



Affordable Homes For Rent in Redmond, Washington

Studio, one-bedroom, and two-bedroom rentals available through the affordable housing program for qualifying future residents at Avalon Esterra Park

Avalon Esterra Park residents are responsible for electric, phone, and cable utilities. Additional monthly fees apply for premium parking and pets. An increased security deposit will be required for households with pets.

HOUSEHOLDS MUST BE WITHIN THE INCOME LEVELS BELOW TO QUALIFY
Monthly rent is based on the Area Median Income (AMI)

80% PROGRAM

STUDIO: \$1,219 PER MONTH

1 person household \$29,256 - \$53,760

2 person household \$29,256 - \$61,400

ONE-BEDROOM: \$1,388 PER MONTH

1 person household \$33,312 - \$61,400

2 person household \$33,312 - \$61,400

3 person household \$33,312 - \$69,120

TWO-BEDROOM: \$1,546 PER MONTH

2 person household \$37,104 - \$69,120

3 person household \$37,104 - \$69,120

4 person household \$37,104 - \$76,800

5 person household \$37,104 - \$82,944



AVALON

Esterra Park

AVALONESTERRAPARK.COM
2690 152ND AVE NE, REDMOND, WA 98052
AVALONESTERRAPARK@AVALONBAY.COM

*Rents subject to change at anytime without notice. Apartments contain FHA compliant features for persons with disabilities.



Avalon Esterra Park Affordable Housing Pre-Application

Applicants with disabilities may request modifications to the rental unit and/or accommodations to our rules, policies, practices or services, if such modifications or accommodations are necessary to afford an equal opportunity to use and enjoy the premises

NAME OF PRIMARY APPLICANT: _____

PHONE: _____ **CELL:** _____ **EMAIL:** _____

CURRENT ADDRESS: _____
Street Number & Name *City* *St* *Zip*

1. What size apartment home(s)* are you interested in? **Studio** **One** **Two**

***Note: Minimum occupancy requirement one person per bedroom.**

2. Does your household need an accessible apartment? (*circle one*): **Yes** **No**

3. Do you have a voucher? (*circle one*) **Yes** **No**

If Yes, Housing Authority Name: _____

4. Do you have any special housing needs? **Yes** **No** If yes, please explain: _____

5. Family Composition- List all those who will occupy the apartment, including yourself:

HOUSEHOLD MEMBER NAME	Date of Birth	Age	Relationship*	Full Time Student (Y/N)
1 PRIMARY APPLICANT			Head	
2				
3				
4				
5				
6				
7				

6. **Household Income-** what is the income received and assets held by each member of your household? Include income from employment, SSA/SSI, TANF, Child Support, Alimony,

INTERNAL USE ONLY:

Received Date: _____ Received By: _____

Complete
Incomplete

Retirement, pension, unemployment, Military Pay, and gift income.

Household Member Name	Income Type	Gross Earnings (before taxes)

7. What is your combined total gross annual household income from all sources? \$_____

8. **Household Assets**- include the household assets held may each household member. Includes all Checking and Savings accounts, Money Markets, Stocks, Bonds, Life Insurance Policies.

Household Member Name	Asset Type	Cash Value

Please call 425-558-9368 or email AvalonEsterraPark@avalonbay.com with any questions or requests for additional; applications or consent forms.

Return Form to directly to community or email: 2690 152nd Ave NE, Redmond, WA 98052-
AvalonEsterraPark@avalonbay.com

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Complete
Incomplete