ORANGE COUNTY HOUSING AUTHORITY MENTAL HEALTH SERVICE ACT (MHSA)/PROJECT BASED VOUCHER APPLICATION CAPESTONE APARTMENTS

The Orange County Housing Authority (OCHA) is accepting applications for Project Based Vouchers (PBVs) for an affordable housing project consisting of **nineteen (1) bedroom** apartments at **Capestone Apartments**. This PBV can only be used to receive housing assistance at Capestone Apartments. In accordance with Chapter 17, Part VI, C of the OCHA Administrative Plan, eligible applicants on OCHA's Housing Choice Voucher (HCV) waiting list who indicated an interest in moving to a PBV property have been notified of this opportunity. This opportunity is now being extended to other eligible persons who meet the requirements listed below and may qualify for a PBV apartment. Interested persons must meet both eligible criteria and must follow the instructions below. The application period for this project will remain open until further notice.

Capestone Apartments is an affordable housing complex for disabled families who have special needs and is located at 9501 W. Cerritos Avenue in Anaheim. California.

| at 9501 W. Cerritos Avenu | ue in Anaheim, Cal | ifornia. | · | |
|---|--|---|--|----|
| Total Household Income n | nay not exceed 30 | % of Orange Co | ounty Area Median Income as indicated below: | |
| Maximum Income | <u>1 Person</u> \$22,980 | 2 Person \$26,250 | <u>3 Person</u> \$29,520 | |
| To be eligible for the MHS | A units, property o | wners will acce | ept applicants who meet the following criteria: | |
| 1. Mental Health Servi | ces Act (MHSA) I | Eligibility (mu | ust check at least 1 box) | |
| ☐ Adult or older adult wit 5600.3) ☐ Individual has a co-occ | · | | illness (as defined in Welfare and Institutions Code ce abuse disorder | |
| 2. Homeless or At Risk | _ | | | |
| upon release Temporarily living in a Facing eviction & unable Living in an overcrowde "Doubling up" or "couce Living in motels, hotels If you meet both eligible complete this form and face MHSA Eligibility Certification and referred by OC Health | residential care far le to identify a new ed setting in which h surfing" due to e s, trailer parks or c le criteria 1&2 at x to Orange Count on. Please do not in Care Agency. | cility residence they do not ho conomic hardsh amp grounds pove and are in y Health Care A | amp, psychiatric hospital or IMD) and will be Homeless old a lease hip Iterested in applying for these MHSA PBV units, please Agency (OCHCA) at 714-667-3968 to obtain an approve age County Housing Authority as you must be screene | d |
| By completing this form the above information v | | | authorize Orange County Housing Authority to sha bility purposes. | re |
| Name: | | Signature: | | |
| Telephone #: () | Ema | nil: | | |
| Contact Address: | | | | |
| Family size: | | | | |