



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION

NAME _____ Date of Birth _____

DATE _____

PHONE NUMBER _____

FULL NAME of OCCUPANTS	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	RACE	SOCIAL SECURITY NUMBER	INDICATE MARRIED (M) WIDOWED (W) SEPARATED (S) DIVORCED (D)
1	APPLICANT				
2					
3					
4					
CHILDREN'S NAME AS ON SS CARD	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	SCHOOL ATTENDING	SECURITY NUMBER	ABSENT PARENTS NAME IF ANY
1					
2					
3					
4					

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

NAME _____

RELATIONSHIP _____

STREET ADDRESS _____

CITY, STATE ZIP _____

SOCIAL SECURITY NUMBER IF KNOWN _____

OFFICE USE

DATE/TIME RECEIVED: _____ / _____

RECEIVED BY: _____



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION
INCOME INFORMATION

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

TOTAL HOUSEHOLD INCOME

List all money earned or received by everyone living in your household. This includes money from wages, self-employment, child and or spousal support, contributions, social security disability payments (SSI), Workman's Compensation, retirement benefits, Veterans Benefits, rental property income, stock dividends, income from bank accounts and all other sources

Household Members Name	Employer	Total Weekly Wages	Child and/or Spousal Support	Social Security Benefits	All Other income
1					
2					
3					
4					



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION

RESIDENT HISTORY

Present Address: _____ Zip Code: _____
 Present contact telephone number: _____
 Present Landlord: _____ Present Landlord's Phone Number: _____
 Landlord's Address: _____
 At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____
 Reason for Moving: _____

Previous Address: _____ Zip Code: _____
 Previous Landlord: _____ Previous Landlord's Phone Number: _____
 Landlord's Address: _____
 At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____
 Reason for Moving: _____

Previous Address: _____ Zip Code: _____
 Previous Landlord: _____ Previous Landlord's Phone Number: _____
 Landlord's Address: _____
 At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____
 Reason for Moving: _____

Have You or any of your household ever been evicted? YES NO
 If yes, from where? _____ When _____
 Please give details _____

Do you or any of your household owe money to any Public Housing Authority, HUD, Apartment or Community Landlord? YES NO
 If yes, to whom? _____ How much _____

Have you or any family member ever lived in public or assisted housing? YES NO
 If yes, give address _____
 Dates of occupancy: _____

Have you ever committed any fraud in a federally assisted housing program or been asked to repay money for knowingly misrepresenting information for such housing programs? YES NO
 If yes, please explain _____

Personal Reference (NOT RELATED) _____ Phone: _____
 Personal Reference (NOT RELATED) _____ Phone: _____
 Personal Reference (NOT RELATED) _____ Phone: _____
 Personal Reference (NOT RELATED) _____ Phone: _____



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION
ASSETS AND CREDIT INFORMATION

Has any household member disposed of any assets for less than their fair market value during the past two years? YES NO If yes, give date and explain: _____

Does any household member own or have interest in any real estate, boat, or mobile home? YES NO
 If yes,, please explain _____

Has any household member sold any real estate in the last two years? YES NO
 If yes, please explain: _____

Does any household member own any stocks or bonds? YES NO
 If yes, please explain: _____

Does any household member have checking or savings accounts or certificate of deposit? YES NO
 If so, list below:

<u>Type & Account number</u>	<u>Value</u>	<u>Interest Rate</u>	<u>Annual Income from Asset</u>	<u>Bank Name</u>



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION

Additional Information

Number of vehicles? _____ Owned by whom? _____

Make/Model _____ Year _____ Color _____ Tag# _____
 State _____ Vehicle Registered to: _____ Vin# _____

Make/Model _____ Year _____ Color _____ Tag# _____
 State _____ Vehicle Registered to: _____ Vin# _____

Make/Model _____ Year _____ Color _____ Tag# _____
 State _____ Vehicle Registered to: _____ Vin# _____

Do you have Insurance for your personal belongings? YES NO

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, Please list all convictions:

Are you or any member of your household a current, illegal user of or addicted to a controlled substance: YES NO

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

Have you or any other adult household member ever used any name(s) or social security number(s) other than the one you are currently using YES NO Please Explain _____

Emergency Contact: _____ Relationship: _____

Address _____ Phone: _____

Please provide any additional information that would help us to process your application:



Barboursville Housing Authority
 PO BOX 243 Barboursville, WV 25504
 (304) 736-1262



RENTAL APPLICATION

Certification

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

I do hereby swear and attest that all of the information above about me is true and correct. I 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 to the Milton Housing Authority in writing immediately.

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

IT IS THE POLICY OF THIS ORGANIZATION 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.