Office use only	
Date received:	
Time received:_	
Received by:	

## (Southwest Communities) Pre-Application

ricad of frouschold's Ivallic					
Home Telephone Number:	mber:Alt Phone Number:				
Email address:					
Do we have permission to cont	act you through email regardi	ng your application?	Yes No		
Mailing Address:					
City	State	Zip			
Spouse / Co-Applicant's Name	:				
Home Telephone Number:	A	It Phone Number:			
Email address:					
Do we have permission to cont	act you through email regardi	ng your application?	′es □No		
Mailing Address:					
City	State	Zip			
Would anyone in your Househo	old benefit from the features o	f a handicap-accessible un	nit?		
		PDISTICS			
HOUSEHOLD COMPOSI	TION AND CHARACTI	<u>LINISTICS</u>			

Names of Household Members (First, Middle Initial, Last)	Relationship	SS#	Birth Date	Annual Income	Student (Yes/No) If yes, (FT or PT)
	Head				





I/We acknowledge that any changes to this application must be made in writing.					
Giral CVI 1 CVI 1 1		_ Date:			
Signature of Head of Household	1				
		Date:			
Signature of Spouse/Co-Tenant of Household					
PENALTIES FOR MISUSING THIS CONSENT:  Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).  504 Coordinator ~ 989-772-3261 ext. 212					
The information regarding race, national origin and sex discrimination solicited on this application is requested in order to assure the Federal Government, acting through Rural Development and/or HUD that Federal Laws prohibiting discrimination against tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age and handicap are complied with. You are not required to furnish this information, but you 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 is required to note that you (the applicant) refuses to declare his/her race and/or ethnicity.					
Race of Head of Household:	☐ White ☐ Black ☐ Other	Asian American Indian			
Ethnicity of Head of Household:	Hispanic	Non-Hispanic			
I do not wish to furnish the ethnicity/race information listed above (initials)					



