



Trumbull Housing Authority – Wait List Pre-Application

State Elderly/ Disabled Housing Program
203-261-5740

200 Hedgehog Circle Trumbull, CT 06611- www.sternvillage.com

PRE-APPLICATION- SELECTION WILL BE BY RANDOM DRAW LOTTERY

Applicant(s) whose names are drawn will be notified via U.S mail by July 14th, 2025

Efficiency apartments / One-bedroom Apartments ONLY- No Families Accepted

All Apartments are Smoke Free

Pre-applications must be postmarked by June 27th, 2025

All Pre-applications received before June 9th, 2025, or after June 27th, 2025, will be rejected

Pre-applications are to be returned by **MAIL ONLY** and must meet the postmark date of June 9th, 2025, through June 27th, 2025, **OR** when 150 people have been accepted. Please print clearly!

Applicants MUST be 62 years of age or 18 years of age and disabled certified by Social Security
Income limits are \$71,650 for ONE (1) PERSON & \$81,850 for TWO (2) PEOPLE (limits vary each year)

Head of Household (HOH) Information

Name of Applicant: _____

Date of Birth: _____ Age: _____

Street Address: _____ Apt. or Fl.# _____

City, State, Zip Code: _____

Telephone Number: _____

Social Security Number Head of Household ____ - ____ - ____

Gross Monthly Income: _____ **List All Source(s) of Income:** _____

Preferred method of contact: Email, Text, Phone call, Mail (please circle one and provide information below)

Spouse or Co-head Name (if applicable): _____

Date of Birth: _____ Age: _____

Social Security Number: ____ - ____ - ____

Gross Monthly Income: _____ **List All Source(s) of Income:** _____

It is the responsibility of the applicant to keep the THA informed with current information: change in address, phone number, and/or family composition. Failure to do so, can result in you not receiving mail or a "Return To Sender" which would then result in a withdrawal from our waitlist.

Signature of Head of Household: _____ **Date:** _____

The Trumbull Housing Authority does not discriminate based upon race, color, disability, financial status, religion, sex, sexual orientation, or national origin. In order to provide an adequate pool of persons likely to qualify for the State Elderly/Disabled Housing Program, no less than 150 pre-applications will be chosen. Questions may be directed to 203-261-5740 x1. Se habla Español.