



## Pre-Application FERNDALE PARK CO-OP APARTMENTS

**FOR OFFICE USE ONLY**  
**Online Applicant**

Thank you for your interest in residing in one of CSI Support & Development's properties. We look forward to processing your application. **Please note that we will not be able to place your name on the waitlist unless this form is fully completed and signed. Please print.** Check our website at [www.csi.coop](http://www.csi.coop) or speak to a specialist at 248-542-0881 (TTD 800-348-7011) for waitlist status information. Do not hesitate to contact us with any questions about our application process, a friendly CSI staff member is just a phone call away.

**RETURN BY MAIL OR DROP OFF IN PERSON TO:**  
**Ferndale Park Co-op**  
**Attention: Leasing Specialist**  
**20800 Wyoming**  
**Ferndale, MI 48220**  
**For questions call: 248-542-0881**

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <i>Applicant Information</i> LAST NAME FIRST NAME M.I.<br>(Head of Household)                                                                                                                                                                                                                                                                                                                                                                                               |                                                          |
| TELEPHONE NUMBER AND AREA CODE<br>(       )                                                                                                                                                                                                                                                                                                                                                                                                                                 | DATE OF BIRTH<br>/       /                               |
| Name of other person who is applying for this apartment (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                    | DATE OF BIRTH<br>/       /                               |
| CURRENT ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                          |
| Street No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Street Name                                              |
| Apt. No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                          |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | State                                                    |
| Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                          |
| UNIT TYPE REQUESTING<br><input type="checkbox"/> <b>ONE BEDROOM:</b> Max. 2 persons occupancy. The head/co-head/spouse must be 62+ years old.<br>Rent \$893-\$903/month. Minimum monthly income: \$1,786-\$1,806/month (waived with Section 8 voucher).<br><br>Income limits apply:    1 Person       2 Persons<br>\$37,500/yr.    \$42,850/yr. <b>Estimate of your anticipated annual income: \$</b> _____                                                                 |                                                          |
| <b><u>OR</u></b><br><br><input type="checkbox"/> <b>TWO BEDROOM:</b> <u>Must apply through CMA- Form attached.</u> 2-4 persons occupancy. The head/co-head/spouse must be 62+ years old. Project-based Section 8 subsidy. Out of pocket rent based on 30% of certified monthly income.<br><br>Income limits apply:<br>2 Persons       3 Persons       4 Persons<br>\$41,950/yr.    \$47,200/yr.    \$52,400/yr. <b>Estimate of your anticipated annual income: \$</b> _____ |                                                          |
| <i>Income limits subject to change annually by HUD</i>                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                          |
| Are you currently receiving housing assistance from HUD or a Public Housing Agency?                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you or is any member of the household required to register with any state lifetime sex offender or other sex offender registry?                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been evicted from a property managed by CSI Support & Development for a lease violation?                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Ferndale Park Co-op does not allow smoking in any common areas, and within 25 feet of the building. Do you acknowledge that you are aware of this smoking policy?                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>X</b> _____<br>APPLICANT SIGNATURE DATE                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                          |
| <b>X</b> _____<br>CO-APPLICANT SIGNATURE (if applicable) DATE                                                                                                                                                                                                                                                                                                                                                                                                               |                                                          |

We are required by MSHDA to have your signature on file in order to be placed on the waitlist. The head of household or co-head must be at least 62 at the time we receive this pre-application in order to qualify for a unit. A limited number of apartments are available in some locations for younger persons who are physically disabled and need the special design features of a unit designed for the mobility impaired. Call for eligibility requirements. Check our website at [www.csi.coop](http://www.csi.coop) or speak to a specialist at 800-593-3052 for the status of the waitlist. Call for eligibility requirements. Please note that the building has no health support services or personal assistance.

During the application process, if your address and/or phone number is to change, it is your responsibility to provide us with the new address and/or phone number.

Pre-applications received for a closed waitlist will not be processed. If you are in search of more immediate housing, note that some of our co-ops have shorter waitlists than others. Please contact our Waitlist Department at 800-593-3052 for waitlist information.

If you are interested in reviewing our Tenant Selection Plan, you may request a copy by calling us at 586-753-9002 or emailing us at [seniorhousingmi@csi.coop](mailto:seniorhousingmi@csi.coop).

CSI Support & Development does not discriminate on the basis of race, color, religion, sex, national origin, familial status or disability or any other applicable state or local prohibitions against discriminatory practices against otherwise qualified individuals in admission or access to, or treatment or employment in, its programs and activities. If you feel you have been discriminated against, you may file a written complaint with the President of the Board of Directors of CSI Support & Development at the following address: President, Board of Directors, 8425 E. Twelve Mile Road, Suite 100, Warren, MI 48093.

Note: This facility is committed to serving all eligible and qualified individuals regardless of disability. If you need a reasonable accommodation to reside or continue to reside in this facility and have an equal opportunity to participate in the project, you should bring that fact to the management's attention. The management will try to work with you to reach an accommodation in keeping with the fundamental nature of the project and within the budgetary and administrative limits of the facility.

#### Notification of Non-Discrimination Based on Disability

CSI Support & Development does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. We have a 504 coordinator designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988): CSI Support & Development, Attn: Corporate Controller, 8425 E. 12 Mile Road, Warren, MI 48093, 586-753-9002, TDD 800-348-7011.

#### Penalties for Misusing Form

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government, HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).

