ELIZABETH HARVEY PROJECT-BASED RENTAL ASSISTANCE PROGRAM WAITING LIST APPLICATION

1.	HEAD OF HOUSEHOLI	D:			
		FIRST	MIDDLE	LAST	
2	STREET ADDRESS:				
۷.	STREET ADDRESS		CITY/TOWN	STATE Z	(IP
3.	MAILING ADDRESS:				
-		NUMBER & STREET	CITY/TOWN	STATE ZII	P
4.	PHONE NUMBER: (_		E-MAIL ADDRESS		
5.	SOCIAL SECURITY #:		DATE OF BIR	TH://_	
6.	WHAT IS THE TOTAL Y	EARLY <u>GROSS</u> INCOME OF	F <u>ALL</u> HOUSEHOLD MEM	BERS? \$	
7.	HOW MANY PEOPLE (I	NCLUDE YOURSELF) WILL	. BE IN YOUR ASSISTED-H	OUSEHOLD?	
8.	YES OR NO (please	VED RENTAL ASSISTANCE circle one) IF YES, WHI	EN?		
9.		EVICTED FROM PUBLIC H			
10.		E IN YOUR HOUSEHOLD E NO (please circle one)	NGAGED IN CRIMINAL A	CTIVITY WITHIN THE F	PAST
11.	REGISTRATION FROM HOUSEHOLD SUBJECT	S PROHIBIT ANY PERSON RECEIVING FEDERAL HOU TO THE SEX OFFENDER LI e circle one)	ISING ASSISTANCE. ARE	YOU OR IS ANYONE IN	I YOUR
12.	PLEASE CIRCLE THE RA 1 – WHITE 2-BLACI	ACE OF HEAD OF HOUSEH K 3-AMERICAN INDIA	IOLD (requested for HUD AN/ALASKAN NATIVE		• •

PLEASE CIRCLE THE ETHNICITY OF HEAD OF (requested for HUD's statistical purposes only) 1 - HISPANIC 2-NON-HISPANIC

(TURN OVER)

Household Members (please list all household members)

Name	Relationship	<u>Sex</u>	<u>Veteran</u>	<u>Date of</u> <u>Birth</u>	Disabled	Social Security Number
	Head of					
	Household					

CERTIFICATION

UNDER THE PENALTY OF PERJURY, I CERTIFY THAT I AM THE HEAD OF HOUSEHOLD AND THAT ALL OF THE INFORMATION ON THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT THE INCOME FOR ALL HOUSEHOLD MEMBERS HAS BEEN REPORTED. I UNDERSTAND THAT MY FAILURE TO DO SO CAN RESULT IN BEING FINED UP TO \$10,000, OR IMPRISONED UP TO FIVE YEARS, OR THAT ASSISTANCE MAY BE DENIED. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY BELMONT HOUSING RESOURCES FOR WNY OF ANY CHANGE OF ADDRESS AND THAT IF BELMONT HOUSING RESOURCES FOR WNY CANNOT CONTACT ME BECAUSE I MOVED WITHOUT HAVING NOTIFIED THEM, MY NAME MAY BE REMOVED FROM THE WAITING LIST NECESSITATING MY REAPPLICATION.

BELMONT HOUSING RESOURCES FOR WNY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, DISABILITY, HANDICAP, OR THE PRESENCE OF CHILDREN, IN ADMISSION TO OR ACCESS TO THE PROGRAMS WE ADMINISTER OR IN THE TREATMENT OF APPLICANTS AND PARTICIPANTS.

NOTE: according to federal regulations, Section 8 rental assistance may only be provided to U.S. citizens and non-citizens with specific types of eligible immigration status. You need NOT provide verification of your citizenship at this time. However, you will be required to provide verification of your citizenship or eligible immigration status when your name reaches the top of the waitlist list and processing begins to determine your eligibility.

SIGNATURE OF HEAD OF HOUSEHOLD/APPLICANT

/		'
	DATE	

PLEASE RETURN COMPLETED APPLICATION TO: BELMONT HOUSING RESOURCES FOR WNY 2393 MAIN ST. BUFFALO, NY 14214

BELMONT HOUSING RESOURCES FOR WNY IS DEDICATED TO PROVIDING AFFORDABLE HOUSING OPPORTUNITIES

