Waitlist Application must be completely filled out to be accepted and reviewed

Keep this page.

Frequently Asked Questions:

- Q. What happens once I turn in my completed waitlist applications?
- Your waitlist application will be reviewed to ensure it is completely filled out, your household meets occupancy standards and the income limits. A letter will be sent to the mailing address or email listed on the waitlist application notifying you of your waitlist application status for approval. No notifications will be sent for denials.
- Q. How will I know when I get to apply for a unit?
- You will be contacted via the information provided on your waitlist application. (phone numbers, mailing address, and/or email address) when your name comes up on the waitlist.
- Q. How long until my name comes up on the waitlist?
- The wait time varies for each property and bedroom size. The average wait time is 6 to 18 months, could be longer, could be less time. Vacancies depend upon how soon people move out of units.
- Q. Do I need to update my information with the waitlist department?
- If any of your information has changed since you first applied, then yes. You need to make sure we have your most updated information so we can get a hold of you when your name comes up on the waitlist.
- Q. How do I update my information?
- Call the waitlist department at (541) 743-7164 or email <u>waitlist@svdp.us</u> to update your information.
- Q. What if I have case managers or other agencies I work with? Can you call them for me?
- We will call all the phone numbers listed on your waitlist application. Be sure to list the names and numbers of people you would like us to contact.
- Q. Do I need to check in to stay on the waitlist?
- No, you do not need to check in to stay on the waitlist.

The Minimum Occupancy for bedroom sizes are:

The Maximum Occupancy for bedroom sizes are:

SRO: 1 Person
Studio: 1 Person
Studio: 2 Person
1 Bedroom: 1 Person
2 Bedroom: 1 Person
3 Bedroom: 2 People
4 Bedroom: 3 People
4 Bedroom: 9 People

WAITLIST APPLICATION MUST BE TURNED INTO 2890 CHAD DRIVE EUGENE OR 97408

FAX: 541-687-0351 EMAIL: waitlist@svdp.us

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The Minimum Occupancy for bedroom sizes are:

SRO: 1 Person Studio: 1 Person 1 Bedroom: 1 Person 2 Bedroom: 1 Person 3 Bedroom: 2 People The Maximum Occupancy for bedroom sizes are:

SRO: 1 Person Studio: 2 Person 1 Bedroom: 3 Person 2 Bedroom: 5 Person 3 Bedroom: 7 People

Please mark the box next to the properties and bedroom sizes you are interested in.

If you do not see the property or bedroom size you want, that waitlist is not open at this time.

PROPERTY INFO Rents are subject to change BEDROOM SIZE Mark an 'X' by the one(s) you choose How many waitlist apps are we accepting? JUNCTION CITY			OFFICE USE ONLY	
Harwood Mobile Manor \$490 92100 River Road Junction City OR 97448	RV Space		50	Approved Denied

No* = Tenant pays Electric and Gas (if applicable)

Waitlists have maximum capacity limits; applications received after capacity is reached will be rejected and denied.

Waitlist applications are evaluated for list capacity, completeness, occupancy, student status and income.

^{*=}Tenant pays all utilities (Water, Sewer, Gas (if applicable), Garbage and Electric)

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Fi	rst	Last		
Mailing Address:				
	Street	City	State	Zip
Is it ok to leave a detailed messa	age at the below contacts?	'ES NO		
Phone:	Message Ph	one:		
Case Manager:	Case Manag	er Phone:		
Alternate Contact:	Alte	rnate Contact Phone	:	
Email Address:				
ousehold Composition	Check if you have chosen not	o disclose the race and	ethnicity of the hou	sehold members
CE CODES:		ETHNICITY CODES:	edifficity of the flou	senora members.
ite = 1		Hispanic or Latino = 1		
ck/African American = 2]	Not Hispanic or Latino =	= 2	
erican Indian/Alaska Native = 3				
n = 4	<u>.</u>	Not Disclosed/Missing In	0 14 2777	

	Full Legal Name	Relationship to Head of Household	Age	Sex (M or F)	Race (see above)	Ethnicity (see above)	Gross Monthly Income Amount
1)		SELF					\$ Monthly
2)							\$ Monthly
3)							\$ Monthly
4)							\$ Monthly
5)							\$ Monthly
6)							\$ Monthly
7)							\$ Monthly

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Has a	anyone that is going to be living the un	it, ever lived in St. Vincent de Paul Housing before	? <u>Yes</u> <u>No</u>
If yes	, where (property name and unit) and when	n (year)?	
List F	Head of Household:		
List a	ll household members that were 17 years of	or older:	
Pleas	e list any special needs your household	I may require in our housing (example: bars in	the bathroom, ramps,
dowr	nstairs, no stairs, upstairs, etc.):		
			-
-,		. Vincent de Paul on the household composition	
incor must	ne, & assets is accurate and complete to immediately report any changes in hou failure to report changes and/or submitt	o the best of my/our knowledge and belief. It is a sehold composition to St. Vincent de Paul. It is ing false statements of information is grounds to	further understood I/we s understood and agreed
		ALL BURGENALTION CONTAINED MEDERN (
	IGNING BELOW I/WE CERTIFY THAT BEST OF MY/OUR KNOWLEDGE.	CALL INFORMATION CONTAINED HEREIN IS	STRUE AND CORRECT TO
	Signature of Applicant	Printed Name of Applicant	Date
	Signature of Applicant	Printed Name of Applicant	————— Date
	Signature of Approant	Timed Name of Applicant	Bute
Hous		inate compliance with the nondiscrimination requirements con nting Section 504 (24 CFR Part 8 dated June 2, 1988) Voice: 541-687-5820	ntained in the Department of
Addr	ess: 2890 Chad Drive / P.O. Box 24608 Eugene, OR.	. <u>97402</u> TTY: <u>711</u>	
		erson on the basis of race, color, religion, sex, disability statu ment or employment in, its federally assisted programs and a	

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<u>OFFIC</u>	E USE ONLY	
Received Date/Time:		(Initial's)
Annual Income:	Annual Income Limit:	
Date letter was mailed:	By:	(Initial's)



