

**DULUTH HEIGHTS APARTMENTS PRELIMINARY HOUSING APPLICATION**

**PLEASE PRINT OR TYPE**

NAME: \_\_\_\_\_  
 HOME ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_  
 MAILING ADDRESS (IF DIFFERENT THAN ABOVE): \_\_\_\_\_  
 \_\_\_\_\_ PHONE: \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_

**TIME:** \_\_\_\_\_

**OFFICE USE ONLY**

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LIST ALL THE MEMBERS WHO WILL LIVE IN YOUR HOUSEHOLD	RELATIONSHIP TO HEAD	SEX M/F	RACE	DISABLED?	SOCIAL SECURITY NUMBER	DATE OF BIRTH	STUDENT STATUS
1. _____	SELF	_____	_____	_____	_____	_____	FT PT N/A
2. _____	_____	_____	_____	_____	_____	_____	FT PT N/A
3. _____	_____	_____	_____	_____	_____	_____	FT PT N/A
4. _____	_____	_____	_____	_____	_____	_____	FT PT N/A

**WHEELCHAIR ACCESSIBLE UNIT NEEDED? Y N      DO YOU HAVE A HOUSING CHOICE VOUCHER? Y N**

**NUMBER OF BEDROOMS NEEDED: \_\_\_\_\_      ARE YOU A VETERAN? Y N**

- Does any member in the household have a job?  
 WHO IS WORKING?      WHERE ARE THEY WORKING?      HOW MUCH TO THEY MAKE PER HOUR?      HOW MANY HOURS PER WEEK?
- Does anyone in household receive child support?  
 If so, who gets the child support, and how much get per month?
- Does anyone in the household receive any other assistance (ex: Social Security, TANF or ADC, Unemployment, Worker's Comp, etc.)?  
 WHO GETS IT?      WHAT TYPE OF ASSISTANCE DO THEY GET?      HOW MUCH DO THEY GET PER MONTH?
- Does anyone in the household receive money from anywhere else? Who gets the money? \_\_\_\_\_  
 Where are they getting it from? And how much do they get per month?
- Do you consider yourself homeless?  
 Y N

**I CERTIFY THAT ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE. I ALSO UNDERSTAND THAT IF I DON'T REPORT A CHANGE IN ADDRESS, AND AN ATTEMPT IS MADE TO CONTACT ME, MY APPLICATION CARD WILL BE REMOVED FROM THE WAITING LIST.**

**SIGNATURE** \_\_\_\_\_