

NEEDHAM HOUSING AUTHORITY

28 Captain Robert Cook Drive · Needham, MA 02494
Tel (781) 444-3011



FEDERAL APPLICATION FOR NEEDHAM PUBLIC HOUSING

Please fill out all sections completely. Contact us if you should need help in completing this application.

1. Name _____ Telephone _____
(last) (first) (middle initial)

Permanent Home Address _____
(number & street) (apt. #) (city) (state) (zip)

2. Please list only the persons who will live in your household. Include yourself and indicate if you expect a change in household size.

Name	Relationship	Date of Birth	Sex	Social Security #	Full Time Student?
	Head of Household				<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Please give the total income of each of the household members. Also include the time period and income source.

Total Income Amount	Every			Work	TAFDC	SSI	Soc Sec	Other
	Weekly	Two Weeks	Monthly					
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Please provide following additional information regarding your household income. Be sure to report gross income, before deductions. Identify all sources. Attached additional page if needed.

Household Member	Type of Income	Name/Address of Employer or Source of Income	Gross Income for Next 12 months
	Salary, wages including overtime		
	Salary, wages including overtime		
	Salary, wages including overtime		
	Unemployment Compensation		
	Military Pay		
	VA Disability		
	Net Income from Business		
	Interest, Dividends, Annuities, Trust Income		
	Interest, Dividends, Annuities, Trust Income		
	Social Security, SSI and SS Disability Benefits		
	TAFDC or Public Assistance		
	Alimony and/or Child Support Payments		
	Alimony and/or Child Support Payments		
	Educational Scholarships or Grants		
	Other Income		
		TOTAL GROSS INCOME	\$

Needham Housing Authority

FULL APPLICATION (Cont'd)



5. Additional Income Information. In the chart below please provide information regarding your expenses.

Expense	Monthly	Yearly
Extraordinary Expenses required by employer	\$	\$
Expenses for care of child or sick/incapacitated person if required for employment	\$	\$
Unreimbursed medical expenses	\$	\$
Alimony or child support payments	\$	\$
Health insurance	\$	\$
Income from Rental Property	\$	\$
Other	\$	\$

Below, list the assets of everyone to live in the unit. Include all bank accounts, stocks and bonds, trust agreements, real estate, etc. Do not include clothing, furniture or cars. Attach an additional page if needed.

Household Member	Description of Asset	Value of Applicant's Equity

Have you sold or transferred any property in the last three (3) years? Yes No
 If yes, please the following: Date of sale or transfer, _____ Amount of sale or transfer, _____
 Did it involve a family member? Yes No

6. Please provide the address and the name and address of Landlords for all the places you have lived over the last five years, including shelters. Attached an additional page if needed to include all references for the last five years.

- a. Name of Present Landlord _____ Tel # _____
 Landlord Address _____
- b. Your Previous Address _____ Dates Lived There? _____ to _____
 Name of Previous Landlord _____ Tel # _____
 Landlord Address _____
- c. Your Previous Address _____ Dates Lived There? _____ to _____
 Name of Previous Landlord _____ Tel # _____
 Landlord Address _____

7. Priorities, Preferences, and Household Needs

- a. Veteran's Preference: Yes No
 If yes, a copy of discharge or separation papers must be submitted.
- b. Are you a working family : Yes No
- c. Need for an accessible unit: Yes No
 Is yes, description of need must be submitted.
- d. Are you a victim of domestic violence? Yes No
 If yes, additional documentation is required.
- e. Are you currently living in public housing?
- f. Are you currently Homeless ? Yes No
 If yes, additional documentation is required.
- g. Do you currently live or work in Needham? Yes No
 If yes, additional documentation is required.

8. Certifications – Certifications and application signed under pains and penalties of perjury

- a. I/We hereby certify that the information given on this application is true and correct, and that any false statements or misrepresentations may result in the cancellation of this application. I/We authorize the Housing authority to make inquiries to any parties listed to verify the statements herein. All information is regarded as confidential in nature, and a consumer credit report and a Criminal Offenders Record Information (CORI) report will be requested. I/We certify that I/We understand that false statements or information are punishable under State or Federal Law.
- b. I/We hereby certify that we have received a notice from the management agent describing the right to reasonable accommodations for persons with disabilities.
- c. I understand that Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction. I understand that if I falsify information on my application for housing, I will be found ineligible.

_____	_____	_____	_____
Head of Household/Applicant	Date	Co-Applicant	Date
_____	_____	_____	_____
Household Member, 18 Years Old or Older	Date	Household Member, 18 Years Old or Older	Date

Needham Housing Authority does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, age, familial status or physical or mental disability in the access or admission to its programs or employment, or in its programs, activities, functions, or services.