



APPLICATION DETAILS

**Thank you for your interest in applying!
Please review the following information before
proceeding.**

To apply, **print off an application below**
or call **724-443-4470** to have an application mailed to you.

Once completed and signed,

Mail or drop off:

Thomas Village Apartments
ATTN: Management
5604 Community Center Drive,
Gibsonia PA 15044

OR

Scan & Email to:
thomasvillage@trekdevelopment.com

Return applications to Property @:

Thomas Village Housing
 5604 Community Center Dr.
 Gibsonia, PA 15044
 724.443.4470 Phone Number
 724.443.8355 Fax Number
 thomasvillage@trekdevelopment.com

Management Agent:

Trek Development Group
 130 7th Street
 Pittsburgh, PA 15222
 412.688.7200 Phone Number
 800.654.5984 TT Number
 412.688.0588 Fax Number

**RESIDENCY PRE-APPLICATION**

For LIHTC/HOME/Rural Development/Section 8 Properties

Date Received _____	Time Received _____ AM/PM	Applicant #: _____
Management Use Only		

You must provide all information requested on this pre-application. You will be contacted at a later time for a complete eligibility interview. All information you provide will be handled confidentially. **Incomplete applications will not be accepted.** The Resident Selection Plan and Screening Criteria which provides specific detail regarding application processing as well as additional guidance regarding waiting list preferences, if any, is posted in the rental office. Copies are available upon request.

Check which you are applying for? _____ 1 Bedroom _____ 2 Bedroom _____ 3 Bedroom

APPLICANT FULL LEGAL NAME (Last, First, Middle Initial)	<input type="checkbox"/> Male <input type="checkbox"/> Female	PREVIOUS NAMES, ALIASES OR NICKNAMES USED	
SOCIAL SECURITY NUMBER	BIRTHDATE	DRIVERS LICENSE #: State Issued:	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
E-MAIL	PHONE NUMBER		REQUESTED MOVE-IN DATE
CURRENT ADDRESS		CITY	STATE ZIP
CURRENTLY <input type="checkbox"/> RENT <input type="checkbox"/> OWN	CURRENT LANDLORD NAME		CURRENT LANDLORD PHONE #
DATES OF RESIDENCE?	CURRENT MONTHLY RENT AMOUNT?		REASON FOR MOVING

LIST ALL PERSONS WHO WISH TO RESIDE IN YOUR UNIT:

PLEASE PRINT FULL LEGAL NAME (Last, First, Middle Initial)					
SPOUSE OR CO-HEAD (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME (Last, First, Middle Initial)	Relationship	<input type="checkbox"/> Male <input type="checkbox"/> Female	SOCIAL SECURITY #	BIRTHDATE	FULL TIME STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE LIST ANY SPECIAL HOUSING ACCOMMODATIONS THAT THE HOUSEHOLD WILL REQUIRE (e.g. unit for mobility impaired, visually impaired, live-in attendant, grab bars, wheel-in showers, no steps, etc.):

SOURCES OF INCOME (All Household Members 18 years of age and older)

THIS INCLUDES, BUT IS NOT LIMITED TO, FULL AND/OR PART-TIME EMPLOYMENT, WELFARE ASSISTANCE, SOCIAL SECURITY, PENSIONS, SSI, DISABILITY, MILITARY PAY/BENEFITS, UNEMPLOYMENT, CHILD SUPPORT, ALIMONY, STUDENT GRANTS/LOANS, SELF-EMPLOYMENT, LOTTERY INCOME, INCOME FROM THE SALE OF PROPERTY, INCOME FROM TRUSTS AND ANY OTHER INCOME RECEIVED FROM PEOPLE NOT RESIDING WITH YOU.

EMPLOYER NAME	ANNUAL GROSS INCOME	DATES OF EMPLOYMENT
	\$	
OTHER INCOME SOURCE	GROSS ANNUAL AMOUNT	
	\$	
OTHER INCOME SOURCE	GROSS ANNUAL AMOUNT	
	\$	
OTHER INCOME SOURCE	GROSS ANNUAL AMOUNT	
	\$	

ASSET INFORMATION (Bank, Retirement, Real Estate, Checking, Savings, CDs, Stocks)

FINANCIAL INSTITUTION	CURRENT BALANCE
	\$
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	\$

We are required to report the Race and Ethnic Origin of every applicant's household members. Please assist us in supplying accurate information by following the key codes to complete the table below. This question is optional, and your response will have no bearing on your eligibility and shall not be used to discriminate against you in any way. If you choose not to furnish it, the owner is required to note the Race and Ethnic Origin of the Head of Household by visual observation or surname

HOUSEHOLD MBR# 1	RACE			ETHNIC ORIGIN	
First Name:	White		Black or African American		Hispanic or Latino
Middle Initial: _____	American Indian or Alaska Native		Native Hawaiian or Other Pacific Islander		
Last Name:	Asian		Do Not Wish to Answer		
Relationship to Head of Household:					

HOUSEHOLD MBR# 2	RACE			ETHNIC ORIGIN	
First Name:	White		Black or African American		Hispanic or Latino
Middle Initial: _____	American Indian or Alaska Native		Native Hawaiian or Other Pacific Islander		
Last Name:	Asian		Do Not Wish to Answer		
Relationship to Head of Household:					

HOUSEHOLD MBR# 3	RACE			ETHNIC ORIGIN	
First Name:	White		Black or African American		Hispanic or Latino
Middle Initial: _____	American Indian or Alaska Native		Native Hawaiian or Other Pacific Islander		
Last Name:	Asian		Do Not Wish to Answer		
Relationship to Head of Household:					

HOUSEHOLD MBR# 4	RACE			ETHNIC ORIGIN	
First Name:	White		Black or African American		Hispanic or Latino
Middle Initial: _____	American Indian or Alaska Native		Native Hawaiian or Other Pacific Islander		
Last Name:	Asian		Do Not Wish to Answer		
Relationship to Head of Household:					

MARKET SOURCE

<input type="checkbox"/> Property Website	<input type="checkbox"/> Current Resident Referral	<input type="checkbox"/> Housing Authority Referral		
<input type="checkbox"/> Banners/Signs/Flyers	<input type="checkbox"/> Drive by	<input type="checkbox"/> Social Media	<input type="checkbox"/> Craigslist.org	<input type="checkbox"/> Apt.Finder

ADDITIONAL REQUIRED INFORMATION

Have you ever been evicted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, when? _____		
Have you or any person who will be occupying the unit ever been convicted, pled guilty or no-contest to any crime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your household have any pets?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will your household be eligible or are you applying to receive Section 8 rental assistance in the next 12 months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you currently have a Section 8 Voucher?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

All Household members 18 years of age or older must review this application, read the statement below and then sign and date the rental application:

I/We understand that it is our responsibility to contact the Office if any of the information provided on this application changes, including but not limited to, changes in mailing address, phone numbers, and household composition.

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____

If upon preliminary review, your application appears to be eligible based upon the information you have provided, you will be placed on the waiting list. This does not indicate that you will be offered an apartment. When we expect an apartment to be available in the future, we will process your application in accordance with the Resident Selection Criteria. If this establishes that your household is not eligible or not qualified, your application will be denied.

We do business in Accordance with the Federal Fair Housing Law. We will not discriminate against any person because of race, color, religion, sex, handicap, familial status or national origin, (The Fair Housing Amendment Act of 1988). In compliance with Section 504 regulations, we do not discriminate on the basis of handicapped status in the admission or access to, or treatment, or employment in, our federally assisted programs and activities. Management will consider requests from individuals with disabling conditions or mobility impairments for reasonable accommodations in policies, practices or facilities.

Screening to verify that applicant is eligible under TREK Development Group, Inc. criteria may include a background search on the rental, credit, and criminal history for up to the past seven (7) years and determining whether the rent is affordable for the household. For the purposes of application for housing, Applicant will be defined as: the Applicant, Co-applicant and all adult family members or any adult requesting to be added to the household of a current resident.

Final decisions on eligibility cannot be made until the application and ALL verifications have been completed. If the Applicant fails to provide ALL information needed to complete the verification process, the application will be rejected. Applications will not be accepted if:

1. The application is not completed.
2. The Applicant does not have the legal capacity to enter into a legally binding lease agreement.
3. The number of persons in the household would exceed our occupancy limitations.

Applicants are required to complete an application form as consent to the release of information necessary to verify all income, household characteristics and circumstances that effect eligibility. Exceptions to the guidelines contained in this Resident Screening Criteria may be made at the discretion of the management company when it is determined that it is in the best interest of the applicant or the property to do so.

OCCUPANCY: The number of persons who may reside in the unit may not exceed the following limitations:

Number of Bedrooms	Maximum Occupants
Loft	1
1	2
2	3

CREDIT REVIEW: Management will check all available credit references. Lack of credit history shall not be grounds for rejection, but a poor credit history may be. Any application will be rejected for any one (1) of the following:

- Any one unsatisfied lien or judgment within the past three (3) years.
- Any one personal bankruptcy filed within the past three (3) years.
- Any three credit obligations which are two (2) months or more delinquent
- Any one foreclosure of real estate within the last three (3) years.
- Any one repossession of personal property within the last three (3) years.

All credit shown in the report issued by the credit bureau will reflect on both spouses in the absence of divorce and/or legal documentation that clearly separates the parties' credit responsibilities. In the case of unfavorable credit references, the responsibility of management is limited to informing the applicant that the application has been rejected based on confidential information received from the credit bureau. If the applicant believes the credit report is in error, management is agreeable to re-appraising a credit report forwarded to management by the credit bureau on behalf of the applicant which identifies corrections or additions made as a result of action taken by the applicant directly with the credit bureau. The application is, however, considered rejected until such updated information is received.

AFFORDABILITY: The household must, in our sole discretion, be able to afford the monthly rent. Generally speaking, the rent should be no more than 1/3 of the household's gross monthly income. Additional consideration and further review will be given to households who have no credit, and to those who have numerous credit obligations.

VERIFICATIONS OF PRIOR RENTAL HISTORY: Any application will be rejected for any one (1) of the following:

- Any occurrence of having left a previous rental with unpaid rent or other charges.
- Any one eviction by a previous landlord within the last three (3) years.
- Any two late payments of rent within a twelve (12) month period from a current or past housing unit (late means 5 days or more after the due date).
- Any rental history indicating that the applicant, family member or visitor was destructive to the apartment, or the surrounding area, or was responsible for disturbing the safety, security, or right to peaceful enjoyment of other residents.
- Any unauthorized alteration to the apartment that would create an insurance risk or fire hazard.
- Unsanitary living due to lack of housekeeping.
- Substantial risk that the applicant, other family members or visitors to the apartment will interfere with the health, safety, security, or right to quiet enjoyment of other residents.

CRIMINAL HISTORY: In the interest of the safety and welfare of all residents, management may conduct a criminal history check on all adult members (age 18 or older) of the applicant household. Consideration shall be given to the facts of each person's criminal history. Any application will be rejected for any one (1) of the following:

- Felony Conviction
- Misdemeanor conviction involving crimes against persons and/or property within the past seven (7) years.
- Drug Related Criminal Activity: Any conviction for the manufacture, sales, or distribution, or possession with the intent to manufacture, sell, or distribute a controlled substance within the past five (5) years.
- Designated or registered as a Sex Offender or Sexual Predator as defined by Pennsylvania Statutes.
- Any of the above related charges resulting in "Adjudication Withheld" or "Adjudication Deferred".
- Release from Jail: After a jail term is served and the applicant is released, the applicant will be required to wait a period of one year prior to submitting application
- Currently on active probation or parole resulting from any of the above.
- Arrest: If an applicant or member of an applicant's family has been arrested for a crime but has not yet been tried, the application will be suspended pending the outcome of the legal proceedings. The application will be reconsidered, with the above guidelines applied, after such legal proceedings have been concluded.

I agree to allow TREK Development Group, Inc. to do a screening to verify that I am eligible for housing.

X _____
Signature of Applicant Date

X _____
Signature of Co-Applicant Date

