For Office Use Only	Date Rec'd	Time Rec'd	Initials

Preliminary Rental Application

Please note that this is a preliminary application and gives no lease or rent rights.

Community _____ Office Phone (____)_____ Date _____

Unit Size 1 2 3 4 Unit Type: Apartment Studio Townhouse

Would you or a member of your household benefit from the design features of a barrier free unit? **Yes** or **No**

Applicant: _____ Phone (___)_____

Co-Applicant: _____ Phone (___)_____

Applicant's History

Applicant:				Co-Applicant			
Current Address:				Current Address:			
From:		To:		From:		To:	
Reason for Moving:				Reason for Moving:			
Current Landlord:				Current Landlord:			
Phone & Address:				Phone & Address:			
Previous Address:				Previous Address:			
				From:		To:	
Reason for Moving:				Reason for Moving:			
Previous Landlord:				Previous Landlord:			
Phone & Address:				Phone & Address:			
Please list all persons that will occupy the residence.							

Name (First, Middle Initial, Last)	Maiden Name (If Applicable)	Date of Birth	Relationship of Head Of Household	Social Security Number
1.				
2.				
3.				
4.				
5.				

Employment

Applicant						Co-Applicant					
Employer:						Employer:					
Address:						Address:					
Phone:						Phone:					
Length of Employment:						Length of Employment:					
Position Held:						Position Held:					
Salary/Wage:		Per:				Salary/Wage:		Per:			
Supervisor:						Supervisor:					
Status:		Full-Time:		Part-Time		Status:		Full-Time:		Part-Time:	
List average hours per week worked:						List average hours per week worked:					

The information contained in this application is treated confidentially. No information will be revealed to anyone without the express written consent of the applicant.

Head of Household Date Co-Applicant, Spouse/Co-Head Date

Total household income from all other sources (i.e. social security pension, child support, Section 8 Certificate, etc):

Source: _____ Amount: $ _____

Source: _____ Amount: $ _____

Source: _____ Amount: $ _____

Do you or any member of your household engage in current illegal use or illegal distribution of a controlled substance or

have you previously been convicted of the same? **Yes** or **No**

If you answered "yes" to the above question, have you successfully completed a controlled substance abuse program or are you presently enrolled in such a program? **Yes** or **No**

If "yes", please explain: _____

Have you ever been convicted of a crime, felony, misdemeanor? **Yes** or **No**

If "yes", please explain: _____

Provide asset information below:

Type of Assets	Name of Bank, Stock or Bond	Account Number	Balance/ Current Value	Rate of Interest	Dividend	Real Estate
1.						
2.						
3.						
4.						
5.						

Have you disposed of any assets in the last two years? **Yes** or **No**

If "yes", please list asset and value received: _____

Do you own a car? _____ Model/Year _____ License # _____

Do you own a second car? _____ Model/Year _____ License # _____

Are you a full-time student? **Yes** or **No**

Are any members of your household full-time students? **Yes** or **No**

Have you or any member of your household lived in assisted housing? **Yes** or **No**

If "yes", when and where? _____

Have you ever committed fraud in an assisted housing program or been requested to repay money for knowingly misrepresenting information for such housing programs? **Yes** or **No**

If "yes", please explain: _____

PERSONAL REFERENCES: List 3 RELATIVES we can call for a personal reference:

Name	Address/City/Zip	Relationship	Telephone Number
1.			
2.			
3.			

Head of Household Date Co-Applicant, Spouse/Co-Head Date

HUD, RURAL DEVELOPMENT& MSHDA APPLICANTS

I fully understand that Title 18, Section 1001 of the United States Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States. I therefore, certify that the foregoing information is true and complete to the best of my knowledge. I authorize inquiries to be made to verify the statements above. Falsified statements shall be grounds for eviction.

Applicants Initials Co-Applicants Initials Managers Initials

RURAL DEVELOPMENT

I/We certify that the rental unit which I/We will occupy will be my/our permanent residence and further certify that I/We do not and will not maintain a separate subsidized rental unit in a different location. I acknowledge that I am responsible to inform the office of any changes to any part of this application (i.e. address, phone, income).

Applicants Initials Co-Applicants Initials Managers Initials

Additional information will be required at a later date to complete the processing for residency.

Head of Household Date Co-Applicant, Spouse/Co-Head Date

REVISED **09/2000**

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INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The information regarding race, national origin, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through Rural Development, MSHDA and HUD, that Federal Laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age, and handicap are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race/origin and sex of individual applicants on the basis of visual observation or surname.

APPLICANT: I do not wish to furnish this information (Initials) _____

GENDER DESIGNATION: Male Female

RACE/NATIONAL ORIGIN:

American Indian
Alaskan Native
Asian
Pacific Islander

Black (except Hispanic)
Hispanic
White (except Hispanic)

Are you multiracial? **YES** or **NO** For the purposes of this question, you are multiracial if you have parents from more than one of the broad race categories listed above, or if at least one of your parents is multiracial.

CO-APPLICANT: I do not wish to furnish this information (Initials) _____

GENDER DESIGNATION: Male Female

RACE/NATIONAL ORIGIN:

American Indian
Alaskan Native
Asian
Pacific Islander

Black (except Hispanic)
Hispanic
White (except Hispanic)

Are you multiracial? **YES** or **NO** For the purposes of this question, you are multiracial if you have parents from more than one of the broad race categories listed above, or if at least one of your parents is multiracial.

REVISED **07/2000**

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