

Income Information:

For each household member age 18 or older (including family members temporarily absent) list current and anticipated income for the next 12 months. **Include all full time, part time or seasonal income even if completing this application in the off-season.** All information will be verified.

	Yes	No
1. Is any member of your household employed, full-time, part-time or seasonally?		
2. Does any member of your household work for someone who pays them in cash or have self employment income? Check "YES" if you are self employed even if your business does not show a net profit.		
3. Does your household receive regular pay for a member of the armed forces?		
4. Does any member of your household now receive, or expect to receive unemployment benefits, worker's compensation or severance pay?		
5. Does any member of your household receive or expect to receive economic assistance such as MFIP, GA, MSA and/or SSI?		
6. Does any member of your household receive or expect to receive Social Security Benefits?		
7. Does any member of your household receive or expect to receive income from a pension, annuity or retirement account or death benefit?		
8. Does any member of your household receive or expect to receive regular payments from inheritance, an insurance settlement, lottery winnings, etc.?		
9. Does any member of your household receive income from assets including interest on checking or savings accounts, interest and dividends from certificates of deposit, stocks, bonds, life insurance policies or income from rental property?		
10. Does any member of your household receive or expect to receive income from rental property?		
11. Does any member of your family now receive or expect to receive child support? Check "YES" if you have a court order, even if you are receiving less than the full amount awarded.		
12. Does any member of your household now receive or expect to receive spousal maintenance/alimony payments? Check "YES" if you have a court order, even if you are receiving less than the full amount awarded.		
13. Does any member of your household receive <u>regular</u> cash contributions from individuals not living in the unit or from agencies and/or does anyone outside your household regularly pay for any of your bills or give you money? Do not include groceries.		
14. Does any member of your household receive or expect to receive student financial assistance? (public or private, do not include student loans)		
15. Does any member of your household receive income from any source other than those listed above?		

Provide additional information for all "YES" checked items in income table above.

Household Member	Employer Name & Address	Monthly Wages/Salary	MFIP DWP MSA	Child Support (Monthly)	Social Security Benefits	Weekly Unemployment	Other Income Source
			\$	\$	\$	\$	\$

Does any member of your household have "zero income"? yes no If yes, please list household member(s) _____

Asset Information

Does any household member (including children) have money held in:

	YES	NO	CURRENT BALANCE
1. Checking Account			
2. Savings Account			
3. Stocks*			
4. Capital Investments			
5. Bonds			
6. Trusts*			
7. Securities			
8. Whole Life Insurance Policy (do not include term life)			
9. 401K*			
10. IRA/KEOGH Accounts			
11. Certificates of Deposit			
12. Pension/Retirement/Annuity Accounts			
13. Money Market Funds			
14. Treasury Bills			
15. Safety Deposit Box			
16. Lump Sum Payment (inheritance, settlement, lottery winnings, capital gains, etc)			
17. Other			

*Include Trusts, 401K, etc., only if the accounts are accessible to the household prior to termination of employment, retirement or death. If you are unsure, list the account and it will be verified.

Provide additional information for all "YES" checked items in asset table above.

Family Member	Type of Account	Institution name and address	Account Number	Interest Rate

Are any assets held jointly? yes no If yes, list account and with whom it is held: _____

Have you sold or given away any assets for less than their fair market value in the past two years? yes no

If yes, describe the asset, its fair market value, the amount you received, and the date of disposal: _____

Do you own any personal property which is held for investment purposes? (examples: gems, jewelry, antiques, silver, gold coin/stamp/gun collection, etc) yes no. If yes, describe and give current market appraised value.

Description: _____

Current Appraised Value: _____

Other Information: List names, addresses and phone numbers of two relatives or friends who generally know how to contact you:

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Relationship: _____ Relationship: _____

WARNING: SECTION 1001 OF THE TITLE 18 OF THE U.S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE WILLFUL FALSE STATEMENTS OR MISREPRESENTATIONS TO ANY DEPARTMENT OR AGENCY OF THE U.S. AS TO ANY MATTER WITHIN ITS JURISDICTION.

Applicant Certification:

I/We certify that the information given to the Fergus Falls HRA/Timber Place Townhomes on household composition, income, net family assets, and allowances and deductions is accurate and complete to the best of my/our knowledge and belief. I/We understand that false statements or information are grounds for termination of housing assistance and termination of tenancy. I acknowledge that all of the above information is relevant to the qualification under federal income tax law for the low income housing tax credit. I consent to the disclosure of such information to the housing credit agency or authorized agent thereof and any authorized agent of the Treasury Department or Internal Revenue Service.

Signature of Head: _____ Date: _____

Signature of Spouse: _____ Date _____

Or co-head

Note to applicants: If you believe you have been discriminated against, you may call the Fair Housing and Equal Opportunity National Toll-free Hot Line at 800-424-8590. (Within Washington DC Metro area call 426-3500.)

RENTAL AND CREDIT INFORMATION

Answer all questions

Current Housing Status Information:

Applicant's Name: _____

Current Address: _____ City: _____ State: _____ Zip: _____

How long have you lived at this address: _____ Current monthly rent: _____

How many people live in your unit? _____ Are you being evicted? yes no If yes,

Why? _____

Are you under lease now? yes no

Are you now living in a government subsidized unit (e.g. Public Housing, Section 8, Section 23, or Section 221 (d) (3) subsidized project)? yes no

Have you ever lived in Public Housing? yes no. If yes, where _____

Approximate dates: _____

Have you ever participated in the Section 8 Rental Assistance Program? yes no

If yes, Name & address of agency _____ Approximate dates: _____

Current Landlord's Name: _____

Landlord's Address: _____

Your past 2 addresses and landlords addresses (do not list your current Landlord):

1. Your Address: _____ 2. Your address: _____

Dates of Occupancy _____ Dates of Occupancy: _____

Landlord's Name _____ Landlord's Name _____

Landlord's address _____ Landlord's address _____

Is any member of your household related to any Landlord listed above? yes no If yes, please list Landlord name and relationship to household member. _____

Do you pay your own utilities? yes no If yes, please list information below:

Company	Address	Account Number

Please list the names of the Cities, States, and Counties you've lived in for the past 5 years

Street Address	City	State	County

List three personal references we could contact for a character reference (employers, clergyman, social workers, etc.) **DO NOT list relatives or personal friends.**

Name	Address	Relationship	Phone

Have you or any household member ever been arrested? yes no If yes, explain: _____

Have you or any household member been convicted of a crime? yes no If yes, explain: _____

Have you or any household member ever been convicted of a fraudulent activity against another government Agency? yes no If yes, explain: _____

Are you or any household member currently under investigation for fraudulent activity against another Government agency? yes no If yes, explain: _____

All of the above information is true and complete to the best of my knowledge.

Applicant: _____ Date: _____

Spouse/Other Adult: _____ Date: _____

I/We hereby give the Fergus Falls HRA/Timber Place Townhomes permission to: (1) obtain information from my previous landlords regarding my tenancy, complaints, damages and housekeeping, (2) request personal references from those persons I have listed on my application, and (3) obtain credit references from the creditors listed on my application.

I/We understand that this information will be used in assessing my eligibility for a low-rent housing unit and that the HRA/Timber Place Townhomes may not be able to provide me with housing if I do not permit landlord, personal reference, and/or credit checks.

Applicant: _____ Date: _____

Spouse/Other Adult: _____ Date: _____