

**RENTAL APPLICATION COVER LETTER**

Dear Applicant,

For over 20 years, The Housing Development Corporation has served low-income families in multiple West Virginia counties through its development, management, and ownership of affordable housing properties. It would not have been able to do so without having a well-developed policy and process for ensuring Fair Housing and Equal Opportunity standards, which all starts here with an application.

Please take the time to consider the type of housing for which you are applying. Our portfolio includes multifamily apartment complexes, senior living communities, single-family houses, single-person apartments, lease-purchase homes, and HUD 811 and 202 properties designed specifically for disabled persons and elderly-disabled persons, respectively. If you have questions regarding qualifications for a specific type of housing, please give us a call or speak to us in person at one of our offices.

Please also complete this application with as much information as possible. Incomplete applications will not be accepted. Four specific examples that have led to rejection: 1. All persons of the household are not identified. 2. Only the current address is identified while other parts of the application indicate previous addresses exist. 3. Only one option for contact is listed, which is out of service. 4. All adults did not sign the application and the separate release forms (at least criminal and landlord releases: 2 forms – per person; 3 forms if applying for Low Income Housing Tax Credit or Lease-Purchase Home properties). So before submitting the application, please ensure that you have provided required information for ALL persons in the household (e.g., rental history, income, assets, and background check releases for ALL adults).

**If you need assistance in completing this application, please contact your caseworker (if you have one) or let our staff know so we can assist you.**

**PLEASE NOTE: A $25.00 non-refundable application fee is required at the time of application. The fee offsets the cost of verifying your information. The HDC accepts Money Orders or Checks payable to HDC.**

Please know that although we accept applications year-round, we do not always have open rental units because affordable housing for low-income individuals and families are in high demand. However, we do have waiting lists. If we do not have an opening available currently, please still consider applying.

Once an application is processed by a property manager, the applicant will be informed of the position on the waiting list. When a unit becomes available, the next applicant is contacted, and so on. In the meantime, if you secure other housing and would like to be removed from the waiting list, please give us a call and let us know. If your contact information changes at any time, please also let us know.

Please note: it is your responsibility as an applicant to keep your application up to date. If 120 days (four months) have passed since you submitted your application, you are required to contact us and update your information. Applications over 180 days old (six months) without updates will be discarded.

Thank you for choosing The Housing Development Corporation. 

Sincerely,

HDC Administration

**The Housing Development Corporation**

**300 W 7th Avenue, Huntington WV 25701**

**Main 304-526-4400 Fax 304-526-4434**

**RENTAL APPLICATION**

**HOUSING DEVELOPMENT CORPORATION**

**Choose a housing option:**

**Standard Apartment** (1-2 beds) **Duplex-Style Apartment** (3 bedrooms)

**Lease-Purchase House (3 beds) Townhouse-Style Apartment** (2-4 bedrooms)

**Choose a housing location based on bedroom size and eligibility:**

**Artisan Heights Apartments** \*\*

(3 & 4 bedrooms)

**2806 Artisan Heights Drive, Huntington**

**Carriage Hill Apartments**

(2 & 3 bedrooms)

**100 Surrey Terrace, Saint Albans**

**Fairfield Apartments (HUD 202)**

(1 bedrooms) **62+yrs old only**

**1690 11th Avenue, Huntington**

**Fifth Avenue Apartments \*\***

(1 & 2 bedrooms)

**901 5th Avenue, Huntington**

**Green Gables Apartments (HUD 811)**

(1 bedrooms)

**1941 McVeigh Ave., Huntington**

**1319 Monroe Ave., Huntington**

**1026 6th Street, W., Huntington**

**The Hamlets Apartments**

(2 & 3 bedrooms)

**100 Hamlet Lane, Huntington**

**200 Kingston Terrace, Huntington**

**300 Wakefield Court, Huntington**

**Huntington Gardens Apartments \*\***

(1 & 2 bedrooms) **55yrs & disabled or 62+yrs old**

**1663 Doulton Ave., Huntington**

**🞎 PLEASE PLACE MY HOUSEHOLD ON**

**ALL ELIGIBLE WAIT LISTS.**

**Huntington High Renaissance Apartments \*\***

(1 & 2 bedrooms) **55yrs & disabled or 62+yrs old 900 8th Street., Huntington**

*(Former Huntington High School)*

**Lakeview Manor Apartments**

(1 & 2 bedrooms) **55yrs & disabled or 62+yrs old**

**5100 Rt 152, Lavalette**

**The Parks Apartments (Parkview)**

(2 & 3 bedrooms)

**100 Park Circle, Huntington**

**Pine Haven Terrace Apartments \*\***

(1 & 2 bedrooms) **55yrs old +**

**100 Pine Haven Drive, Milton**

**Valley Apartments**

(2 & 3 bedrooms)

**2366 2nd Street, Mason**

**Virginian Apartments**

(1 & 2 bedrooms)

**427 7th Street, Huntington**

**Washington Arms Apartments**

(studios & 1 bedrooms)

**936 Washington Ave., Huntington**

**\*\* These apartments are under contract with Huntington WV Housing Authority Section 8 programs, and waiting lists are run through Section 8. Contact our office for more details.**



**Personal Information**

**­­­­­­­­­­­­­­­­**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Applicant to be Head of Household: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Legal Name(s)**  **of All Intended**  **Adult Occupant(s)** | **Relationship to Head of Household** | **Date of Birth** | **Race** | **Social Security Number** | **Indicate if Married (M)**  **Widowed (W)**  **Separated (S)**  **Divorced (D)** |
| 1. | HEAD |  |  |  | Year: |
| 2 |  |  |  |  | Year: |
| 3. |  |  |  |  | Year: |
| 4. |  |  |  |  | Year: |
| 5. |  |  |  |  | Year: |
| **Name(s) of Intended**  **Child Occupant(s)**  **(Social Security Card)** | **Relationship to Head of Household** | **Date of Birth** | **Race** | **Social Security Number** | **Absent Parent’s Name & Address**  **(If Applicable)** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |

If separated or divorced, list name & address of spouse/ex-spouse below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Name Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Relationship Relationship  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Street Address Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip City, State, Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SS Number (If Known) SS Number (If Known)



**Resident History**

**NOTE: To adequately research resident history, the HDC requires at least three addresses going back at least 10 years for ALL adult applicants. If you have resided at more than three addresses in the past 10 years, please complete a 10 year resident history on the back of this page. If you have only lived in one or two residences throughout your lifetime, you must indicate it.**

1. Present Address: Zip Code   
   Present Telephone or Number where you can be reached:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
   Present Landlord: \_\_\_\_\_   
   Landlord’s Address: Landlord’s Phone:   
   At this address: (From)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (To)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount of Rent:\_\_\_\_\_\_\_\_\_­\_\_\_  
   Reason for moving:
2. Previous Address: Zip Code   
   Landlord: \_\_\_\_\_   
   Landlord’s Address: Landlord’s Phone:   
   At this address: (From)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (To)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount of Rent:\_\_\_\_\_\_\_\_\_\_\_\_  
   Reason for moving:
3. Previous Address: Zip Code   
   Landlord: \_\_\_\_\_   
   Landlord’s Address: Landlord’s Phone:   
   At this address: (From)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (To)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount of Rent:\_\_\_\_\_\_\_\_\_\_\_\_  
   Reason for moving:

For every household member, please complete the chart below listing all states in which you have lived:

|  |  |
| --- | --- |
| **Name** | **States Where You Have Lived** |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

Have you or any member of your household ever been evicted from a place leased/rented? □ YES □ NO

If yes, which member(s)? When?

Please list the location(s) and provide the details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you or any member of your household owe any money to any public housing authority, HUD, apartment community, or previous landlord? □ YES □ NO

If yes, to whom? How Much?

Have you or any family member ever lived in public housing or other assisted housing? □ YES □ NO

If yes, which member(s)? When?

Please list locations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever committed fraud in a federally assisted housing program or been asked to repay and money for knowingly misrepresenting information for such housing programs? □ YES □ NO

If yes, explain:

**Personal / Character References**

**NOTE: Please list four (4) personal/character references who are not landlords listed on page 2 and who are not family members/relatives. Examples include but are not limited to employers, financial advisers, educational mentors/teachers, caseworkers, coworkers, and health/wellness/spiritual counselors.**

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_
2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_
3. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_
4. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_

**Income Information**

Does anyone, outside of your household, pay for any of your bills or give you money? □ YES □ NO

If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TOTAL HOUSEHOLD INCOME: List all money earned or received by everyone living in your household. This includes money from wages, self-employment, child support, contributions, Social Security, disability payments (SSI), Workman’s Compensation, retirement benefits, AFDC, Veteran’s Benefits, rental property income, stock dividends, income from bank accounts, alimony, and all other sources.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Household Member Name** | **Employer** | **Total Weekly Wages** | **AFDC** | **Child Support Monthly** | **Social Security Benefits** | **Unemployment Benefits** | **All Other Income** |
| 1. |  | $ | $ | $ | $ | $ | $ |
| 2. |  | $ | $ | $ | $ | $ | $ |
| 3. |  | $ | $ | $ | $ | $ | $ |
| 4. |  | $ | $ | $ | $ | $ | $ |
| 5. |  | $ | $ | $ | $ | $ | $ |
| 6. |  | $ | $ | $ | $ | $ | $ |

**\*Note: Again, this section is for listing ALL sources of income. If there is not enough room above, please use the blank space provided below or ask for another application page.**

**Assets and Credit Information**

Has any household member disposed of any assets for less than their market value during the past two years?

□ YES □ NO If yes, give date and explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does any household member own or have an interest in any real estate, boat, or mobile home?  
□ YES □ NO If yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has any household member sold any real estate in the last two years? □ YES □ NO  
If yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does any household member own any stocks or bonds? □ YES □ NO  
If yes, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have insurance for your personal belongings? □ YES □ NO

***Please be advised that your personal belongings are not covered by our insurance.***

Does any family member have checking or savings accounts or certificates of deposit? □ YES □ NO

If so, list below:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Household Member Name** | **Type and Account Number** | **Value** | **Interest Rate** | **Annual Income**  **From Asset** | **Bank Name & Other Information** |
| 1. | Checking |  |  |  |  |
| 2. | Savings |  |  |  |  |
| 3. | CD |  |  |  |  |
| 4. | Other: |  |  |  |  |
| 5. | Other: |  |  |  |  |
| 6. | Other: |  |  |  |  |

**\*Note: Again, this section is for listing ALL household assets and credit. If there is not enough room above, please use the blank space provided below or ask for another application page.**

**Additional Information**

Number of vehicles: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owned by Household Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Make/Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year:\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_ Tag#\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_  
   Vehicle registered to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VIN#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Make/Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year:\_\_\_\_\_\_\_\_\_ Color:\_\_\_\_\_\_\_\_\_ Tag#\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_  
   Vehicle registered to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VIN#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Driver’s License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Issued To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Driver’s License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Issued To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does anyone in your household have a criminal or juvenile record or has anyone ever been convicted of any crime other than a traffic violation? □ YES □ NO

If yes, describe and list all convictions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you or any household member a current illegal user of or addicted to a controlled substance? □ YES □ NO

Have you or any member of your household ever been convicted of the illegal manufacture or distribution of a controlled substance? □ YES □ NO

Are you or any member of your household subject to a state registry for sex offenders? □ YES □ NO

Have you or any other adult members of your household ever used any name(s) other than the one you are currently using? □ YES □ NO

If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of emergency, notify:

Relationship:

Phone:

Address:

Any other information that will help us to process your application:

**Certification**

This certification must be signed by ALL adult members of the household.

By signing this application, I/we certify the accuracy of the following: The information submitted is true and correct and I/we authorize management to verify any references listed and further authorize management to access any pertinent records which may be on file with law enforcement and credit bureau authorities. I/we understand that it is a crime to knowingly provide false information for the purpose of obtaining or maintaining occupancy and/or for the purpose of securing a lower rent in a subsidized housing development. Furthermore, I/we understand that the penalty for knowingly providing false information is up to five years in prison and/or $10,000 fine upon conviction.

I/we do hereby swear and attest that all of the information above about me/us is true and correct. I/we also understand that all changes in the income of any member of the household as well as all changes in the household members must be reported in writing immediately.

**I have included the required $25.00 non-refundable application fee in money order or check form.**

Signed: Date:

Signed: Date:

Signed: Date:

Signed: Date:

Signed: Date:

IT IS THE POLICY OF THIS COMPANY TO PROVIDE HOUSING ON AN EQUAL OPPORTUNITY BASIS. WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR, CREED, SEX, FAMILIAL STATUS, NATIONAL ORIGIN OR HANDICAP. NOTE ALSO – HOUSING IS AVAILABLE WITHOUT REGARD TO SEXUAL ORIENTATION, GENDER IDENTITY, OR MARITAL STATUS OF ANY/ALL APPLICANTS/HOUSEHOLD MEMBERS. IF YOU FEEL YOU HAVE BEEN DISCRIMINATED AGAINST BY THIS COMPANY, PLEASE CALL (304) 526-4400.

Date Returned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STAMP**

Time Returned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR

Received By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6

**AGREEMENT FOR RELEASE**

**OF ANY LOCAL STATE OR FEDERAL CRIMINAL RECORDS**

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited below. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 408 (a) (6) (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6) (7) and (8).

I am applying to The Housing Development Corporation for housing. I understand that as a part of processing my application, the HDC is allowed by federal law to check to see if local, state or federal criminal records have any information about me.

Before checking local, state or federal criminal records for any information about me, the HDC has to have an agreement for the release of local, state or federal criminal records signed by me.

I understand that if I do not sign this release, my application for housing will not be complete, and I may not receive housing.

I am signing this release based on the understanding that any information discovered will only be used for screening applicants and evicting tenants. I am signing this release based on the understanding that by federal law this information is confidential, and if a disclosure of this information is made that is not proper under that federal law, the result can be a lawsuit by me and other penalties.

Based on all the above, I do, by my signature below, authorize the HDC to check local, state, and federal criminal records for any information on me.

**FULL LEGAL NAME (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CURRENT ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY, STATE, ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE OF BIRTH (MM/DD/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SOCIAL SECURITY NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE SIGNED \_\_\_\_\_\_\_\_\_\_\_\_\_**

**AGREEMENT FOR RELEASE**

7

**OF INFORMATION FROM MY PREVIOUS LANDLORD(S)**

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited below. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 408 (a) (6) (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6) (7) and (8).

I am applying to The Housing Development Corporation for housing. I understand that as a part of processing my application, the HDC is allowed to gather relevant information from my current and previous landlords.

Some landlords may not give out information about me unless The Housing Development has a signed agreement from me for the landlords to release that information to the Housing Development Corporation. I understand that this paper I am signing is the release, which the Housing Development Corporation may need to gather information from my previous landlords.

I understand that if I do not sign this release, my application for housing will not be complete, and I may not receive housing. I am signing this release based on the understanding that if I am denied housing based on what a landlord said that I will be told what a landlord said, and that I have a right to give my side.

I am signing this release based on the understanding that any information discovered will only be used for screening applicants and evicting tenants. I am signing this release based on the understanding that this information is confidential, and it would be a violation of this agreement for the Housing Development Corporation to give the information to anyone else.

Based on all the above, I do, by my signature below, authorize the HDC to check with my landlord(s).

**FULL LEGAL NAME (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CURRENT ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY, STATE, ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE OF BIRTH (MM/DD/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SOCIAL SECURITY NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE SIGNED \_\_\_\_\_\_\_\_\_\_\_\_\_**

**AGREEMENT FOR RELEASE OF CREDIT HISTORY**

**(only for Low Income Housing Tax Credit (LIHTC) or Lease Purchase Home (LPH) applicants)**

“Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited below. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 408 (a) (6) (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6) (7) and (8).

I am applying to The Housing Development Corporation for housing. I understand that as a portion of processing my application, The Housing Development Corporation is allowed to gather relevant credit history information if I apply for a Low-Income Housing Tax Credit or Lease-Purchase property.

I sign this release based on the understanding that any information discovered will only be used for screening applicants. I am signing this release based on the understanding that this information is confidential, and it would be a violation of this agreement for The Housing Development Corporation to give the information to anyone else.

I am signing this release based on the understanding that I will be advised if I am denied housing based on the credit history report, and further, I understand that I must have a Beacon Credit Score of no less than 500 to be eligible for housing designated as LIHTC or LPH property.

**FULL LEGAL NAME (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CURRENT ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY, STATE, ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE OF BIRTH (MM/DD/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SOCIAL SECURITY NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE SIGNED \_\_\_\_\_\_\_\_\_\_\_\_\_**