

PRE-RENTAL APPLICATION

NAME _____

ADDRESS _____

PHONE NUMBER _____

CELL NUMBER _____

Is your family involuntarily displaced? YES NO
Is the head of household a senior citizen or handicapped? YES NO

LIST OF HOUSEHOLD MEMBERS:

NAME	AGE	EMPLOYED
_____	_____	YES NO

INFORMATION CONTAINED HEREIN SHALL BE KEPT CONFIDENTIAL & SHALL BE USED ONLY FOR THE PURPOSE OF DETERMINING ELIGIBILITY.

THIS IS TO CERTIFY THAT ALL STATEMENTS IN THIS PRELIMINARY APPLICATION ARE TRUE TO MY BEST KNOWLEDGE & BELIEF. I MAKE THIS STATEMENT WILLINGLY & WITH FULL KNOWLEDGE OF THE PENALTIES UNDER FEDERAL & STATE LAWS SHOULD FALSE INFORMATION BE GIVEN.

APPLICANT SIGNATURE: _____

DATE: