



Dear Valued Applicant:

Please be aware that Cascade Management, Inc. adheres to all Fair Housing rules and regulations and does not discriminate based on race, color, creed, religion, sex, national origin, age, sexual orientation, handicap or disability, income source, or familial status.

To ensure best fair housing practices, Cascade Management, Inc. maintains and follows either a strict Tenant Selection Standard or Criteria for Residency which is made available to all upon request or included as part of the application packet.

The attached application must be completed in its entirety and returned to the property to which you are applying. All applications submitted will be placed on the waiting list by date and time received unless it is incomplete. Incomplete applications will be returned to the applicant for completion.

Applicants must meet the eligibility requirements for the property where they are applying. Each applicant must qualify individually, and applicants listed as head, spouse and co-head must be eligible to enter a legal and binding contract.

All applicants are screened through an independent screening company. The independent screening company conducts all screening functions which could include rental history, credit check, and criminal convictions. The screening

process is consistent for all applicants. Please refer to the screening criteria if you have questions regarding these requirements.

If you have any questions, please contact the property you are interested in and they can provide you with their property details, amenities and current availability.

Thank you for your interest in Cascade Management, Inc.



For Office Use Only

Date / Time Received: _____ AM/PM

Received By: _____

Healy Heights

Physical Address:

1900 NE Bear Creek Road
Bend, OR 97701

Pre-Application for Housing

Mailing Address:

1900 NE Bear Creek Road
Bend, OR 97701

Comprehensive reusable tenant screening report is ACCEPTED NOT ACCEPTED

Unit Type Requested

Bedroom Size: (check all that apply) Efficiency Studio 1 2 3 4 5
 Project-based Section 8 Wheelchair accessibility Other: _____
 Permanent Supportive Housing (PSH), list referring service provider: _____

Contact Information

Name: _____ Phone Number: _____
 Street Address: _____ Apt. # _____
 City: _____ State: _____ Zip Code: _____
 Email Address (if applicable): _____

List each person (starting with yourself) who will occupy the unit:

Name (Last, First, Middle)	Date of Birth	Relationship to Head of Household	Social Security Number (if applicable)	Estimated Annual Income
		Self		

Please check any /all of the below that apply to your household

- Senior (55 or older) Elderly (62 or older) Disabled Homeless or at risk Veteran
- Currently have a Section 8 Voucher Currently living in a rent subsidized property
- Displaced by a government declared disaster
- Is any household member subject to a lifetime sex offender registration in any state?
- Referred by a Social Service Agency (name of agency) _____
- If age 62 or older as of January 31st, 2010 (and do not have a SSN), did you receive HUD rental assistance at another location on January 31st, 2010?
- Has anyone been evicted in the past 3 years from a Federally assisted property due to drug-related criminal activity?
- Is any household member a *full-time* student?
- Is any household member a *part-time* student?

This Pre-Application (once completed) only serves to establish your place on the waitlist. When you reach the top of our waitlist, we will contact you, process a full application, and verify all necessary information in order to determine eligibility for tenancy.

Head of Household Signature _____ Date _____



Cascade Management, Inc., does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its programs and activities. The Compliance Officer is designated as the 504 Compliance Coordinator.