Thank you for your interest in Pawtucket Central Falls Development apartments. We strive to provide quality, affordable housing choices throughout Pawtucket and the Central Falls communities of Rhode Island. PCF Development has built and own nearly 300 rental homes in Pawtucket and Central Falls. Our apartment communities offer quality and affordable housing units to both residents and the community-at-large.

Please be sure to fill out this pre-application and submit the requested documents. If the pre-application is not complete and all documents requested are not submitted, the application will be considered incomplete and will not be processed. If a question does not apply to your situation, please mark N/A—do not leave it blank. When calculating income, please provide the MONTHLY amount you receive BEFORE taxes are taken out (not weekly or bi-weekly).

Please identify the portfolio you want to apply for:

Barton St. Neighborhood		Branch Blackstone		PCFDC	
Blackstone Valley Gateway		Central Development		Residences at Garden St	
Blackstone Valley Gateway II		PCDC Homes		RRIC	

PLEASE RETURN YOUR COMPLETED, SIGNED APPLICATION AND SUPPORTING DOCUMENTS TO THE ADDRESS BELOW:

Property Management Office

15 Circle Street, Rumford, RI 02916

FOR ADDITIONAL INFORMATION, PLEASE CONTACT our affordable housing team at:

Email: affordablehousing@stonelinkpm.com | Phone: (401) 389-7700

PCF Development also offers the following:

• Homes for sale for first-time homebuyers

• A Homeownership Program that includes homebuyer education courses in English and Spanish, along with one-on-one counseling to discuss credit, budgeting and savings to help you achieve your dream of homeownership

For more information about PCF Development's Homeownership Program, please contact:

Dianny Melusky, Director of Homeownership

Email: dmelusky@pcfdevelopment.org | Phone: (401) 726-1173 x12

Effective: October 28, 2026

STONELINK
PROPERTY MANAGEMENT

Dear Applicant:

Please bring the following documentation for all household members planning to occupy the apartment.

- Photo ID for all household members 18 years and older
- Social Security Cards for all members
- Birth Certificate/Passports for all minors
- Alien Registration/Permanent Resident Card, if Non-Citizen

Income Documentation for all members (if applicable)

- Full Months of Paystubs:
  - 9 most recent paystubs, if you get paid weekly, or
  - 6 most recent paystubs, if you get paid bi-weekly
- If self-employed, most recent full tax return (complete with 1040s, Schedule C and SE, 1099's)
- Current Award Letter if receiving Social Security/SSI/SSP, AFDC/FIP (letter not older than 30 days) with printed balance receipt from ATM along with copy of Direct Express Card.
- Child Support/Alimony Information (ex. Court Order/ 13 Month Print Out)
- Any other source of Income with name and address

Please note if all documentation is not received with your application at the time of submission, your application will be deemed incomplete and will not be placed on the current waitlist.

Any potential tenants over the age of 18 must provide a photo ID, all sources of income and/or student transcript. Additional documents for income and assets may be required.

If you have any questions regarding the application, please contact our office at 401-389-7700.

Thank you for your interest.

STONELINK
PROPERTY MANAGEMENT

Bedrooms needed: _____

Name: _____ _____ Date of Birth: _____

Last 4 digits of SSN: _____

Street Address: _____ City/State/Zip: _____

Phone: _____ Secondary Phone: _____ Email: _____

Household Information

Name	Relationship to Head	Birth Date	SSN (Last 4)	Student Y/N
Head	Self			
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Residential History

Current Landlord Information:

Length of Residency: _____ Rent: _____

Name: _____

Address: _____

Phone: _____ E-mail: _____

Previous Landlord Information:

Length of Residency: _____ Rent: _____

Name: _____

Address: _____

Phone: _____ E-mail: _____

Employment Information

Current Employer #1: _____ Address: _____

Phone Number: _____ Length of Employment: _____

Position: _____ Net Salary Amount: _____

Current Employer #2: _____ Address: _____

Phone Number: _____ Length of Employment: _____

Position: _____ Net Salary Amount: _____

Other sources of income:

Type: _____ Amount/Frequency: _____

Type: _____ Amount/Frequency: _____

Have you or any member of your household ever been convicted of a felony?

Yes _____ No _____

Have you or any member of your household ever been evicted?

Yes _____ No _____

Effective October 28, 2026
Phone: (401) 389-7700

STONELINK
PROPERTY MANAGEMENT

ADDITIONAL LIHTC & HOME INFORMATION

Please complete the sections below. If a question does not apply, mark N/A. Do not leave blanks.

LIHTC Full-Time Student Status

Will all household members be, or have been, full-time students for at least five calendar months during the current calendar year, or do they plan to be during the next calendar year? Yes _____ No _____

If Yes, check all exemptions that apply:

_____ A full-time student is married and files a joint tax return.

_____ A student is enrolled in a qualifying job-training program receiving assistance under applicable federal, state, or local law.

_____ A full-time student receives TANF / Title IV assistance.

_____ A full-time student is a single parent living with child(ren), and neither the parent nor child(ren) is claimed as a dependent by another person other than a parent of the child(ren).

_____ A student was previously under the care and placement responsibility of a foster care program under Part B or E of Title IV of the Social Security Act.

HOME Student Status (complete for each household member)

Household member name: _____

Is this person enrolled, full-time or part-time, at an institution of higher education (college, university, community college, or vocational school beyond high school)? Yes _____ No _____

If Yes, check all that apply:

_____ Is a dependent of this household

_____ Is 24 years of age or older

_____ Is married

_____ Is a veteran of the U.S. military

_____ Has a dependent child living in the unit

_____ Is an orphan or ward of the court

_____ Is a person with disabilities who was receiving Section 8 assistance as of November 30, 2005

If none apply, complete the following:

_____ Has lived independently of parents or guardians for at least one year, or meets the U.S. Department of Education definition of an independent student

_____ Is not claimed as a dependent by parents or guardians on their most recent tax return

_____ Parents or guardians have certified the amount of any financial support provided

If the student is not independent, the parents' or guardians' income must be verified and must be at or below 80% AMI.

Repeat this section for each applicable household member (attach an additional sheet if needed).

STONELINK
PROPERTY MANAGEMENT

Asset Income

For each asset/account listed in this application, provide the amount of income you expect to receive from that asset during the next 12 months.

Household Member / Owner	Asset / Account Type	Current Balance / Value	Expected Income - Next 12 Months

Assets Disposed of for Less Than Fair Market Value

Within the last two (2) years, have you or any household member disposed of any asset for less than fair market value, including giving away money or property? Yes _____ No _____

Asset / Property	Date Disposed (mm/dd/yyyy)	Fair Market Value	Amount Received

STONELINK
PROPERTY MANAGEMENT

RACE, ETHNICITY & 811 PROGRAM INFORMATION

Race and Ethnicity

The following information is collected for housing program reporting purposes. Complete for each household member. We ask this to meet federal reporting requirements and to monitor fair housing compliance. Answering is voluntary. Your answer, or your choice not to answer, will not affect your application, eligibility, or place on the waiting list.

☐ I choose not to answer

Household Member	Ethnicity	Race (check all that apply)
_____	Hispanic/Latino _____ Not Hispanic/Latino _____	American Indian/Alaska Native _____ Asian _____ Black/African American _____ Native Hawaiian/Other Pacific Islander _____ White _____
_____	Hispanic/Latino _____ Not Hispanic/Latino _____	American Indian/Alaska Native _____ Asian _____ Black/African American _____ Native Hawaiian/Other Pacific Islander _____ White _____
_____	Hispanic/Latino _____ Not Hispanic/Latino _____	American Indian/Alaska Native _____ Asian _____ Black/African American _____ Native Hawaiian/Other Pacific Islander _____ White _____

SUPPLEMENTAL APPLICATION INFORMATION

General Housing Information

Current housing: [ ] Rent [ ] Own Bedrooms in current unit: _____

Current monthly rent or mortgage payment: $_____

If you own your home, do you receive rental income from it? [ ] Yes [ ] No

Utilities paid by household: [ ] Heat [ ] Electricity [ ] Gas [ ] Other: _____

Approximate monthly utility cost (excluding phone/cable): $_____

Household Composition Details

Will all listed minors live in the unit at least 50% of the time? [ ] Yes [ ] No

If no, explain custody arrangement: _____

Any changes in household composition in the last 12 months? [ ] Yes [ ] No

If yes, explain: _____

Do you anticipate changes in household composition in the next 12 months? [ ] Yes [ ] No

If yes, explain: _____

Is someone not listed who would normally live with the household? [ ] Yes [ ] No

If yes, explain: _____

Is anyone currently living with you who will not move into this unit? [ ] Yes [ ] No

If yes, explain: _____

Vehicle and Pet Information

One vehicle is permitted per household. Additional vehicles are not permitted.

Vehicle type: _____ License plate: _____

Year / Make: _____ Color: _____

Do you own any pets? [ ] Yes [ ] No

PCF Development has a No Pet Policy. Assistance animals, including service animals and emotional support animals, may be permitted as reasonable accommodations in accordance with applicable fair housing laws. Supporting information may be requested when legally permitted; documentation is not required where the disability and disability-related need are readily apparent.

If yes, describe: _____

Application Assistance

Did anyone assist you in completing this application? [ ] Yes [ ] No

If yes, who assisted and why? _____

PLEASE NOTE THAT THIS IS A PRELIMINARY APPLICATION AND IN NO WAY INSURES OCCUPANCY. ADDITIONAL INFORMATION MAY BE REQUESTED TO COMPLETE PROCESSING OF YOUR APPLICATION. YOUR SIGNATURE GIVES WRITTEN CONSENT TO THE MANAGEMENT TO VERIFY INFORMATION IN THIS APPLICATION. A FALSE STATEMENT OR MISREPRESENTATION ON YOUR APPLICATION WILL AFFECT THE APPROVAL OR RESIDENCY.

POR FAVOR, TENGA EN CUENTA QUE ESTA ES UNA SOLICITUD PRELIMINAR Y DE NINGUNA MANERA ASEGURA LA OCUPACIÓN. ES POSIBLE QUE SE SOLICITE INFORMACIÓN ADICIONAL PARA COMPLETAR EL PROCESAMIENTO DE SU SOLICITUD. SU FIRMA DA SU CONSENTIMIENTO POR ESCRITO A LA GERENCIA PARA VERIFICAR LA INFORMACIÓN EN ESTA SOLICITUD. UNA DECLARACIÓN FALSA O UNA REPRESENTACIÓN ERRÓNEA EN SU SOLICITUD AFECTARÁ LA APROBACIÓN O LA RESIDENCIA.

ALL INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:
TODA LA INFORMACIÓN ES VERDADERA Y COMPLETA A MI LEAL SABER Y ENTENDER:

_____ _____

Signature of head of household | Firma del cabecilla del hogar — Date | Fecha

_____ _____

Signature of co-head of household | Firma del co-cabecilla de la familia — Date | Fecha

_____ _____

Signature of Adult Applicant | Firma del solicitante adulto — Date | Fecha

_____ _____

Signature of Adult Applicant | Firma del solicitante adulto — Date | Fecha