



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: \_\_\_\_\_

Wait List Open Period: \_\_\_\_\_

**PRELIMINARY APPLICATION FOR PROJECT BASED SUBSIDIZED HOUSING**  
**Income Restrictions Apply**

Thank you for your interest in renting from Over-the-Rhine Community Housing. 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. Our **Resident Selection Guidelines** detail the required criteria to secure housing with OTRCH as well as our procedures for processing applications. The Resident Selection Guidelines are available for review at the front desk. **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): \$ \_\_\_\_\_

Does anyone in the household need an apartment equipped with mobility or sensory features? \_\_\_\_\_ Mobility \_\_\_\_\_ Sensory

If so, do you want to be considered for an apartment that is not equipped for mobility or sensory features? \_\_\_\_\_ Yes \_\_\_\_\_ No

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? \_\_\_\_\_

All OTRCH's project based subsidized housing is located in the Over-the-Rhine neighborhood of Cincinnati, Ohio. Please mark below the housing you are interested in renting (multiple selections are permitted):

- \_\_\_\_\_ Carrie's Place - 1, 2, 3 & 4 BR (scattered sites on E. Clifton & Peete)  
\_\_\_\_\_ Carl Apartments - Efficiency, 1, 2 & 3 BR (128 Findlay Street)  
\_\_\_\_\_ Elm St. Senior Housing - 1 BR (1500 Elm Street, **must be 62 years or older**)  
\_\_\_\_\_ Morgan Apartments - Efficiency, 1, 2, 3 BR - (scattered sites on E. Clifton, W. Clifton & Vine)  
\_\_\_\_\_ Washington Park - 1 & 2 BR (1424 Republic)

**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, 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

