

TAX CREDIT WAITLIST

We are pleased that you are interested in an Impact Management Group community. We are proud of the housing we provide and hope you are able to join our community. Unfortunately, we do not have any apartments available at this time. All parties interested in being placed on our waitlist must fill out this form.

Please note the following:

1. We will only notify you by phone; therefore, you must have a number which you can be reached or where we can leave a message. We will only try to reach you three different times in the course of the first day.
2. Once a message has been left, or contact has been made, you will have 24 hours to call back and set up an appointment for a tour within 24 hours. If you select an apartment, you will be required to fill out an application and pay the \$25 application fee and hold deposit.
3. If you are not interested in the apartment at that time, you will remain on the list and try again, but we will only make four separate attempts. If you decline to rent after four attempts, you will be removed from the list. You must call our rental office to update your information every six (6) months. Failure to do so will result in removal from the waitlist.
4. If a current resident wishes to transfer to a different apartment, they can be put on the waitlist. If it isn't a medical necessity, then the resident must have been on this list to be considered. The resident must also qualify for a unit transfer to be put on the waitlist (see Unit Transfer Policy).

Name: _____

Spouse/Roommate/Other Name(s): _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Other Phone: _____ Email: _____

Number of Occupants: _____ Bedroom Size: _____ Household Gross Annual Income: _____

Applicant #1: **Gender** Male Female **Ethnicity:** Hispanic non-Hispanic Declined to Report

When do you desire an apartment? _____

Other preferences or special needs: _____

| | | | |
|-----------|------|------|---|
| | | | |
| Signature | Date | Time | AM <input type="checkbox"/> or PM <input type="checkbox"/> |
| | | | AM <input type="checkbox"/> or PM <input type="checkbox"/> |
| Signature | Date | Time | |

Management Signature: _____

Date Received by Management: _____

Office Use Only

Program Moderate Income: 30% ____ 40% ____ 50% ____ 60% ____ 80% ____ Market Rate ____



"This institution is an equal opportunity provider and employer."

