

Homes • Build • Hope

A SERVICE OF **Adelphi** *USA*

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MANAGEMENT USE ONLY:	
Date: _____	Time: _____
HBH ___	Apelatt ___ EPR ___ WEM ___
Other _____	

RENTAL APPLICATION

Applicant Name: _____
 Current Address: _____
 City, State, Zip Code: _____
 Home Phone: _____
 Section 8 Voucher Holder: _____ YES _____ NO _____ Waiting List

HOUSEHOLD COMPOSITION AND CHARACTERISTICS

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

Full Name	Relationship	Birth Date	Age	Sex M/F	Social Security Number	Race	Ethnicity

Is the household comprised entirely of full-time students? _____ Yes _____ No

Do you plan to have anyone living with you in the future who is not listed above? _____ Yes _____ No
 If Yes, please explain _____

CURRENT HOUSING STATUS

Provide the complete name, address and phone number of all your landlords.

Current Landlord: _____
 Address: _____
 Phone: _____
 Dates rented from this landlord: from: _____ to: _____
 Current Rent: \$ _____

HOUSING STATUS contd. from page 1

Previous Landlord: _____
Address: _____
Phone: _____
Dates rented from this landlord From: _____ to: _____

Previous Landlord: _____
Address: _____
Phone: _____
Dates rented from this landlord From: _____ to: _____

INCOME INFORMATION

Please answer each of the following questions.

	YES	NO
1 Is any member of your household employed (full-time, part-time, or seasonally)?	___	___
2 Does any member of your household expect to work for any period during the next twelve (12) months?	___	___
3 Does any member of your household expect to work for someone who pays them in cash?	___	___
4 Is any member of your household on leave of absence from work due to layoff, maternity or military leave?	___	___
5 Does any member of your family now receive or expect to receive unemployment benefits?	___	___
6 Does any member of your family now receive or expect to receive child support?	___	___
7 Is any member of your household entitled to child support that he/she is not now receiving?	___	___
8 Does any member of your household receive or expect to receive alimony payments?	___	___
9 Does any member of your household receive or expect to receive public assistance?	___	___
10 Does any member of your household receive or expect to receive Social Security payments?	___	___
11 Does any member of your family receive or expect to receive income from a pension or annuity?	___	___
12 Does any member of your household receive regular cash contributions from individuals not living in the unit or from agencies?	___	___
13 Does any member of your household receive income from assets, including interest on checking and savings accounts, interest and dividends from certificates of deposit, stocks or bonds, income from rental property, or whole life insurance policies?	___	___

For each type of income that your household receives, give the source of the income and the amount of the income that can be expected from that source during the next twelve (12) months.

Name of Family Member	Source of Income/Type of Income	Monthly Income
		\$
		\$
		\$
		\$
		\$

ASSET INFORMATION

List all checking and savings accounts (including IRA's, Keogh accounts, and Certificates of Deposit) of all household members.

Name of Family Member	Bank/Investment Name	Current Balance
		\$
		\$
		\$
		\$
		\$

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

Have you sold or given away any real property or other assets, e.g., cash, certificates of deposit, car, etc. in the past two (2) years? ___ Yes ___ No. If yes, what was the current market value of the asset? \$ _____

EXPENSES

Elderly/Handicapped/Disabled Families Only:

	YES	NO
Do you have Medicare?	___	___
Do you have any other kind of medical insurance?	___	___
Do you have outstanding medical bills on which you are paying?	___	___
Do you have any ongoing medical expenses?	___	___
Do you expect to have any medical expenses during the next twelve (12) months?	___	___
Do you pay for any auxiliary apparatus; e.g., adaptations to vans, interpreters, etc., or attendant care to enable someone to work?	___	___

If yes, please describe: _____

Please list approximate monthly amount of medical expenses? \$ _____

	YES	NO
Have you or any member of the household faced formal or threatened eviction charges against you?	___	___
Have you ever violated a previous family obligation in connection with a HUD program?	___	___
Do you owe any money to a public housing authority?	___	___
Do you owe any outstanding amount to any current or previous landlord?	___	___
Are you or any member of your household currently an illegal user of a controlled substance or have you or any member of your family ever been convicted for the illegal manufacture, distribution or convicted for the illegal use of a controlled substance?	___	___
Have you or any member of your household been convicted of a felony offense?	___	___

Please advise this office when changes occur in your address or family size. Your name will be removed from the waiting list if you fail to report for a scheduled interview, fail to keep your application updated, or fail to respond to other correspondence with instructions.

I DO HEREBY CERTIFY THAT ALL INFORMATION I HAVE PROVIDED IS COMPLETE AND ACCURATE. Household members 18 years old and over must sign application.

Signature _____ Date: _____

Signature _____ Date: _____

Referring Agency: _____ Contact Person: _____



THINGS YOU SHOULD KNOW

Don't risk your chances for HOME Investment Partnership Program housing by providing false, incomplete, or inaccurate information on your application and recertification forms.

PURPOSE

This is to inform you that there is certain information you must provide when applying for housing assisted with funds from the HOME. There are penalties that apply if you knowingly omit information or give false information.

PENALTIES FOR COMMITTING FRAUD

The United States Department of Housing and Urban Development (HUD) places a high priority on preventing fraud. If your application or recertification forms contain false or incomplete information, you may be:

*Evicted from your apartment or house; *Required to repay all overpaid rental assistance you received; *Fines up to \$10,000; *Imprisonment for up to 5 years; and/or *Prohibited from receiving future assistance. Your State and local governments may have other laws and penalties as well.

ASKING QUESTIONS

When you sit down with the person who fills out your applications, you should know what is expected of you. If you do not understand something, say so. That person can answer your questions or find out what the answer is.

COMPLETING THE APPLICATION

When you give your answer to application questions, you MUST include the following information:

INCOME

*All sources of money you and any member of your family receive (wages, welfare payments, alimony, social security, pension, etc.); *Any money you received on behalf of your children (child support, social security for children, etc.); *Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stocks, etc.); *Earnings from second job or part time job; *Any anticipated income (such as a bonus or pay raise you expect to receive).

ASSETS

*All bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you and any adult member of your family/household who will be living with you. *Any business or asset you sold in the last 2 years for less than its full value, such as your home to your children.

FAMILY/HOUSEHOLD MEMBERS

The names of all of the people (adults and children) who will actually be living with you, whether or not they are related to you.

SIGNING THE APPLICATION

*Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate.

*When you sign the application, you are claiming that they are complete and to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information.

*Information you give on your application will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with various Federal, State or private agencies to verify that it is correct.

RECERTIFICATION

You MUST provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You MUST report on recertification forms: *All income changes, such as pay increases or benefits, change of job, loss of jobs, loss of benefits, etc., for all adult family/household members. *Any assets that you or your family/household members own and any asset that was sold in the last 2 years for less than its full value.

BEWARE OF FRAUD

You should be aware of the following fraud schemes:

***DO NOT** pay any money to file an application.

***DO NOT** pay any money to move up on the waiting list.

***DO NOT** pay anything not covered by your lease. *Get a receipt for any money you pay. *Get a written explanation if you are required to pay any money other than rent (such as maintenance charges).

REPORTING ABUSE

If you are aware of anyone who has falsified an application, or if anyone tries to persuade you to make false statements, report them to the manager of Westmoreland CHODO. If you cannot report to the manager, call the local HUD office or the HUD Hotline at (202) 472-4200. This is not a toll free number. You can also write to the HUD HOTLINE, Room 8254, 451 Seventh Street, S.W., Washington, DC 20410.

I HAVE READ ALL THE ABOVE AND MY SIGNATURE BELOW INDICATES I UNDERSTAND WHAT IS EXPECTED OF ME.

Signature of Applicant

Date