

PRE-APPLICATION FOR HOUSING

Address applying for Lottery Wait List: Red Tail Crossing, 8333 Airport Blvd, Los Angeles, CA 90045

You can apply for the Red Tail Crossing lottery waitlist online, or alternatively, applications can be requested/ submitted via the following methods. Complete only one pre-application, multiple pre-applications will not be processed.

- Submit pre-application via email at redtailcrossing@communitycorp.org
- Submit pre-application to our 24/7 office drop box at 1410 2nd St., Suite 200, Santa Monica, CA 90401.

All pre-applications must be submitted by 11:59pm 7/31/2024.

IMPORTANT INSTRUCTIONS FOR ALL ADULT APPLICANTS IN THE HOUSEHOLD

1. Please print neatly in ink or type in answers. Do not leave any sections blank. If the requested information does not apply, write "None" or "N/A".
2. All adult household members (18 years of age or older) must sign the last page of this pre-application.
3. All information on this pre-application must be true, complete, and accurate. Incomplete pre-applications will not be accepted. Pre-applications deemed containing incomplete, misleading or false information will be denied.
4. If your pre-application is denied, you will receive a written notice stating the reason(s) for denial. You have the right to appeal our decision. Your appeal must be received in writing within 14 days from the date of the notice.
5. Submission of this pre-application does not guarantee that you or any member of your household will be approved for tenancy.
6. All documents submitted to Community Corp. become the exclusive property of Community Corp., no photocopy privileges.

Dear Applicant:

Individuals with a disability have the right to request and receive reasonable accommodations, or physical modifications, including the right to ask for auxiliary aids and services, and communications in alternative formats. Please use the contact information listed below to request a reasonable accommodation, or a physical modification.

This housing is offered without regard to race, color, religion, sex, gender, gender identity and expression, familial status, national origin, citizenship status, immigrant status, primary language, marital status, ancestry, age, sexual orientation, disability, source of income (including receipt of Section 8 and other similar vouchers), genetic information, military or veteran status, arbitrary characteristics, or any other basis currently or subsequently prohibited by law.

Contact Information:

- Phone: (310) 394 - 8487 ext 833 TDD/ TTY 711
- Email: redtailcrossing@communitycorp.org



GENERAL APPLICANT INFORMATION

HH Mbr. #	Last Name	First Name	Middle Name	Date of Birth	Last 4 digits Social Security No.
1					
2					
3					
4					
5					
6					
7					

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Email Address: _____

Mailing Address: _____
Street
City
State
Zip

1. How many people are in your household? _____
2. How many bedrooms are you looking for? _____
3. How many bathrooms are you looking for? _____
4. What is your annual household income before any deductions? Annual income is any money that adults in the household receive.: \$ _____
5. Do you have a Housing Choice Voucher or Section 8 Certificate? No() Yes() _____
6. Do you have an accessible need and/or require an apartment designed for the disabled/mobility impaired (accessible unit)? No() Yes()
 If yes, please check all applicable: _____ Mobility _____ Hearing/Visual
7. Do you require Reasonable Accommodations? No() Yes()
 If yes, please specify: _____

Additional Contact: Please provide the names, email and phone numbers for an additional contact

Contact Name	Contact Email	Contact Phone Number



Certification Statement Authorization For Release of Information
Authorization to Obtain Consumer Report by All Adult Household Members

For myself/ourselves, the undersigned, and for the minor children in our care, I/We certify the following:
I/We have read and understand the Instructions for the Application for Housing. All information we have given in this application is true, complete and accurate.

I/We understand that if the information provided on this application is deemed incomplete, Community Corporation of Santa Monica ("Community Corp.") may not accept it.

I/We CERTIFY that the information provided on this application is true and accurate to the best of my/our knowledge. I/we further understand that providing false or incomplete representations on this application constitutes an act of fraud. False, misleading or incomplete information will result in the denial of this application for housing.

I/We authorize, direct and give consent to Community Corp. to make any and all inquiries to verify the information in this application. We understand that pursuant to this Statement and Authorization, Community Corp. may request information which includes, but is not limited to, my sources of personal and business income and Social Security numbers. Further, I/we understand that such information regarding other household members included on this application may be requested. I/We understand that this Statement and Authorization cannot be used to obtain information not relevant to this application.

I/We authorize, direct and consent to the release of any information known by any federal, state or local agency, organization, business, or individual to Community Corp. which is necessary to complete and verify this application for occupancy. I/We understand that information obtained pursuant to this authorization may be used by Community Corp. in administering and enforcing its rules and policies.

The sources that may be asked to release information may include but are not limited to our present employers, present and former landlords, sources of credit information which produce "consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S. Code § 1681a(d), state and federal offices which administer programs such as welfare, unemployment, Social Security, and assistance to veterans, schools, and personal references.

I/We agree that a photocopy of this authorization may be used for the purposes stated herein. The original of this Statement and Authorization will be included in my file at Community Corp. and will have full effect for a year and one month from the date below. I/We understand I/we have the right to review our file and correct any information which we can show as incorrect.

I/We agree to notify Community Corp. in writing regarding any changes in our current household information which would make incorrect any of the information given in this application including, but not limited to our address, telephone numbers, income sources and amounts, and household composition.

I/We hereby authorize Community Corporation of Santa Monica to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I hereby expressly release Community Corporation of Santa Monica, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.

All applicants 18 years of age and older must print their names, sign and date this Authorization

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____



If all adult members of your household have not signed this Certification Statement and authorization for Release of Information, the application will be denied.

