



*"Meeting the affordable housing needs of the community"*  
6329 NE Martin Luther King Jr. Blvd., Portland, Oregon 97211  
Phone: 503-288-2923 Fax: 503-288-2891

Dear Applicant:

Enclosed please find our Affordable Housing Waitlist application & screening criteria. The application must be completed in full by all adults 18 years or older in order to be accepted. In addition, we require current paystubs, at least 1 months' worth (if employed, per employer), current unearned income award letter (TANF, SSI, UI, etc), photo ID, **and** a copy of your most recent income tax filed.

Please complete all areas on your application as incomplete applications will NOT be accepted. Provide all required documentation as missing documentation will also result in your application NOT being accepted.

Please return your completed application, income documents & photo ID for each adult (18 years or older) in the household to: 6329 NE MLK Jr. BLVD, Portland, Oregon 97211 or fax to 503.288.2891 to be placed on our waitlist. If faxing, call to verify fax was received & readable.

Enclosed is a copy of our screening criteria for your information. Please read it carefully. You do not need to return it to our office. It is yours to keep.

Once we receive your completed application, income documents and a copy of your phot ID, your application will be date stamped/time recorded, and entered into the system. We ask that you give us a call or stop by our office should your information change (ie: phone number, mailing address, email address, household number changes or financial situation).

If you have any questions, please give us a call at 503.288.2923.

Thank you for your interest in becoming a PCRI resident!

Sincerely,  
PCRI Staff



Affordable Housing  
**RENTAL APPLICATION**  
TO BE COMPLETED BY EACH ADULT APPLICANT

<b>PCRI USE ONLY</b> (Date/Time Received)
By: _____

**Bedroom Size Preference:** (Check box for all that apply: note – Our program requires a minimum of one household member per bedroom size. You can select more than one unit size if applicable.)

ST	1 BR	2 BR	3 BR	4 BR	5 BR
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Your Current Address		City	State	Zip Code
Cell Phone	Home Phone		Email Address	
Emergency Contact : Name		Address		Phone
How did you hear about PCRI?				

List each household member (including self) who will occupy the unit						
First Name	Last Name	F/M	Date of Birth	Relationship to Head of Household	Social Security #	Driver's License #/ State
1				Self/Head		
2						
3						
4						
5						
6						
7						
8						

Rental History (minimum of 5 years previous rental history required – Include current residence information)				
Name & Phone # for Landlords	Address You Occupied	Move In Date	Move Out Date	Reason for Leaving

**For Statistical Purposes Only:**

**RACE**

White     American Indian or Alaska Native     Asian     Black or African American

Native Hawaiian or Pacific Islander     Other

**ETHNICITY**

Hispanic or Latino     Non-Hispanic/Non-Latino



