

**INSTRUCTIONS FOR COMPLETING THE PRE-APPLICATION FOR THE:
HOUSING AUTHORITY OF THE COUNTY OF MONTEREY (HACM)**

PROJECT-BASED PROGRAMS (PBV)

Project-Based Program is a part of (HACM) Housing Choice Voucher Program. HACM has a contract with specific owners to attach Section 8 Project-Based voucher assistance for the following sites. If you are interested in any of these sites please select box on pre-application.

SALINAS PROJECT BASED

- **Buena Vista Apartments**-901 E. Market Street, Salinas (4 bdrm units) 4 units
- **Tynan Village**-Salinas (4 bdrm units) 42 unit

SOUTH COUNTY PROJECT-BASED

- **Benito Street Affordable**-Soledad (1-5 bdrm units) 24 units
- **Monterey Street Affordable**-Soledad (1-5 bdrm units) 10 units
- **Fanoe Vista-Gonzales** (1-4 bdrm units) 43 units

PENINSULA PROJECT-BASED

- **Rippling River**-Carmel Valley (1 bdrm units) 78 units
*Housing for seniors or persons with disabilities

If after leasing for one year under S8 PBV you would like to move, you are able to take the voucher with you to a unit of your choice as long as you meet program compliance.

- 1) **ANSWER ALL QUESTIONS AND PRINT CLEARLY.** Only complete and legible applications will be accepted.
- 2) Answer all questions that apply to yourself as well as each person that will be living in your household.
- 3) Mail or deliver completed pre-applications to: **Housing Authority of the County of Monterey (Main Office) @ 123 Rico Street, Salinas, CA 93907 or fax application to (831) 424-9153.**
- 4) Only pre-applications that are delivered, mailed or faxed to the above address will be accepted.
- 5) Pre-applications are placed on a computerized wait list based on the date and time received, and qualifying local preferences.
- 6) Applicants must meet the United States Department of Housing & Urban Development (HUD) income limits. The maximum income limits are listed below.

Maximum Income Limits as of May 14, 2010

NUMBER OF PERSONS IN FAMILY	1	2	3	4	5	6	7	8	9	10	11	12
Very Low Income (50% Median Income)	23,150	26,450	29,750	33,050	35,700	38,350	41,000	43,650	46,250	48,900	51,550	54,200

PLEASE NOTE: You are required to notify the Housing Authority (*in writing*) of any change of address. If we cannot contact you at the listed address, your name will be removed from the waiting list.

I certify that the information given is accurate and complete and understand any misrepresentation will disqualify the application. I authorize the owner to obtain a credit report(s) verify or check any of the information given including credit references, employment, and income and contact any previous landlords. By signing this form, I certify the information to be true and correct. **Applications cannot be processed without signature.**

Signature of the Head of household

Date

Co-Applicant's Signature

Date

Use this space to list additional family members that will live in your household.

Last Name	First Name	Sex M/F	Date of Birth	Relationship To Head of Household	Social Security Number	Monthly Income	Source of Income
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							