

HOUSING AUTHORITY OF PULASKI COUNTY
P.O. BOX 246 ~ 130 RICHLAND TERRACE
MOUNDS, IL 62964

APPLICATION FOR PUBLIC HOUSING

Instructions: Please read carefully. Incomplete applications will not be processed.

1. This application is valid for all Public Housing properties operated by the Housing Authority of Pulaski County.
2. To be qualified for admission to Public Housing, applicants must:
 - (a) Be a family as defined in PHA's Admission and Continued Occupancy policy;
 - (b) Meet the HUD requirements on citizenship or immigration status;
 - (c) Have an annual income at the time of admission that does not exceed the income limits established by HUD that are posted in the PHA office.
 - (d) Provide documentation of Social Security numbers for all family members, age 6 or older, or certify that they do not have Social Security numbers.
 - (e) Meet or exceed the Applicant Selection Criteria;
 - (f) Pay any money owed to PHA or any other housing authority;
 - (g) Not have had a lease terminated by PHA in the past 12 months;
 - (h) Be able and willing to comply with the Housing Authority lease; and
 - (i) Not have any family member engaged in any criminal activity that threatens the life, health, safety, or right to peaceful enjoyment of the premises by other residents, and not have any family members engaged in any drug-related criminal activity.
3. Complete applications will be entered on the Waiting List according to the date and time of application. Submission of an application **DOES NOT** guarantee placement on any Waiting List. **WE DO NOT OFFER EMERGENCY HOUSING.**
4. Each applicant who meets the above qualifications will receive one unit of the size and type needed. If the applicant accepts the offer, the applicant will be offered a lease. If the applicant refuses the offer without good cause, the application will be kept for three (3) refusals unless applicant requests to be removed from the waiting list.
5. Applicants with disabilities may seek assistance with the application at the PHA's office, at the address listed above.
6. PHA will conduct a criminal background check on all applicants age 16 years and older.
7. PHA will conduct a credit check on the person or persons listed on the application as Head of Household/Co-Head.
8. Applications can also be accessed through the Housing Authority website.



Fraud Bulletin

U.S. Department of Housing and Urban Development
Office of Inspector General

FALL, 2013

VOLUME 1 | NUMBER 2

APPLYING FOR HUD HOUSING ASSISTANCE?

THINK ABOUT THIS... IS FRAUD WORTH IT?

DO YOU REALIZE...?

- If you commit fraud to obtain assisted housing from HUD, you could be:
- Evicted from your apartment or house.
- Required to repay all overpaid rental assistance you received.
- Fined up to \$10,000.
- Imprisoned for up to five years.
- Prohibited from receiving future assistance.
- Subject to State and local government penalties.

DO YOU KNOW THAT...

- You are committing fraud if you sign a form knowing that you provided false or misleading information.
- The information you provide on housing assistance application and recertification forms will be verified.
- The local housing agency, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State, or local governments and with private agencies.
- Certifying false information is fraud



So Be Careful!

ASK QUESTIONS!

If you don't understand something on the application or recertification forms, always ask questions. It's better to be safe than sorry.

When you fill out your application and yearly recertification for assisted housing from HUD make sure your answers to the questions are accurate and honest.

You must include:

- All sources of income and changes in income (raise or bonus) you or any members of your household receive, such as wages, welfare payments, social security and veterans' benefits, pensions, retirement, etc.
- Any money you receive on behalf of your children, such as child support, AFDC payments, social security for children, etc.
- All assets, such as bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you or any member of your household.
- All income from assets, such as interest from savings and checking accounts, stock dividends, etc.
- Any business or asset (your home) that you sold in the last two years at less than full value.
- The names of everyone, adults or children, relatives and non-relatives, who are living with you and make up your household.



Watch Out for Housing Assistance Scams!

- Don't pay money to have someone fill out housing assistance application and recertification forms for you.
- Don't pay money to move up on a waiting list.
- Don't pay for anything that is not covered by your lease.
- Get a receipt for any money you pay especially if you pay in cash.
- Get a written explanation if you are required to pay for anything other than rent (maintenance, utility charges, or fees).

The U.S. Department of Housing and Urban Development (HUD) Office of Inspector General (OIG) is the Department's law enforcement and auditing arm and is responsible for investigating complaints of fraud, waste and mismanagement in HUD funded programs.

REPORTING FRAUD

*Serious allegations of fraud should be reported to your local
HUD Office of Inspector General or to the HUD OIG Hotline at:
<http://www.hudoig.gov/report-fraud>*



**THE RURAL DEVELOPMENT PROPERTIES
HOUSING AUTHORITY OF PULASKI COUNTY
P.O. BOX 246 ~ 130 RICHLAND TERRACE
MOUNDS, IL 62964**

For Office Use Only

Date: _____
Time: _____

I hereby apply for a rental housing living unit in this housing complex, and for rental assistance, if I am eligible and if it is available. I certify that this will be my permanent residence and I will not maintain a separate subsidized rental unit in a different location.

-----PLEASE PRINT ALL INFORMATION-----
PRELIMINARY INFORMATION PERTAINING TO APPLICANT(S)

Applicant's Name: _____ SSN: _____ Date of Birth: _____ Age: _____

Co-Applicant's Name: _____ SSN: _____ Date of Birth: _____ Age: _____

Others Living in Unit:

Name _____	SSN _____	Date of Birth _____	Age _____
Name _____	SSN _____	Date of Birth _____	Age _____
Name _____	SSN _____	Date of Birth _____	Age _____

Current Address: _____

Telephone Number: _____ Approximate Annual Family Income: \$ _____

Source(s) of Income: _____ Are you a U.S. Citizen? Yes No

Are you a student under the age 24? Yes No Are you a veteran? Yes No

Are you married? Yes No

Do you need special accommodations or modifications to the living unit based on a disability? Yes No

Do you request consideration for an income adjustment based on disability? Yes No

The information solicited below is requested by the apartment owner in order to assure the Federal Government, acting through USDA Rural Development, that Federal Laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, marital status, age and handicap are complied with. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner (or managing agent) is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.

HEAD OF HOUSEHOLD
(Check as appropriate)

<u>Race</u>	<u>Ethnicity</u>	<u>Marital Status</u>	<u>Sex</u>
<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Married	<input type="checkbox"/> Male
<input type="checkbox"/> Asian	<input type="checkbox"/> Not Hispanic	<input type="checkbox"/> Separated	<input type="checkbox"/> Female
<input type="checkbox"/> Black or African American		<input type="checkbox"/> Unmarried	
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander			
<input type="checkbox"/> White			
<input type="checkbox"/> Other			

Equal Housing Opportunity

In accordance with Federal Law and U.S. Department of Agriculture (USDA) policy, the Housing Authority of Pulaski County is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, and familial status. USDA is an equal opportunity provider, employer and lender. To file a complaint of discrimination, write to: USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call 800-795-3272 (voice) Or 202-720-6382 (TDD).

PN 370 (10-11-06)

cont. page 2...

SIGNATURE(S): _____
(Applicant) (Owner or Agent)

_____ (Co-Applicant) _____ (Date)

For Management Use Only

Eligibility Determination:

Date: _____ (Attach copy of Notification Letter)

___ Eligible Unit Size(s): __ 1BR __ 2BR

___ Ineligible: Reason(s) _____

Comments: _____

FY 2023 INCOME LIMITS – PULASKI COUNTY, ILLINOIS

NUMBER OF PERSONS	50% VERY LOW INCOME	LOW INCOME 80%	EXTREMELY LOW INCOME
1	\$28,150	\$45,000	\$50,500
2	\$32,150	\$51,400	\$56,900
3	\$36,150	\$57,850	\$63,350
4	\$40,150	\$64,250	\$69,750
5	\$43,400	\$69,400	\$74,900
6	\$46,600	\$74,550	\$80,050
7	\$49,800	\$79,650	\$85,150
8	\$53,000	\$84,800	\$90,300

Equal Housing Opportunity

In accordance with Federal Law and U.S. Department of Agriculture (USDA) policy, the Housing Authority of Pulaski County is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, and familial status. USDA is an equal opportunity provider, employer and lender. To file a complaint of discrimination, write to: USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call 800-795-3272 (voice) Or 202-720-6382 (TDD).

PN 370 (10-11-06)

DATA COLLECTION SYSTEM AND DISCLOSURE STATEMENT FOR RD RECIPIENTS

USDA Rural Development (RD) Staff is responsible for advising Federally assisted program recipients of data collections requirements and ensuring an acceptable data collection system is in place for acquiring information required by Civil Rights compliance reviews. Rural Development financed programs are required to maintain ethnic, racial and gender data for participants/beneficiaries, employees, Board of Directors and applicants to monitor adherence to Title VI and other civil rights laws. The recipient of federal financial assistance agrees to this requirement by signing the Form RD 400-4 Assurance Agreement.

The Standards for the Classification of Federal Data on Race and Ethnicity can be found in the Federal Register Volume 62, No. 210. The five categories for race and the two categories for ethnicity are listed below.

For Multi-Family Housing Projects, refer to HB-2-3560, Chapter 6, for data collection and disclosure statement requirement on applications and waiting lists.

Business and Community Program recipients are encouraged to collect the required data at time of service, application, registration, eligibility determination, screening, membership, or intake, etc. All application type forms for RD financed programs include the following disclosure and data collection options below the signature and date block. The disclosure statement, which outlines the parameters for this requirement must precede the data collection options.

Sample:

“The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to provide this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race, ethnicity and sex of applicants on the basis of visual observation or surname.”

I do not wish to furnish this information

Ethnicity:

Sex: **Male** **Female**

Hispanic or Latino

Not Hispanic or Latino

Race: (Mark all that apply)

White

Black or African American

Asian

Native Hawaiian or Other Pacific Islander

Non-Discrimination State: This institution is an equal opportunity provider and employer.

CRIMINAL HISTORY BACKGROUND CHECK

Housing Authorities are authorized under Section 9 (b) of Public Law 104-120 signed 3/28/1996 to obtain national criminal history records of adult applicants for, or tenants of, public housing for purposes of applicant screening, lease enforcement, and eviction.

Criminal history background checks will be run for **Drug-Related** activity, **Violent** criminal activity including **Sex Crimes**, and **Alcohol Related** criminal activity. If any state or national history is revealed in this search, the specific information will be verified for the **Housing Authority by the State and/or NCIC**. If records are revealed, applicants may be required to submit fingerprints for positive identification of records. Failure to submit fingerprints when a possible match has been made is grounds for **immediate termination** of the application proof or dwelling lease.

Applicant/tenant authorizes criminal history checks for all adult household members during both the application process and during the occupancy by signing the original application for housing or continued occupancy without requirement of future signatures, releases, or additional authorization. Failure to provide authorization is grounds for denial of application.

NAME _____
LAST FIRST MIDDLE MAIDEN OR OTHER

Social Security #: _____ **Date of Birth:** _____ **Race:** _____ **Sex** _____

SIGNATURE OF APPLICATION/TENANT **DATE**

SIGNATURE OF OTHER ADULT 18 OR OLDER **DATE**

FOR OFFICE USE ONLY

Date of Initial Criminal History Background Check on the applicant/tenant: _____

Type of Activity Date Disposition or Action Taken

Additional Criminal History on the application/tenant.

Date: _____ **Reason for Additional Check:** _____

Type of Activity Date Disposition or Action Taken