

For Internal Use Only

Date Received: _____

Number: _____

**Historic Chicago Bungalow Initiative
Illinois Department of Housing Matching Grant
Pre Application Form**

Name (Head of Household): _____

Bungalow Member Number: _____ **Social Security Number(s):** _____

Bungalow Address: _____

City/State: _____ **State:** _____ **Zip Code:** _____ **Ward:** _____

Telephone # (Home) : _____ **(Work):** _____

Is this your primary address? _____

Number of legal residents in the house: _____

Annual Gross Household Income: _____

**Return to:
Historic Chicago Bungalow Association
IHDA Grant Program
1 N. LaSalle, 12th Floor
Chicago, IL 60602**