaiian

Decline to Respond

Chinese

Guamanian or Chamorro

Filipino

Samoan

Japanese

Other Pacific Islander

Korean

White

Vietnamese

Other Asian

#### 23. Ethnicity

Hispanic

Non-Hispanic

Decline to Respond

Terms

### Terms

Paper applications must be delivered by the listed due date via US mail to the address listed.

Applicants will be contacted by the leasing agent in lottery and preference order or waitlist order until vacancies are filled. All of the information that you have provided will be verified and your eligibility confirmed. Your application may be removed from the waitlist if you have made any fraudulent statements and duplicate applications from the same household may be removed as only one application per household is permitted. Should your application be chosen for review, be prepared to fill out a more detailed application and provide required supporting documents. For more information, please contact the developer or leasing agent posted in the listing. Please contact the developer/property manager directly if there are any updates to your application. If we cannot verify a housing lottery preference that you have claimed, you will not receive the preference but will not be otherwise penalized.

Completing this housing application does not entitle you to housing or indicate you are eligible for housing; all applicants will be screened as outlined in the property's Resident Selection Criteria. We offer no guarantees about obtaining housing.

I declare that the foregoing is true and accurate, and acknowledge that any misstatement fraudulently or negligently made on this application may result in removal from the lottery

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

