



a.w. richards building

providing homes and offices for west brattleboro

PO Box 2275 Brattleboro, VT 05303

(P) 802-254-6071 (F) 802-254-5590

www.brattleborohousingauthority.com

bha@sover.net

RENTAL HOUSING APPLICATION

Please return application to the above address

INSTRUCTIONS: Please print in ink the information requested on this form. If you require more space, please attach a separate piece of paper. Please answer all questions carefully and completely since this information will be used to determine your eligibility. **Incomplete applications will not be processed.**

HOUSEHOLD COMPOSITION

Complete the following for each person in the household *beginning with the head of household*

	FIRST AND LAST NAME	SOCIAL SECURITY #	DATE OF BIRTH	SEX	RELATIONSHIP	STUDENT
1)	_____	_____	_____	___	Head of Household	_____
2)	_____	_____	_____	___	_____	_____
3)	_____	_____	_____	___	_____	_____
4)	_____	_____	_____	___	_____	_____
5)	_____	_____	_____	___	_____	_____

PRESENT HOUSING

Day phone #: _____ Evening phone #: _____ Email: _____

Present street address: _____

Present mailing address: _____

How long have you lived at this address? _____ Do you rent? _____ If so, how long? _____

What is the reason for the move? _____

Do you owe a former or current landlord rent or damages? Yes No

Name of Landlord: _____ Landlord mailing address: _____

Do you own your home? Yes No If yes, what is the market value of your home? \$ _____

Do you live with others? Yes No If yes, please explain your living arrangements:

Are you requesting a handicapped adaptive unit? Yes No

Does anyone in your household require modifications or accommodations in order to fully utilize the unit, program or services? _____

If yes, explain: _____

Equal Opportunity Housing

A reasonable accommodation procedure is available for the disabled who wish to request Modification in our programs, policies or procedures.

TDD/TDY 802-254-6071 Vermont Relay Service {800-253-0191}.

RESIDENTIAL HISTORY:

Complete the information for **all** places you have lived in the past **5 years**, not including your present housing.

<u>Household Member and Address Rented</u>	<u>From Month/year</u>	<u>To Month/year</u>	<u>Landlord Name and Address</u>	<u>Landlord Phone Number</u>	<u>Rent Amount Paid</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please list ALL sources of income (gross) for each member of your household:

WAGES AND SALARIES (INCLUDE CHILD SUPPORT, ALIMONY, AND PENSIONS):

<u>HOUSEHOLD MEMBER NAME</u>	<u>EMPLOYER NAME AND ADDRESS</u>	<u>GROSS MONTHLY INCOME (Before taxes)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any assistance you may receive, i.e. SS, SSI, ANFC, Food Stamps, e.g.

<u>HOUSEHOLD MEMBER NAME</u>	<u>TYPE OF INCOME</u>	<u>MONTHLY AMOUNT</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Based on your income, you may qualify for a Section 8 Project Based voucher. If so, we will send you an application for this property.

ASSETS: Please list any checking/savings accounts and/or bank accounts or stocks, bonds, CDs, IRAs, annuities, life insurance held by your household

<u>HOUSEHOLD MEMBER NAME</u>	<u>TYPE OF ACCOUNT</u>	<u>NAME OF INSTITUTION</u>	<u>AMOUNT</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Does anyone in your household own real estate **other** than the home you live in? Yes No

If so, what is the location of the property? _____ Market Value: _____

What other assets are held within your household? (Do not include furniture or motor vehicles used for daily transportation)

Value \$ _____

Have you disposed of any real estate for less than the market value in the last two years? _____

GENERAL INFORMATION:

Have you ever applied for housing or rented with Brattleboro Housing Authority? ____ If so, under what name(s):

Have you or anyone else named on this application been under an eviction proceeding for any rental unit, including an apartment, home, modular home or trailer? ____ If yes, explain:

Do you have a Section 8 voucher or are you on a wait list?

____ No, I/We do not have a Section 8 voucher.

____ No, I/We do not have a Section 8 voucher, but have been on a wait list for ____ months.

____ Yes, I have a Section 8 voucher through _____ Housing Authority.

How did you hear about the Brattleboro Housing Authority? _____

Has anyone in your household ever been convicted of a crime or are there any pending criminal charges against you, including by not limited to, illegal manufacture of distribution of a controlled substance, or sex offenses? ____ No ____ Yes If yes, explain

REFERENCES: List three (3) references:

Name	Complete Mailing Address	Telephone Number

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGING THIS APPLICATION:

I understand that the information contained in the application will be used to determine my eligibility for housing pending a criminal check. I grant consent for the management to make any and all inquiries to verify the information, with rental and credit screening services, and to contact previous and current landlords or other sources for credit and verification of other information which may be released to appropriate Federal, State or Local Agencies.

I authorize management to obtain one or more "credit and consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S. C. Section 1681 a(d), seeking information on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

In the event my application is approved, I also give, my consent to have Brattleboro Housing Authority and/or its assigned credit bureau to obtain additional credit reports and other information after approval of my credit, both in connection with the same Transaction or an extension of credit; to obtain credit reports and other information for account review purposes and other legitimate purposes associated with the account.

Furthermore, I understand that providing any false or misleading information will make me ineligible for rental assistance and may result in prosecution by the United States Government. Therefore, I certify that all of the above information is true and complete to the best of my knowledge and belief.

All members of the household (18 years of age and older) must sign the application in order for it to be processed. PLEASE ALLOW THREE (3) WEEKS FOR PROCESSING THIS APPLICATION. YOU WILL BE NOTIFIED BY MAIL UPON COMPLETION.

Date Head of Household

Date Co-Head of Household

Date Adult Member of Household

Brattleboro Housing Authority is an equal opportunity housing provider. We do not discriminate on account of race, sex, sexual orientation, color, age familial status, marital status, religion, national origin, U.S. Military veteran status, disability, gender identity, gender-related characteristics or because a person is a recipient of public assistance, including Section 8 housing assistance.

<small>If you are willing to help us with the US Government survey regarding racial/ethnic heritage, please complete the following information about the head of your household. You do not have to give this information, as it is not required to determine your eligibility. It is being used for statistical purposes only.</small>			
____	WHITE – NOT OF HISPANIC ORIGIN	____	HISPANIC
____	ASIAN/PACIFIC ISLANDER	____	NATIVE AMERICAN/ALASKAN
____	BLACK – NOT OF HISPANIC ORIGIN		