



# Pre-Application for Housing

For SCIDpda use only
Appointment Date/Time: _____
Units Viewing: _____

## APPLICANT INFORMATION 申請人資料

**Head of Household:** \_\_\_\_\_  
 戶主姓名 First Name 名 Middle 中間名字 Last Name 姓

**Address:**地址 \_\_\_\_\_

**City:**城市 \_\_\_\_\_ **State:** 州 \_\_\_\_\_ **Zip Code:** 區號 \_\_\_\_\_

**Phone:**電話 \_\_\_\_\_ **Cell Phone:** 手提 \_\_\_\_\_ **Message Phone:** 留言電話 \_\_\_\_\_

**Email:**電郵 \_\_\_\_\_

How did you hear about SCIDPDA? 您如何知道 SCIDPDA?

Newspaper 報紙  Flyer 傳單  Internet 網上  Resident 住戶  Other:其他 \_\_\_\_\_

What type of unit are you interested in? 您希望申請哪一類型的房屋?

SRO  Studio  1 bedroom  2 bedrooms  3 bedrooms  4 bedrooms

## HOUSHOLD INFORMATION 家庭成員資料

Provide information on all household members who will occupy the unit. 請提供與您同住人的資料

A	B	C	D	E	F	G
#	First Name 名	Last Name 姓	Age	Relationship to Head of Household 與戶主關係	Full-time student in the next 12 months? 未來一年會否是全職學生?	Anticipated Annual Income 所有申請人家庭收入
1				Head of Household 戶主	<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否	
2					<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否	
3					<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否	
4					<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否	
5					<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否	

## ELIGIBILITY 資格 Please answer the following questions to help us determine your eligibility for housing programs.

請回答以下問題以便我們決定 您是否符合申請補貼房屋資格

Are you or any member of your household disabled? 閣下家中是否有殘障人士  Yes 是  No 否

Have you or anyone in your household been evicted? 閣下或所有申請家人曾被逐出居所  Yes 是  No 否

Have you or anyone in your household been convicted of any crimes? 閣下或所有申請家人是否曾違法  Yes 是  No 否

Have you or anyone in your household filed for bankruptcy or have an open bankruptcy? 閣下或所有申請家人是否破產或正在申請辦理破產手續  Yes 是  No 否

I certify that the information that I have provided is true and correct. 我保證以上資料實屬無誤

Signature 簽名 \_\_\_\_\_

Date 日期 \_\_\_\_\_

