



BID SUBMISSION FORM

Complete this form for each unit you would like to place a bid on. **All packet information must be up-to-date before a bid can be placed.** There is a \$5.00 fee for each bid.

PROPERTY ADDRESS: _____

BID PRICE \$ _____

“APPLICANT A”

“APPLICANT B”

Name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email : _____

List the following information for all household members not listed above. Please state if you are expecting.

Name: _____

Relationship: _____

Age: _____

Name: _____

Relationship: _____

Age: _____

Name: _____

Relationship: _____

Age: _____

Name: _____

Relationship: _____

Age: _____

What is your CURRENT living situation:

Do you? Own Rent

Is your current residence? APCHA Deed Restricted Free Market

In what city is your current physical address? _____

I/We understand that to qualify for APCHA Deed Restricted/Employee Housing, I/We must not own any developed residential real estate or a mobile home located within the Ownership Exclusion Zone (as defined in the most current version of the APCHA Housing Guidelines which can be found at www.apcha.org). If free market property is owned, I/We must list it for sale prior to or simultaneously with closing on the employee housing unit. I/We sell the free market property within 180 days of the closing on the employee housing unit; otherwise, I/We must list the employee housing unit for sale according to the deed restriction covering the unit.

I/WE UNDERSTAND THAT IF I/WE RENT OR OWN OTHER DEED-RESTRICTED PROPERTY AND IF I/WE ARE FOUND TO BE OUT OF GOOD STANDING WITH THAT PROPERTY, I/WE WILL BE DISQUALIFIED FROM BIDDING/PURCHASING A UNIT WITHIN THE HOUSING LOTTERY.

I/We give APCHA permission to access my/our credit report. I/We authorize APCHA to obtain a copy of the completed loan application from the lender. I/We understand that there is a possibility of an in-complex bid for the unit specified above.

Signature: _____

Signature: _____

Date: _____

Date: _____