

# UPCAP SERVICES, INC. MANAGED HOUSING

Westwood, North Dickinson, Grand Marais, LesCheneaux,  
Bluffs Edge, Spring Valley, Woodridge, Lake City, Empire, Bridgewood  
and Riverview Heights

OFFICE: P.O. Box 606, Escanaba, MI 49829  
PHONE: (906) 786-4701 Ext: 3036 FAX: (906) 789-5951

## APPLICATION FOR RESIDENCY

Bluff's Edge Apartments	(Norway, MI)	_____	<b>For Office Use Only</b>	
Westwood Apartments	(Kingsford, MI)	_____	Name:	_____
Spring Valley Apartments	(Caspian, MI)	_____	Date Rec'd:	_____
Grand Marais Senior Apts	(Grand Marais, MI)	_____	Time Rec'd:	_____
Riverview Heights Apartments	(Republic, MI)	_____	Unit Size:	_____
Woodridge Apartments	(Iron River, MI)	_____	Bridgewood (Escanaba)	_____
North Dickinson Apartments	(Foster City, MI)	_____	Empire Apts (Empire)	_____
Les Cheneaux Apartments	(Escanaba, MI)	_____	Lake City Apts (Lake City)	_____

### APPLICANT GENERAL INFORMATION

Applicant Name: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
Current Street Address: \_\_\_\_\_, City, State, Zip \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
List Names, addresses and phone numbers of two relatives or friends who generally know how to contact you:  
Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

### CURRENT/PAST HOUSING INFORMATION

Current Landlord: \_\_\_\_\_, Landlord Address: \_\_\_\_\_  
Landlord Phone: \_\_\_\_\_, How Long Have You Lived There: \_\_\_\_\_  
What is your current Monthly Rent? \$ \_\_\_\_\_/Month  
What are your monthly costs for all utilities except phone? \$ \_\_\_\_\_/Month  
What is your reason for leaving your present address:  
[ ] Explain \_\_\_\_\_  
[ ] Displaced due to:  
[ ] Domestic Violence [verification from local agency required]  
[ ] Government Action [Governmental verification required]  
[ ] Disaster [Acknowledgment required by fire or code enforcement officer]  
[ ] Owner Action [Certification by owner or agency required]

Substandard Housing:  
 Unsafe [Verification by local government agency required]  
 Homeless [Verification through local agency required]

Economical Reasons  
 Paying 50% of monthly income for shelter and utilities [Verification required]

What is the condition of your current housing? \_\_\_\_\_ Standard \_\_\_\_\_ Unsafe or  
 Unhealthy \_\_\_\_\_ No interior plumbing or kitchen \_\_\_\_\_ Currently without housing

FORMER LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

**HOUSEHOLD COMPOSITION AND CHARACTERISTICS**

List the head of household and all other members who will be living in the unit.  
 Give the relationship of each family member to the head.

PERSONS WHO WILL OCCUPY THE UNIT ARE		SEX	DOB	SOC SEC #	BIRTH PLACE
1.	Head of House				
2.					
3.					
4.					
5.					
6.					

  

Income:	Source	Amount	Assets: Does any family member own:	Yes	No
1.	_____	\$ _____ per _____	Real Estate	\$ _____	
	Hrs/Week: _____	Rate/Hour: \$ _____	Land Contract	\$ _____	
2.	_____	\$ _____ per _____	Savings Account	\$ _____	
	Hrs/Week: _____	Rate/Hour: \$ _____	Checking Account	\$ _____	
3.	_____	\$ _____ per _____	Stocks or Bonds	\$ _____	
	Hrs/Week: _____	Rate/Hour: \$ _____	Other Assets	\$ _____	

List all checking and savings accounts (including IRA's, Keough Accounts, and certificates of deposit) of all household members, including amounts disposed of during the past two years.

Family Member	Bank Name & Address	Account#	Current Balance
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

List value of all stocks, bonds, trusts, pension contributions, or other assets: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you own a home or other real estate?  Yes  No Have you sold or given away real property or other assets in the past two years?  Yes  No, If yes, what is the current market value of the asset? \_\_\_\_\_

Does anyone live with you now, who is not listed above?  Yes  No If yes, please explain: \_\_\_\_\_

How many people live in your home now? \_\_\_\_\_ How many bedrooms do you have? \_\_\_\_\_

Do you plan to have anyone living with you in the future who is not listed above?  Yes  No If yes, please explain: \_\_\_\_\_

Are you being evicted?  Yes  No If yes, please explain the circumstances \_\_\_\_\_

Do you request either a handicap/disability adjustment to income, or a special handicapped accessible unit or both?  Yes  No [1br] [2br] Identify any special housing needs required as a result of the handicap \_\_\_\_\_

Does any member of this family:	Yes	No	Credit References:
Receive child support or alimony?	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ per _____ 1) _____
Pay child care to work or attend school?	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ per _____ 2) _____
Receive educational grants or scholarships?	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ per _____ 3) _____
Pay medical expenses on a regular basis?	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ per _____ 4) _____
Have you ever lived in Subsidized housing before?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Where: _____ When: _____
Are you now living in a government subsidized unit (FMHA, HUD, etc., subsidized project)?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been evicted from housing?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

### CRIMINAL HISTORY

Are you currently using an illegal controlled substance?  Yes  No (if yes, explain) \_\_\_\_\_

Are any members of your family currently using an illegal controlled substance?

Yes  No (if yes, explain) \_\_\_\_\_

Has any member of your household been convicted of illegal usage, distribution or manufacture of a controlled substance?  Yes  No (if yes, explain) \_\_\_\_\_

Have you or anyone in your household ever been convicted of any felony or misdemeanor other than traffic violations?  Yes  No (if yes, explain) \_\_\_\_\_

### PERMANENT RESIDENCE CERTIFICATION

Do you certify that the unit you are applying for will be your permanent residence and you will not maintain a separate subsidized rental unit in a different location.  Yes  No

**!!! WARNING !!!**

Title 18, Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States or the Department of Housing and Urban Development.

**!!NOTICE!!**

Any attempt to obtain public housing, any rent subsidy or rent reduction by false information, impersonation, failure to disclose or other fraud (and any act of assistance to such attempt) is a crime.

We, the undersigned applicants, understand that we must contact the Landlord or Agent with current information concerning eligibility each six months, or when address, phone number or family income or family size changes. Any change in family composition which alters the unit size is required. Failure to do so, makes this application void, and another application must be submitted for the appropriate size unit.

We also understand that by signing this application, it does not give us a lease, and that other applications have been submitted ahead of ours. This application is being taken subject to approval and availability of an apartment of suitable size, based upon previous applications. The Landlord or Agent shall rely on any of the information supplied herein. By submitting this application, we agree to give the Landlord or Agent the authority to investigate our credit rating, and current and past rental history for the rental purposes only. We do, hereby, guarantee all information to be true and correct to the best of our knowledge.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

RETURN TO  
UPCAP SERVICES INC. HOUSING MANAGEMENT  
P.O. BOX 606, ESCANABA, MI 49829  
(906) 786-4701 1-800-305-8137

Ms. Beth Haywood, Site Manager  
Westwood Apts, Bluffs Edge Apts  
North Dickinson Apartments  
205 South Westwood Avenue  
Kingsford, MI 49802  
(906) 779-0847

Mr. Joe Venturato, Site Manager  
Grand Marais Apartments  
P.O. Box 32  
Grand Marais, MI 49839  
(906) 494-2446

Ms. Casey Nowlin, Site Manager  
Lake City Apartments  
5827 West Sanborn Road  
Lake City, MI 49651  
(231) 839-6006

Rick Clifton, Director  
Bridgewood Corporation  
800 South 26<sup>th</sup> Street  
Escanaba, MI 49829 (906) 786-7930

Mr. Jim Risberg, Site Manager  
Spring Valley Apartments/Woodridge Apts  
100 Spring Ave., PO Box 121  
Iron River, MI 49935  
(906) 265-9060

Ms. Dorothy Kerkala, Site Manager  
Riverview Heights Apartments  
Rte #1, Box 127H  
Republic, MI 49879  
(906) 376-8133

UPCAP Services Housing Management  
Les Cheneaux Apartments  
PO Box 606, Escanaba, MI 49829  
(906) 786-4701 Fax (906) 789-5951

Mr. Jon Lesperance, Site Manager  
Empire Manor Apartments  
10051 Michigan Avenue  
Empire, MI 49630  
(231) 326-5292

EQUAL HOUSING OPPORTUNITY



EQUAL OPPORTUNITY EMPLOYER

"In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD)."

TDD: (906) 779-0847