

SIKESTON HOUSING AUTHORITY
360 Allen Boulevard
P.O. Box 829
Sikeston, Missouri 63801

Phone: (573) 471-3012

TDD: 1-800-545-1833, Ext. 890

SECTION 8 HOUSING CHOICE VOUCHER PRE-APPLICATION THIS PRE-APPLICATION WITH ALL REQUIRED INFORMATION MUST BE HAND DELIVERED TO THE ABOVE ADDRESS. Do not mail, e-mail, or fax!

THINGS TO KNOW *(You may keep this top sheet for future reference)*

1. **Incomplete applications cannot be accepted.** Incomplete applications will be returned. Please submit the following items with your application:
 - **Documentation of Social Security Number** for all members of the applicant household. Example: Social Security Cards or letter from the Social Security Administration with social security numbers.
 - **Green Cards, I-94 (white cards), passport or other immigration documents** for all non-citizen members of the household.
 - **Birth Certificates** for all members of the applicant household.
 - **Valid Picture Identification** for all household members 18 years of age and older.
 - **Proof of Disability**, If you are claiming to be disabled, you will need a letter from Social Security Administration that states you are a disabled person.
2. **Each applicant household member will be screened for tenant suitability** prior to being offered a unit. This screening consists of, but not limited to, a **criminal background check** (including drug-related, alcohol related, violent crimes against persons or property, and sex offenders), and if required, a **landlord history screening**.
3. **We must have a current mailing address to contact you at all times.** If we are unable to contact you by mail, you may be removed from the waiting list without further notice. If you are removed from the waiting list for a failure to respond to our request for information, you will be required to reapply for assistance. If you move while this application is pending – you must let us know of your new address.
4. **Family Information:** List **EVERYONE** who will live with you, including live-in aides and any unborn children should you be pregnant. Changes in your family circumstances (marriage, divorce, child birth, children moving in or out of your household, etc.) while you are on the waiting list must be reported as it may affect your place on the waiting list.
5. **Ethnicity and Race:** The housing authority collects statistical data on ethnicity and race in accordance with Fair Housing Federal Regulations. This is for statistical purposes only. The information provided will **NOT** affect your application for assistance.
6. **Rental History:** We ask for at least three (3) years of rental history. **You must include all landlords including private landlords or housing authorities.** It is your responsibility to provide us with the information necessary should we need to contact your past landlords. You are required to pay any and all past debts owed before you may be offered a unit. If you owned – rather than rented – your previous home, you will need to furnish mortgage company references and proof of title or transfer.
7. **We rent from a waiting list of applications based on application date and time.** Your place on the Section 8 waiting list is determined by the information supplied and the date and time your application is received in our office. If you fail to respond to requests for information your name may be removed from the waiting list. It is very important that you keep us informed of any mailing address changes. If you are removed from the waiting list for a failure to respond to requests for information, you will be required to reapply for assistance.
8. **False information is grounds for denial of this application or termination of assistance.** Your application will be denied if you misrepresent any information on this application. If the misrepresentation is found after a lease is signed, your rental assistance may be terminated and your household may be evicted. You may also be charged with additional rent or with a criminal violation.

PHA use only:

Date of Application: _____ Time of application: _____ Application # _____

Section 8 Pre-application

Housing Interview and Application: Shortly before a Section 8 Voucher is available you will be invited to a housing interview. It is important that you bring all the required documents to the interview. At the interview, staff will discuss your housing needs and options, go over your application and collect the information needed to determine final housing eligibility, resident suitability, total household occupancy and income. You will be asked to provide detailed information on all members of your household, verify citizenship status, report current income and expense information, and provide updated landlord information. If you do not come to the housing interview you will be deleted from the waiting list. You will not be offered housing until you complete this application, provide all documentation, and complete a housing interview.

	HEAD OF HOUSEHOLD	CO-HEAD OR OTHER ADULT
Name _____ →		
Physical address _____ →		
Mailing Address _____ →		
City, State Zip _____ →		
Phone Number _____ →		
Email Address _____ →		
Any other names used (maiden)		

This information is requested to comply with Equal Opportunity requirements and will not affect your application for housing assistance.

Race of Head: ___ Caucasian/White ___ African American/Black
 ___ Native American/Alaskan Native ___ Asian/Pacific Islander

Ethnicity of Head: ___ Non-Hispanic/Non-Latino ___ Hispanic/Latino

Please submit social security cards, birth certificates for all members and picture ID for all members 18 and older.

Below list each person who will reside in your household when you are receiving assistance.

	First & Last Name	Date of Birth	Sex	Social Security Number	Relation to Head	Disabled Yes/No	Birthplace City, State	Student Full/Part Time
H					Head			
2								
3								
4								
5								
6								
7								

FAMILY INCOME INFORMATION

Please list the source and amount of all current income received by all family members, including you. Include all earnings and benefits received from TANF, VA, Social Security, SSI, SSDI, Unemployment, Worker's Compensation, Child Support, Pension, etc.

Family Member Name	Income Source	Amount \$	Frequency - Per
			___ Week ___ Month ___ Year
			___ Week ___ Month ___ Year
			___ Week ___ Month ___ Year
			___ Week ___ Month ___ Year
			___ Week ___ Month ___ Year

FAMILY SCREENING INFORMATION

Does the applicant have any past due utility bills? ___ Yes ___ No Where? _____

Has the applicant(s) been convicted of fraud in a federally subsidized housing program? ___ yes ___ No,
If yes, where? _____ When? _____

Has the applicant(s) ever lived in Public Housing, Section 8 or any other subsidized housing? ___ Yes ___ No
If yes, Dates: From: _____ To: _____
Name and address of other Housing Authority/Other Housing Agency _____

Does the applicant(s) owe any money to another Housing Authority/Other Housing Agency? ___ Yes ___ No, If yes name and address of Agency _____

Has the applicant(s) been arrested or convicted of a crime other than a traffic violation? ___ Yes ___ No, If yes, explain the incident and who was involved. _____

Has the applicant(s) ever been arrested for illegal use of a controlled substance, activities related to abuse of alcohol, or violent crimes against persons or property? ___ Yes ___ No, If yes explain the nature of the problem and who was involved: _____

Are any of the applicant(s) **currently** charged with any crime (misdemeanor or felony)? ___ Yes ___ No, If yes, explain the nature of the problem and who is involved: _____

Is any applicant(s) currently subject to a lifetime registration requirement under any state sex offender registration program? ___ Yes ___ No, If yes, give name and state: _____

Is any applicant(s) currently on parole or probation? ___ Yes ___ No, If yes, explain fully: _____

Is any applicant(s) required to wear an electronic monitoring device (bracelet)? ___ Yes ___ No, If yes, give name and explain fully: _____

LANDLORD HISTORY

List the past 2 landlords and the last 3 years of residency without any breaks in occupancy starting with the most current landlord.

CURRENT LANDLORD	HEAD	CO HEAD OR OTHER ADULT
RENTAL ADDRESS →		
CITY & STATE →		
LANDLORD NAME →		
LANDLORD ADDRESS →		
CITY & STATE →		
LANDLORD PHONE NUMBER →		
MONTH & YEAR MOVE IN →		
MONTH & YEAR MOVE OUT →		

PRIOR LANDLORD	HEAD	CO-HEAD OR OTHER ADULT
RENTAL ADDRESS →		
CITY & STATE →		
LANDLORD NAME →		
LANDLORD ADDRESS →		
CITY & STATE →		
LANDLORD PHONE NUMBER →		
MONTH & YEAR MOVE IN →		
MONTH & YEAR MOVE OUT →		

PRIOR LANDLORD	HEAD	CO-HEAD OR OTHER ADULT
RENTAL ADDRESS →		
CITY & STATE →		
LANDLORD NAME →		
LANDLORD ADDRESS →		
CITY & STATE →		
LANDLORD PHONE NUMBER →		
MONTH & YEAR MOVE IN →		
MONTH & YEAR MOVE OUT →		

Have you ever been evicted from any house in which you have lived? ___ Yes ___ No

If yes, why? _____

Landlord name and address, _____

APPLICANT CERTIFICATIONS

All family member age 18 and over should review the information listed on this application and MUST sign below.

I/we do hereby certify that all the statements on this application are true to the best of my/our knowledge and believe and understand that they will be verified. I/we authorize the release of information to the Housing Authority by my/our employer(s), the Department of Public Assistance, the Social Security Administration, and/or other businesses, landlords or government agencies. I/we understand that any false statement made or pertinent information omitted on this application will be cause for me/us to be disqualified from admission.

Signature of Head of Household

Date

Signature of Spouse or Co-Head

Date

Signature of Other Adult Member

Date

Warning: Title 18 U. S. C. 1001 provides, among other things that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious or fraudulent statement or entry in any matter within the jurisdiction of a department or agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

