

**Preliminary Income and Information Form
for EverGreen Real Estate Development Corporation
Affordable Communities**

If you are applying for our Section 42 affordable rental rates, please note the income guidelines for the respective property to which you are applying and provide accurate income that can be verified by third parties. If you believe you meet these guidelines, please complete this form and return it to us. If you have additional questions, please contact us at 319-390-2940. Thank you for your interest in our affordable communities.

Total Annual (**TOTAL FOR ONE FULL YEAR**) Gross wages, tips & bonuses for all household members over 18 years of age.
(Include income for individuals under 18 up to maximum of \$480.) \$ _____

Court-ordered Child Support for all children (*even if not currently received*) \$ _____

Alimony, spousal support or ongoing financial gifts \$ _____

Income from interest on bank accounts \$ _____

Assets, if over \$5000.00 \$ _____ X .02 = \$ _____

Income from rental property \$ _____

TOTAL \$ _____

Are you currently a student? YES NO If yes, part-time or full-time? (circle one)

Have you had an Unlawful Detainer or Eviction Action filed against you in the past 7 years? YES NO

Do you have any convictions on your Criminal Record? YES NO If yes, please explain: _____

(Please note that a conviction is not an automatic bar to residency, but is reviewed on a case-by-case basis against our Resident Selection Policy. You may contact us regarding limitations related to criminal and rental history. You must disclose all convictions and any charges that are pending. Failure to disclose conviction information may be cause for rejection of an application for residency.)

Please refer to the income guidelines provided on our website. If you believe that you would meet these guidelines, fill out the information below and return this form as instructed below.

Total number of Household Members _____

Requested Unit Size—CIRCLE ONE 2-BR 3-BR 2-BR, 1-STORY FULLY ACCESSIBLE

Head of Household Name(s) _____

Street Address _____

City, State, Zip _____

Phone with area code: Home _____ Work _____ Cell _____

Email Address: _____

Desired Move-in Date: _____

Please sign, date, and either fax or return this form to the office below:

Signature _____ Date

PLEASE RETURN TO:
Cedar Pond Townhomes
3025 Williams Parkway SW
Cedar Rapids, IA 52404
319-390-2940

Updated 5/1/12