



SUBMISSION BID 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 – **CASH OR CHECK ONLY (SMALL BILLS PREFERRED)**.

PROPERTY ADDRESS: _____ BID PRICE \$ _____

“APPLICANT A”

“APPLICANT B”

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

List the following information for all household members:

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

Please check all applicable.

Do you? Own Rent

Is this property? Deed Restricted Free Market

Where is this property located? _____

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 in the Ownership Exclusion Zone. 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: _____

