

Thank you for your interest in Pathways Village Apartments

Once you have completed the application, please send the application and required documentation to:

Homeward Bound of the Grand Valley located at 2853 North Ave Grand Junction, CO 81501. All applications will be held by the Grand Junction Housing Authority until an opening occurs At Pathways Village.

Cardinal Capital Management

CARDINAL CAPITAL MANAGEMENT

Application For Residency - TC

Name of Apartment Home you are interested in: _____

How many bedrooms are you interested in? _____

Date/time received _____

List all persons that are applying to live in this unit:

Staff Initials _____

Name (Last, First, MI)	Relationship	Sex	Disabled Y or N	Social Security Number	Date of Birth
	HOH				

***Acceptable age verifications include: Birth Certificate, Driver's License or passport**

Applicant's Driver's License Number: _____

Current Address: _____
City State Zip Code

Current Daytime Phone: _____ Other Phone: _____

Email Address (Optional): _____

Do you expect to add anyone to the household within the next twelve months? YES ___ NO ___

If yes, please provide the name and relationship of the person to be added, and explain why they are being added.

Have you ever filed bankruptcy? YES ___ NO ___ If yes, please explain (include dates)

Have you or anyone listed on this application ever been convicted of a felony (or have any charges pending against them)? YES NO If yes, please explain (include dates) _____

Is anyone listed on this application required to register as a sex offender in any state? YES ___ NO ___

Please advise Cardinal Capital Management staff if you need assistance reading or completing this application

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Have you or anyone listed on this application ever been evicted? YES ___ NO ___ If yes, please explain (include dates) _____

Have you been or will you be a part-time student for at least 5 months in the current calendar year?

YES ___ NO ___

If yes, at what institution are you enrolled? _____

Have you been or will you be a full time student for at least 5 months in the current calendar year?

YES ___ NO ___

If yes, at what institution are you enrolled? _____

Do you or other adult household members anticipate becoming a full student for at least 5 months in the next calendar year? Yes _____ No _____

Do you or other adult household members anticipate becoming a part-time student for at least 5 months in the next calendar year? Yes _____ No _____

List all addresses that you have lived at within the last three years. (Attach another page if necessary)

Property Address	Dates	Did you Own or Rent	Landlord's Name	Landlord's Address/Phone
	From To			
	From To			

Will you or any adult household member require a live-in care attendant? YES ___ NO

Does the head or co-head of the household require the features of an accessible unit? YES ___ NO

Cardinal Capital Management does not discriminate on the basis of disability status in the admission or access to, or treatment, or employment in, its federally assisted programs and activities



Declaration of Income

Circle One	Description	Family Member	Source	Monthly Income
YES NO	Employment			
YES NO	Self-Employment			
YES NO	Unemployment			
YES NO	Social Security			
YES NO	Social Security (SSI)			
YES NO	VA Benefits			
YES NO	Pension/Annuity			
YES NO	Disability			
YES NO	Child Support			
YES NO	Alimony			
YES NO	Military Compensation			
YES NO	Rental Income			
YES NO	Other Income			
YES NO	Lottery Payments			
YES NO	Workers Compensation			
YES NO	In-kind contributions			
YES NO	Anticipated Income			
YES NO	Recurring Gift			



Declaration of Assets

Circle One	Description	Family Member	Financial Institution	Amount of Income
YES NO	Checking Account			
YES NO	Checking Account			
YES NO	Savings Account			
YES NO	Savings Account			
YES NO	Trust Account			
YES NO	Certificate of Deposit			
YES NO	Money Markets			
YES NO	Mutual Funds			
YES NO	Pension/Annuity			
YES NO	IRA/Keough/401 K			
YES NO	Stocks/Bonds			
YES NO	Real Estate			
YES NO	Personal Property			
YES NO	Cash (more than \$500)			
YES NO	Lump Sum Payment			
YES NO	Whole Life Insurance			
YES NO	Other			



CARDINAL CAPITAL MANAGEMENT
Documents Required (Income Restricted Application)

To help you prepare for your application appointment, and to prevent any unnecessary delays in the application process, please read over the following items you will need to bring with you. If you have any of the following, please submit the originals or copies of the most current documentation with your application.

- _____ 1. Driver's license, birth certificate, state or country ID for proof of age.
 - _____ 2. Rental history (current and previous landlord's address and telephone).
 - _____ 3. Final legal documents if separated or divorced.
 - _____ 4. Latest tax bill showing estimated market values for all owned real estate. (If this is a mobile home and is personal property, bring appraisal). If you sold a home in the last two years, bring proof of sale.
 - _____ 5. All rental properties, land contracts and mortgages owned with amortization schedules.
 - _____ 6. All whole life insurance policies with current name, address and telephone of agent.
 - _____ 7. All stock and bond certificates including Savings Bonds such as E, EE or H bonds along with latest brokerage statements and/or 1099 tax forms.
 - _____ 8. If you have received a lump sum payment, disposed of any assets, and/or changed any assets in the last 24 months, bring proof.
 - _____ 9. Social Security awards letter normally received at the beginning of the year.
 - _____ 10. Veteran's Affairs benefits letter showing claim number and name of veteran.
 - _____ 11. Pension payment information including name, address and phone number of both the company paying pension and the institution distributing pension check.
- *Power of Attorney: If applicant has designated Power of Attorney for finances and that person is signing any part of the application, a copy of the Power of Attorney document must be submitted*



Race and Ethnic Data Reporting Form

U.S. Department of Housing and Urban Development
Office of Housing

OMB Approval No. 2502-0204
(Exp. 06/30/2017)

Name of Property **Project No.** **Address of Property**

Name of Owner/Managing Agent **Type of Assistance or Program Title:**

Name of Head of Household **Name of Household Member**

Date (mm/dd/yyyy): _____

Ethnic Categories*	Select One
Hispanic or Latino	
Not-Hispanic or Latino	
Racial Categories*	Select All that Apply
American Indian or Alaska Native	
Asian	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Other	

***Definitions of these categories may be found on the reverse side.**

There is no penalty for persons who do not complete the form.

Signature

Date

Public reporting burden for this collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits and voluntary. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information is authorized by the U.S. Housing Act of 1937 as amended, the Housing and Urban Rural Recovery Act of 1983 and Housing and Community Development Technical Amendments of 1984. This information is needed to be in compliance with OMB-mandated changes to Ethnicity and Race categories for recording the 50059 Data Requirements to HUD. Owners/agents must offer the opportunity to the head and co-head of each household to “self certify” during the application interview or lease signing. In-place tenants must complete the format as part of their next interim or annual re-certification. This process will allow the owner/agent to collect the needed information on all members of the household. Completed documents should be stapled together for each household and placed in the household’s file. Parents or guardians are to complete the self-certification for children under the age of 18. Once system development funds are provided and the appropriate system upgrades have been implemented, owners/agents will be required to report the race and ethnicity data electronically to the TRACS (Tenant Rental Assistance Certification System). This information is considered non-sensitive and does not require any special protection.

Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.

1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. The five racial categories to choose from are defined below: You should check as many as apply to you.

1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.