

LINCOLN PARK VILLAS O'Fallon, IL

Regional Housing Development, as Management Agent
101 W. Sheridan Rd. P.O. Box 168
Petersburg, IL. 62675
(618) 767-5600
TTY – 711 or 800-526-0844



Date Received ___/___/___
 Time Received ___ am/pm
 Date Housing is needed? ___/___/20___

PRE-APPLICATION

I am interested in a; ___ 1 BR; ___ 2 BR;

Name (Head of Household): _____
 Address: _____
 Phone Home/Cell: _____/_____

Are you interested in a handicapped accessible unit? () Yes; () No

Are you Homeless? () Yes; () No

Are you a Veteran? () Yes; () No

Please list all persons who will be living in the unit.

NAME	AGE	RELATIONSHIP
		Head of Household

OPTIONAL:
 RACE: African American ___; Caucasian ___; Hispanic ___; Other ____.

***Please turn over to complete pre-application**

I _____ (applicant) SSN ____ - ____ - ____ have applied for housing at **Lincoln Park Villas** and have indicated that I or a member of my family are eligible for a housing preference status given the following circumstances:

State Preferences

- _____ Displaced from an urban renewal area;
- _____ Displaced by a disaster, such as a fire or flood, that resulted in extensive damage or has destroyed the housing I lived in.
- _____ Displaced by an activity carried on by an agency of the United States or by any State or local government body or agency.

If you feel you qualify and are eligible for a preference status you will be required to provide a certification from a third party professional that the condition under which you believe you qualify exists.

HEAD OF HOUSEHOLD _____
Date

OTHER ADULT _____
Date

Note: If you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please call 618-767-5600.

