

# Centerville Housing Authority

CITY OF CENTERVILLE

130 E Main, PO Box 249, Centerville, Texas 75833

Phone 903-536-2378 Fax 903-536-5003

## TENANT ASSIGNMENT POLICY ACKNOWLEDGEMENT FORM

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(please print)

Current Address: \_\_\_\_\_

### **Acknowledgment:**

By my/our endorsement below, I/we have read and understand the Tenant Assignment Policy and criteria stated on pages 1 thru 7.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse/Co-Applicant's Signature

\_\_\_\_\_  
Date

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## WAITING LIST POLICY ACKNOWLEDGEMENT FORM

I understand that I am on the Active Waiting list for a, [ ] 1-bedroom, [ ] 2-bedroom, or [ ] 3-bedroom Apartment.

In order to stay on the Active Waiting List, **I am responsible** for contacting the Housing Authority **before six months** of applying to show continued need.

I know it is my responsibility to report any and all changes immediately regarding my contact information, family size, income, etc.

**I also understand that if I do not contact the office at the end of the six (6) months, I will no longer be on the Active Waiting List.**

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date