



**Over-the-Rhine Community Housing**  
**114 W. 14th Street**  
**Cincinnati, Ohio 45202**  
**(513) 381-1171 Fax: (513) 381-1314**

**Office use only:**  
**Date:** \_\_\_\_\_ **Time** \_\_\_\_\_  
**#BR:** \_\_\_\_\_

**PRELIMINARY APPLICATION FOR HOUSING**  
**Market Rate and Low-Income Housing Tax Credit**  
**Income Restrictions May Apply**

Thank you for your interest in renting from Over-the-Rhine Community Housing (OTRCH). Please complete this short application so that your name can be placed on a waitlist for properties managed by OTRCH. A current photo ID for the Head of Household must be presented at the time of this application. OTRCH **Resident Selection Guidelines** detail the required criteria to secure housing with OTRCH as well as our procedures for processing applications and are available for review at the front desk. **Applications will only be accepted at the OTRCH Service Center, 114 W. 14<sup>th</sup> St, Cinti OH, no fax or emailed application will be accepted. Incomplete applications or those without an ID will not be accepted.**

**PLEASE PRINT** – Must include **ALL** requested information for **EVERY** household member who will reside in the apartment.  
 (If more than five members, use back of this paper)

First Name/Middle Initial/Last Name	Relationship	Sex	Age	Date of Birth	Social Security #	Student?
1. _____	Head of Household	_____	_____	_____	_____	YES NO
2. _____	_____	_____	_____	_____	_____	YES NO
3. _____	_____	_____	_____	_____	_____	YES NO
4. _____	_____	_____	_____	_____	_____	YES NO
5. _____	_____	_____	_____	_____	_____	YES NO

Do you expect any changes in your household size in the next 12 months (ex: pregnancy, marriage, etc)? **YES NO** If yes, describe:

Current Address: \_\_\_\_\_  
 Street Apt # City State Zip

Contact Phone #: \_\_\_\_\_ Message Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

How many bedrooms are you applying for? (multiple choices acceptable; restrictions based on household size): \_\_\_\_\_

What is the total monthly household income from **ALL** sources (for employment use gross wages, before deductions): \$ \_\_\_\_\_

Do you have a Section 8 Housing Choice Voucher (HCV) or another form of rental subsidy? **YES NO** If yes type: \_\_\_\_\_

Is any household member subject to lifetime sex offender registration in any state? **YES NO** If yes, where: \_\_\_\_\_

How did you learn about OTR Community Housing? \_\_\_\_\_

OTRCH has a variety of affordable housing, all located in the Over-the-Rhine neighborhood of Cincinnati, Ohio. There are minimum income requirements, typically approximately 3 x rent (example – Rent is \$400 monthly, minimum income requirement is approximately \$1,200 gross monthly). Minimum income requirements are exempt if applicant has a housing subsidy voucher. Some housing programs have maximum income restrictions.

**Signature and Date**

I certify that all information provided on this application is accurate and complete to the best of my knowledge. I understand my responsibility to promptly report any changes to the information I have provided on this application, particularly my contact information, and that failure to do so may jeopardize my place on the wait list or cause my application to be canceled if I can not be contacted.

1. \_\_\_\_\_  
 Head of Household Signature Date Print Name

2. \_\_\_\_\_  
 OTRCH Housing Agent Date Print Name

