



Pre-Application for Market Rate and Tax Credit Properties Pike Place Market Residences

85 Pike St. # 500, Seattle, WA 98101

Each apartment building maintains its own waiting list. Please select **one** specific property you wish to apply for housing. You must complete a separate application packet per building if you wish to apply for more than one property.

➤ **Low Income Housing Tax Credit (LIHTC) Buildings**

Income and other Regulatory Restrictions Apply- Please see residential manager for more information

La Salle Apartments (Studio units only)
Must be 55 y/o or better, and/or with a disability

Western Avenue Senior Housing
Pre-application is currently closed

➤ **Market Rate Apartments**

Leland Building (Studio/1BR)

Livingston-Baker (Studio/1BR)

Sanitary Market (Studio/1BR/2BR)

Triangle Building (Studio/1BR)

➤ **Single Room Occupancy (SRO) Apartments**

Stewart House (SRO) - features shared bathrooms

Tenant and Spouse/Co-Tenant:

First Name	Last Name	MI	Birth Date	Gender (Optional -Male, Female <input type="checkbox"/> Other <input type="checkbox"/> Choose not to disclose)	Social Security Number Optional, but required during full application process <input type="checkbox"/> Choose not to disclose at this time

Head of Household Contact Information:

Interested in: First choice: ___ Studio ___ 1BR unit
Second choice: ___ Studio ___ 1BR unit
Sanitary Market only: ___Studio___1BR ___2BR

_____ Mailing Address _____ City _____ State _____ Zip Code

_____ Home Phone Number _____ Cell Phone Number _____ Message Number

_____ Alternate Contact Name or Case Manager _____ Phone Number

Other Household Members (Full or part time)

First Name	Last Name	MI	Birth Date	Gender (Optional -Male, Female <input type="checkbox"/> Other <input type="checkbox"/> Choose not to disclose)	Social Security Number Optional, but required during full application process <input type="checkbox"/> Choose not to disclose at this time

All Household Income Sources (Annual Income)

Income Source (Employer/Agency)	Gross Annual Income
	\$
	\$

Do you, or anyone named on this application request the features of a wheelchair accessible or adapted unit, downstairs vs. upstairs Apartment (if available), or site or policy accommodation or modification based on a medical condition or disability?

YES NO

If yes, what is requested? _____

Is anyone listed on this application a registered or non-registered sex offender in any State? YES NO

If yes, Who? _____ Are they subject to a State Lifetime Sex Offender Registry?

YES NO Not applicable

Is anyone listed on this application engaged in illegal use or manufacture of drugs or for which the owner has reasonable cause to believe that a member's illegal use or pattern of illegal use of a drug may interfere with the health, safety, and right to peaceful enjoyment of the property by other residents?

YES NO Comments: _____

RACE AND ETHNICITY OF HEAD OF HOUSEHOLD: This information is solicited on this application in order to assure the Federal Government acting through HUD that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information.

ETHNICITY: Hispanic or Latino Not Hispanic or Latino Choose not to disclose

RACE: American Indian/Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander
 White Other Choose not to disclose

I ACKNOWLEDGE THAT I MUST INFORM MANAGEMENT OF CHANGES TO OUR PRE- APPLICATION INFORMATION AND OF MY/OUR CONTINUED INTEREST AT LEAST EVERY 6 MONTHS IN ORDER TO REMAIN ON THE WAITING LIST. FAILURE TO UPDATE MAY RESULT IN REMOVAL FROM THE WAITING LIST.

By signing below, I am certifying that I have completed this questionnaire and that the answers that I have given are true, correct and complete to the best of my knowledge.

Applicant Signature

Date

Please return the original pre-application packet to the appropriate building/apartment you applied for.

Attachment: Criteria for Residency

Market housing community contact information:

Western Avenue Senior Housing (LIHTC) 85 Pike St. #500, Seattle, WA 98101 Phone: (206) 682.7453 Fax: (206) 625.0646 info@pikeplacemarket.org	La Salle Apts. (LIHTC) 85 Pike St. #500, Seattle, WA 98101 Phone: (206) 774-5228 Fax: (206) 774-5295 kim.barreto@pikeplacemarket.org	Leland Building 1925 First Ave., Seattle, WA 98101 Phone: (206) 774-5281 Fax: (206) 774-5282 bryan@pikeplacemarket.org	Livingston-Baker 1925 First Ave., Seattle, WA 98101 Phone: (206) 774-5281 Fax: (206) 774-5282 bryan@pikeplacemarket.org
Sanitary Market 1531 first Ave., Seattle, WA 98101 Phone: (206) 774-5229 Fax: (206)774-5290 Jack.Just@pikeplacemarket.org	Stewart House SRO 85 Pike St. #500, Seattle, WA 98101 Phone: (206) 774-5283 Fax: (206) 774-5284 eugend@pikeplacemarket.org	Triangle Building 1925 First Ave., Seattle, WA 98101 Phone: (206) 774-5281 Fax: (206) 774-5282 bryan@pikeplacemarket.org	PDA Mail Office 85 Pike St. #500, Seattle, WA 98101 Phone: (206) 682.7453 Fax: (206) 625.0646 info@pikeplacemarket.org

Pike Place Market PDA does not discriminate on the basis of race, color, national origin, religion, sex, familial status or individual handicaps. We also provide equal access to all individuals regardless of actual or perceived sexual orientation or gender identity.

We do not accept a comprehensive reusable tenant screening report at this time.

Managers Use: (OFFICE USE ONLY)

Date the Pre-Application was received: _____ Time: _____ Received by (Sign/Initial): _____

