



**TRAVERSE CITY HOUSING COMMISSION**

150 Pine Street, Traverse City, Michigan, 49684  
T: (231) 922-4915 | F: (231) 922-2893  
TDD: (800) 649-3777  
TCHousing.org

Dear Orchardview Townhomes Applicant:

Attached you will find the pre-application documents for **Orchardview Townhomes**, which is located at 10200 Carter Centre Road in Leelanau County. Please note that returning this completed application does not automatically place you on the property’s Wait List.

Applicants must meet household membership requirements and must also meet income eligibility. Your rent will be approximately 30% of your household’s adjusted annual income. Households are eligible for consideration for residency at Orchardview if income does not exceed the following:

3 PERSONS	4 PERSONS	5 PERSONS	6 PERSONS	7 PERSONS	8 PERSONS
\$56,650	\$62,900	\$67,950	\$73,000	\$78,000	\$83,050

Please be aware that for the Housing Commission to process your pre-application, it must be **COMPLETE**. If your pre-application is missing any information it will be returned to you and you will not be on the Wait List. So take a few moments to check all of your responses to the questions that are asked – it will save you time in the long run.

**IMPORTANT PARTS OF THE APPLICATION INCLUDE:**

1. Your name and the name of all household member listed in full along with all social security numbers, dates of birth, and your correct address.
2. Make sure ALL ADULT members of the household sign the application.
3. List the income for ALL household members and the source for that income.

By signing the application you are agreeing to contact the Housing Commission by written letter of any change to your current address or phone number. This is your responsibility.

If you have any questions regarding these documents, or the pre-application process, please contact our office directly.

Respectfully,

*TCHC Staff*

**Our Mission**

Because we know that housing is a cornerstone of a stable life, and that the lack of truly affordable housing in our region is at critical levels, the Traverse City Housing Commission exists to provide, quality affordable housing options that enhance our residents’ opportunities for self-sufficiency and economic independence. We accomplish this mission by creating housing, partnering to create housing, or through the successful management of existing housing.

# ORCHARDVIEW PRE-APPLICATION

## TRAVERSE CITY HOUSING COMMISSION



**APPLICANTS** (List each person who will reside in your household while renting the apartment):

LAST NAME	FIRST NAME	RELATIONSHIP	DATE OF BIRTH	SEX	SOCIAL SECURITY No.
1.		HEAD OF HOUSEHOLD			
2.					
3.					
4.					
5.					
6.					

Failure to provide requested information will result in an incomplete application which will be returned.

**NAME:** \_\_\_\_\_  
Full Legal Name of Head of Household

**ADDRESS:** \_\_\_\_\_  
Street City State/Zip County

**PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

- Is the Head of Household or Co-Head disabled?  YES  NO
- Does anyone in the Household require a Barrier-Free or Handicap Accessible unit?  YES  NO

**ASSETS** (List all Assets including Checking, Savings, Stocks, Bonds, Investments, Life Insurance, etc.):

FAMILY MEMBER WITH ASSET	FINANCIAL INSTITUTION WHERE ASSET IS HELD	APPROXIMATE VALUE OF ASSET

PLEASE COMPLETE THE OTHER SIDE OF THIS DOCUMENT

<b>TCHC USE ONLY</b>	Date & Time Application Received:	Staff Initials:
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