Pinnacle Property Management 1029 Mendon Road Cumberland, RI 02864 401-334-2802 Ph. 401-312-0010 Fax

## **Pre-Application**

for Housing

## Print Clearly - Illegible Applications will not be processed Please complete all sections

Management Use Only						
Date Received:						
Time Received:						
Unit Size:						

## I am interested in:

	□ Ashton Village Cumberland, RI □ Lincoln Memorial Lincoln, RI		□ <b>A&amp;H Housin</b> Cumberland, F		□ Lincoln Village Lincoln, RI	
			□ 950 Main St Pawtucket, RI	.   Newport Hts.  Newport, RI	□ The Cove I North Kingstown, RI	
	□ Langford l North Kingst					
		□ Studio	□ One BR □ T	wo BR □ Three BR	□ Four BR	
Name:			Da	ate of Birth	SSN:	
				tv/State/Zin:		•
Phone:		Email:	Nı	umber of Adults	Number of Children	_
10		ne Information:	T-4-1 M4bb-		Housing Choice Voucher?   Ye	es □No
Ea	rner of Income	Source of Income	Total Monthly Income	Current Landlor		
			\$	Length of Resid	encyRent: \$/n	nonth
			\$	Kental Address_		
			\$	Landlord Phone		
			\$	Landiord I none		
		 	2	Previous Landlo	rd Information:	
0	Asset wner of Account	S Information: Asset Type	Balance		encyRent: \$/mo	onth
	wher of Account	Asset Type	S	Rental Address_	·	
			*	Landlord Name		
			\$	Landlord Phone		
ļ			\$			
Have you	or any member of	your household	ever been convicted	l of a felony? Yes _	No	
material no Yes Have you	on-compliance of No If ye been denied housi	your lease that res, please explaining in the last 5 y	esulted in your appe : N ears? Yes N	earance in court?		y other
if yes, piea	ise explain:					
Do you red	quire an apartmen	t modified for a	wheelchair? Yes	No If yes, plea	se provide verification of need	
				ndicap or disability? Yes		
If yes, plea (Answering '	ase state what spec ino" does not preclude	cial accommodat e any subsequent requ	ions you require uest for accommodation to	to a disability). If yes, you mus	st provide verification of need.	
				on requirement under a s	tate sex offender registration progran	n? Yes
Do you ha	ve any pets? Yes	No	_ If yes, please exp	olain		
application, I not limited to	authorize Pinnacle Pr	roperty Mgmt. to ver landlord references,	ify all information provided credit history check, and	ded to determine my eligibility	complete the application process. By submitti for housing. This verification process may in understand that any false statements or misre	clude, but is
Applicant S	ignature:			Date:		_

Pinnacle Property Mgmt. 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. The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Dept. of HUD's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988.) **Executive Director, 1029 Mendon Rd. Cumberland, RI 401-334-2802.** Pinnacle Property Mgmt. provides the opportunity for persons with disabilities to request an accommodation and provides language assistance. To request, please call our office at 401-334-2802 ext. 119.



