

**APPLICATION
HOUSING AUTHORITY OF THE COUNTY OF JACKSON, ILLINOIS
HOUSEHOLD COMPOSITION**

ADULTS (LEGAL NAME)	RELATION TO HEAD	SEX	DATE OF BIRTH	BIRTHPLACE (CITY, STATE)	SOCIAL SECURITY NUMBER	RACE
1	HEAD					
2						
3						
4						
CHILDREN (NAME AS IT APPEARS ON SS CARD)	RELATION TO HEAD	XX	DATE OF BIRTH	BIRTHPLACE:	SOCIAL SECURITY NUMBER	RACE
1		XX				
2		XX				
3		XX				
4		XX				
5		XX				
6		XX				

Have you or any other adult members ever used any name(s) or Social Security number(s) other than the one you are currently using? Yes ___ No ___

If yes, explain: _____

Marital Status of the Head of Household: _____
Do you have any military connection? Yes ___ No ___ If yes, which branch? _____

TOTAL HOUSEHOLD INCOME

HOUSEHOLD MEMBER	EMPLOYER & LENGTH OF EMPLOYMENT	TOTAL	CHILD	SOCIAL	UNEMPLOY-	ALL
		WEEKLY WAGES	SUPPORT MONTHLY	SECURITY BENEFITS	MENT BENEFITS	OTHER INCOME

ASSETS: Do you or any household member own or have an interest in any real estate, boat, and/or mobile home? _____
Have you sold any real estate in the last two years? _____ Do you own any stocks and bonds? _____ Do you have savings accounts? _____ Do you have checking accounts? _____ Do you have any bank accounts? _____ if yes to any of the above, please list: _____

CURRENT HOUSING STATUS

Current Address: _____ City/State: _____ Zip: _____
Phone Number: _____ Number of Bedrooms in Your Unit: _____ Total Number of People Living in Your Unit: _____ Current Monthly Rent: \$ _____ Average Monthly Utilities: \$ _____
Is Your Unit Possibly Unsafe or Substandard? Yes ___ No ___
Have you ever lived in any assisted housing? Yes ___ No ___
if yes, where? _____
Current (or most current) Name of Landlord: _____
Address of Landlord: _____

Phone Number of Landlord: _____
Areas of Preference Within Jackson County: 1st Choice _____
2nd Choice _____
3rd Choice _____
How did you hear about JCHA? _____
Would you accept studio apartment? Yes ___ No ___

Mailing Address: _____ City/State: _____ Zip: _____
(If different from Current Address)
Alternate Phone Number: _____

Current Housing Status: Please check all that apply

Currently Under Eviction : _____ Unsafe or Sub Standard Living Conditions : _____
Living with Friend / Relative : _____ Currently residing in Shelter/Center : _____
Displaced due to Nat. Disaster : _____ Without housing : _____

PLEASE READ AND ANSWER THE FOLLOWING QUESTIONS THOROUGHLY.

1. Have you or anyone in your household ever been involved in arrested or convicted for drug activity?

Yes _____ No _____ State: _____ Town: _____ County: _____

If yes, explain, be specific: _____

2. Have you or anyone in your household ever been involved in, arrested or convicted for any crime other than traffic violations?

Yes _____ No _____ State: _____ Town: _____ County: _____

If yes, explain, be specific: _____

3. Are you or anyone in your household currently on parole or probation?

Yes _____ No _____ State: _____ Town: _____ County: _____

Name and phone number of parole/probation officer: _____

4. Have you ever committed fraud in a federally assisted housing program or been requested to repay money for knowingly misrepresenting information for such housing:

Yes _____ No _____ State: _____ Town: _____ County: _____

If yes, explain, be Specific: _____

5. Do you currently owe any money to this or any other Housing Authority for unpaid rent or damages paid to a landlord on your behalf?

Yes _____ No _____ State: _____ Town: _____ County: _____

If yes, explain, be specific: _____

6. Do you have a pet? _____ Type? _____ Weight: _____ Age: _____

I hereby certify that the information that I have provided on this PRE-APPLICATION is true and correct to the best of my knowledge. I understand that Title 18 Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States.

SIGNATURE: _____ DATE: _____