

Imperial Valley Housing Authority

Administrative Office: 1402 D Street
 Brawley, CA 92227
 (760) 351-7000

On-site Office: 970 North Waterman Court
 El Centro, CA 92243
 (760) 352-77364

DO NOT WRITE IN THIS SPACE	APP# _____	BR _____	PREFERENCE _____
PROGRAMS _____	DATE _____	TIME _____	STAFF _____

Application for Housing Assistance - Valley Apartments

USE BLUE OR BLACK INK ONLY
 ANSWER EACH QUESTION – DO NOT LEAVE BLANKS

SECTION 1 – Head of Household Information

Full Legal Name:			
Present Address:			
City:	State:	Zip Code:	
Mailing Address:			
City:	State:	Zip Code:	
Home Phone:	Mobile:	Other:	
Social Security Number:		Date of Birth:	
How did you become aware of our services?			

SECTION 2 – Disabled Housing Requirement

Do you or a family member require an accessible unit to accommodate a disability? Yes No

Explain:

Is the head of household or spouse, the household member with the disability? Yes No

SECTION 3 – Household Member Information – Include those who will reside in home on a part time basis

Legal Name	Relationship to Head of Household	Gender M or F	Date of Birth	Age	City & State of birthplace	Social Security Number	Enrolled in an Institution of Higher Learning?
1)	Applicant						
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							

SECTION 4 – Income & Asset Information

Include all sources of income including: wages, alimony, child support, Social Security benefits, pensions/retirement, Veteran's benefits, disability/workers compensation, AFDC/Cash Aid, rental property income, stock dividends and any other source of family income. Omitting income information may cause your disqualification for rental programs. Include contributions from outside sources such as monetary (cash) assistance from family members or friends.

Household member	Source of Income	Amount of Income	Frequency of Income (weekly, bi-weekly, monthly)

Is any of the family income derived from agricultural/farm labor employment? Yes No

Has any household member received a lump sum payment in the past year? Yes No

Does any member of the household own any property in any country? Yes No

Does any member of the household have a bank account? Yes No

Bank Name: _____ Account Holders Name: _____

Make and Model of Vehicle(s): _____

Monthly Vehicle Payment: \$ _____

Are you or someone else responsible for the vehicle payment? _____

Does any household member earn income from rentals or real estate? Yes No

SECTION 5 – Household Information

Have you or any other adult member used any name(s) or Social Security number(s) other than your own? Yes No If yes, explain:

IVHA will investigate the criminal history of all adults listed on this application – This action is permitted by Penal code 11105.003 and Meagan’s Law.

Have you or any other member of the household ever been arrested, charged with a crime, regardless of a conviction? Yes No If yes, explain:

Are you or any other household member on parole or probation? Yes No

Is any member of the household subject to register as a sex offender in any state? Yes No

Has any member of the household been evicted from a federally assisted housing program for providing fraudulent information, or have had to repay the program for misrepresenting information? Yes No If yes, please explain:

Is there a family member currently absent from the home? Yes No If yes, please explain:

Has any member of the household ever received housing assistance from this Housing Authority? Yes No If yes, was your assistance terminated by the Housing Authority? Yes No

Do you owe money to any Federal or State subsidized housing program? Yes No
(Your response will be verified by the Enterprise Income Verification System for accuracy)

WARNING: Title 18, Section 1001 of the US Code states, a person is guilty of a felony for knowingly and willingly making false statements to any department or agency of the United States, making false statements is a felony under California law, Penal code sections 115, 118, 487, 532, and may result in criminal charges.

By signing this application the adult household members contained within this application, certify the information contained within this application is true and correct to the best of their knowledge. The adult household members understand it is their responsibility to report changes to this application in a timely manner. All adults certify the residence will serve as the household's primary residence.

Applicant Signature

Date

Co-Applicant

Date

Adult Household Member

Date

Adult Household Member

Date

Do not write in this space

IVHA Representative

Date

If you or anyone in your family is a person with a disability and you require an accommodation to fully utilize our programs and services, please contact the Intake Specialist at (760) 351-7000 ext.213 to request a Reasonable Accommodation Form.

Ethnic Self Identification: The information regarding race, national origin, and gender designation solicited within this application is requested in order to assure the Federal Government, acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but encouraged to do so. This information will not be used in evaluating you application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and gender of individual applicants on the basis of visual observation or surname.

- White African American Hispanic American Indian/Alaskan Native Asian/Pacific Islander



COMPLETION OF THIS SECTION IS MANDATORY

Criminal Record Certification and Screening Consent

The Imperial Valley Housing Authority conducts a criminal history background check on **all** adults included in this Section 8 Housing Application.

- ✓ I hereby certify I have disclosed to the Imperial Valley Housing Authority all criminal history records of each adult included in this application.

- ✓ I hereby give my consent to the appropriate Federal, State and local law enforcement agencies to release any and all information to the Imperial Valley Housing Authority for the purpose of determining my eligibility for subsidized housing, by conducting a criminal history background investigation. Pursuant to P.C. Section 11105.3 this information will be kept in strict confidentiality and will be used only to determine eligibility for subsidized housing assistance.

All household members 18 years of age and older must sign and complete below:

Name	CA Driver's License & Social Security Number	Date of Birth	Signature