

Office Use Only

Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM                      Application # \_\_\_\_\_

Complete application package received by \_\_\_\_\_, Manager

Notes-

*Updated-*

\_\_\_\_\_

\_\_\_\_\_

**Graceworks Housing Services**  
**APPLICATION FOR HOUSING**

Applicant Name \_\_\_\_\_ Phone Numbers \_\_\_\_\_/\_\_\_\_\_

Current Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Do you need help (reasonable accommodation) completing this application due to a disability?    Yes                      No

If yes, please explain \_\_\_\_\_

**List Information Below For Two Relatives or Friends Who Generally Know How to Contact You:**

1. Name \_\_\_\_\_                      2. Name \_\_\_\_\_

Address \_\_\_\_\_                      Address \_\_\_\_\_

Phone # \_\_\_\_\_                      Phone # \_\_\_\_\_

**HOUSEHOLD COMPOSITION AND CHARACTERISTICS**

**List the Head of Household & all other household members who will be living in the assisted unit. Give the relationship of each family member to the head of household.**

| Member's Full Name | Relation | Birth Date | Birth Country | Age | Sex | Social Security # |
|--------------------|----------|------------|---------------|-----|-----|-------------------|
|                    | Self     |            |               |     |     |                   |
|                    |          |            |               |     |     |                   |

*For statistical purposes only. Check appropriate boxes.*

|                                             |                          |                          |                          |                          |                                            |                          |
|---------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------------|--------------------------|
|                                             | <u>White</u>             | <u>Black</u>             | <u>Am. Indian</u>        | <u>Asian</u>             | <u>Native Hawaiian or Pacific Islander</u> | <u>Other</u>             |
| Race of Head of Household:                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   | <input type="checkbox"/> |
| Race of Co-Head/ of Household Or Other:     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                   | <input type="checkbox"/> |
|                                             | <u>Hispanic</u>          | <u>Non-Hispanic</u>      |                          |                          |                                            |                          |
| Ethnicity of Head of Household:             | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |                                            |                          |
| Ethnicity of Co-Head of Household or Other: | <input type="checkbox"/> | <input type="checkbox"/> |                          |                          |                                            |                          |



**ELIGIBILITY INFORMATION**

1. Are you a part-time or full-time student at an institution for higher learning?                      Yes                      No
2. Is any household member subject to lifetime sex offender registration in any state?                      Yes                      No
3. Is anyone in your household pregnant?                      Yes                      No

**INCOME AND ASSET INFORMATION**

**For each type of income that your household receives, give the source of the income & the amount of income that is expected from that source during the next 12 months.**

| Family Member | Source of Income - Type of Income | Annual Income Amount |
|---------------|-----------------------------------|----------------------|
|               |                                   |                      |
|               |                                   |                      |
|               |                                   |                      |
|               |                                   |                      |

**List all checking and savings accts and investments. (including IRA's, Keogh accts. & Certificates of Deposits) of all household members, including amounts disposed of during the past 2 years.**

| Family Member | Financial Institution | Account Number | Est. Current Balance |
|---------------|-----------------------|----------------|----------------------|
|               |                       |                |                      |
|               |                       |                |                      |
|               |                       |                |                      |
|               |                       |                |                      |
|               |                       |                |                      |

1. List all stocks, bonds, trusts, pension contributions, or other assets, and their current estimated value:

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2. Do you own a home or any other real estate?                      Yes                      No

If yes, please explain \_\_\_\_\_

3. Have you sold or given away real property or any other assets worth over \$1,000 in the past two years?

Yes                      No

If yes, what is the current market value of these assets? \$ \_\_\_\_\_

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**APPLICANT CERTIFICATION**

I/we certify that if selected to move into this project, the unit I/we occupy will be my/our only residence. I/we understand that the above information is being collected to determine my/our eligibility for Section 8 assistance and that admission to this site is conditional upon eligibility criteria set by federal law, rules set by this site's Tenant Selection Plan, and payment of any applicable security deposit in advance of move-in. I/we authorize the owner to verify all information provided on this application and to contact previous or current landlords or other sources for credit and verification information, which may be released to appropriate Federal, State, or local agencies.

I/we certify that the statements made in this application are true and complete to the best of my/our knowledge and belief. I/we understand that providing false information may lead to denial of this application, to eviction (if the falsehood is discovered after move-in), or to criminal prosecution under Federal law.

Signature of Head: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Privacy Act Notice**

The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.) by Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.S. 3454) requires applicants and participants to submit the social security number of every household member.

Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities.

Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interest, and to verify the accuracy of the information you provide. This information may be released to appropriate federal, state, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law.

Penalty: You must provide all of the information requested by the owner, including all social security numbers. Not providing the social security numbers will affect your eligibility. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.