

OFFICE USE ONLY

Date Received: _____

Time Received: _____

Library Lane Senior Residence – Pre application Card

Name (Head of Household): _____

Address: _____

Telephone: (Home) _____ (Work) _____

Do you currently hold a Section 8 voucher? () Yes () No

Unit Type Requested: _____ Studio _____ 1 BR (Please choose only **one**)

Would you be interested in a handicapped accessible unit?

() Yes () No

Do you live/work in Grayslake? () Yes () No

Annual Household Income: \$ _____

Household Data (Please list all persons who will occupy the unit.)

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Date apartment is needed: _____