TULALIP TRIBES OF WASHINGTON

TOWNHOMES PRE-APPLICATION

6406 Marine Dr.

Tulalip, WA. 98271

Tulalip Tribal Membership:

PLEASE READ BEFORE COMPLETING PRE-APPLICATION:

By completing this pre-application for housing, you are requesting to be placed on a *List of Interest* for Tulalip Townhomes. You will then be added to the list if you are determined to be income-eligible and contacted once applications are open. Please ensure that you provide your preferred contact method.

THINGS TO KNOW:

- An applicant must be a Tulalip Tribal Member and be able to provide proof of tribal enrollment.
- Head of household must be at least 18 years of age at the time of final application. The family must have an annual income at the time of occupancy that meets and does not exceed the established income limits, as determined by the Area Median Income (AMI) at the time of admission. That rate is designated at 50% or 60% AMI, depending on the family size and category you are eligible to fill.
- Applicants and all members of the family must provide social security numbers or certify that they do not have social security numbers at the time of the initial eligibility interview.
- Applicant or any member of the family who currently owes rent or other amounts to Tulalip Tribes Housing or its entities will not be eligible until the outstanding balance is paid in full.
- Good rental history. NO evictions, clear background checks, and passing UA.
- No criminal record, including no registered sex offender or conviction of violent crimes.
- All taxable household income is used to determine eligibility (general welfare is not considered taxable income) but can be used to substantiate your ability to pay rent.
- If divorced, you will need proof of 50% custody of any children who will be living in your home
- Applicants must provide their latest pay verification from their employer/s. Upon proceeding with the application process, a 1040 Income Tax Form from the prior year is required.

Table 1 on page 2 lists the number of bedrooms available, category eligibility, and the Area Median Income (AMI) for each household size, as per the U.S. Department of Housing and Urban Development Income Limit.

Table 2, also on page 2, refers to the Seattle-Bellevue, WA HUD Metro FMR Area, which is what the Tulalip Tribes will use for income limits for the Townhomes (as of June 2025).

Note: Any households with a disability member are encouraged to apply as there will be three ADA units available.

TULALIP TRIBES TOWNHOMES PRE-APPLICATION TABLES:

Table 1

Number of Bedrooms	2	2	2	3	2	3	2	2
Category	ADA Unit No stairs/ primarily for physically disabled occupants.	ADA Unit Two-story unit with stairs/ primarily for disabled occupants without physical impairments.	Village of Hope	Village of Hope	Families	Families	General	General
AMI	50%	60%	50%	60%	50%	60%	50%	60%
Number of Units Available	2	1	2	2	1	1	1	2

Table 2

AMI	1-Person	2-Person	3-Person	4-Person	5-Person	6 -Person	7- Person	8-Person
50% Limits	55,000	62,850	70,700	78,550	84,850	91,150	97,450	103,700
60% Limits	66,000	75,420	84,840	94,260	101,820	109,380	116,940	124,440

The Tulalip Tribes have a responsibility to maintain stable and safe living environments for all its residents. For this reason, each applicant will be screened for tenant suitability, which consists of, but is not limited to a criminal background check (including drug-related criminal activity), a credit check (Tulalip Tribes and its entities only), and an inquiry into your previous rental history. After completing your pre-application, email to villageofhope@tulaliptribes-nsn.gov or regular mail to 6406 Marine Dr., Tulalip, WA. 98271.

Pre-Rental Application

Tulalip Tribes Tulalip Townhomes

Personal Information:

Applicant Full Name: _____ Tribal Number: _____ Birth Date: _____

Social Security #_____ Driver's License _____Phone#_____

Email Address _____Preferred Method of Contact: _____

Other Occupants

Full Name – First, Middle, Last	Birth Date	Relationship to Applicant

Employment History (past five years)

Name:	Current Employer	Previous Employer
Employed by		
Position		
Dates of Employment		
Monthly Income		
Address of Employer		

Income: List of monthly gross income for ALL household members:

Household Members	Wages/Salary Gross	Unemployment Benefits	SSI/SSDI	TANF/GAU	Other Specify Source
2					
3					
4					
5					
6					
7					

_____ _____

Head of Household Signature (required) **Date:**