

Public Housing

Huntsville Housing Authority
P.O. Box 486, Huntsville, AL 35804-0486
200 Washington St., Huntsville, AL 35801
Fax: 256-535-2292

For agency use only:
Date/Time Stamp/Control Number

Pre-Application for 1-Bedroom Public Housing Apartment (Community-Wide Waitlist ONLY)

Please print neatly in ink. All fields are required. Complete and return by mail, fax or in person to HHA. Incomplete, photocopied or e-mailed pre-applications will not be accepted. If you are already on our Public Housing waiting list, DO NOT complete this form. Complete the Update to Pre-Application/Application Form. Due to the volume of pre-applications received, we will not verify the receipt of pre-applications. We cannot be responsible for material that is unreadable, lost, or delayed through the mail.

IMPORTANT!

One-third of all Pre-Applications are removed from the waiting list due to unreported address changes. Do not let this happen to you. Report any change of address in writing to Huntsville Housing Authority using the Update to Pre-Application/Application Form.

*Preferences must be verified. If a claimed preference cannot be verified, the applicant will be placed on the waiting list without the preference.

Head of Household Information

Social Security Number		Date of Birth	Place of Birth	
First Name	Middle Name	Last Name		
Mailing Address		City/Town	State	Zip code
Phone No.		Emergency Contact Phone No.		

Household and Demographic Information

How many people will live in the unit with you?

Spouse _____

Other Adults (sex and age) _____

Minors (sex and age) _____

Example: M/15, F/9, M/2

Gross annual household income \$ _____

Write in the approximate amount of your family's gross (before taxes) annual income. Include all sources for all family members.

Type: Wages SS/SSI TANF Other

Check if the head of household or spouse is:

62 years old or older or Disabled Do you require an accessible unit? Yes _____ No _____

Complete for head of household (for statistical purposes only)

Race: White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander

Ethnicity: Hispanic Non-Hispanic

Are you a U.S. Citizen? _____ or Eligible Immigrant? _____

Have you ever lived in any subsidized housing (anywhere)? Yes _____ No _____ If yes, where: _____

Preferences (Check box that best applies):

Involuntarily Displaced by Natural Disaster or Government Action

Working Family (employed at least 30 hours per week / head of household is 62+ and/or disabled)

Homeless / Veteran Full Time Student

Certification of Applicant - Please read this statement very carefully. By signing, you are agreeing to its terms.

I hereby certify that the information I have provided in this pre-application is true and accurate. I understand that:

- Any misrepresentation or false information will result in my pre-application being cancelled or denied, or in termination of housing assistance;
- This is a pre-application for Public Housing assistance through HHA and is not an offer of housing;
- At the time I rise to the top of the waiting list, I will be required to provide verification of the information I have provided here, in accordance with federal housing regulations and HHA policy;
- It is my responsibility to notify HHA of any change of address in writing and I understand that my pre-application may be cancelled if I fail to do so;
- My participation in the Public Housing program is subject to my being eligible and in compliance with HUD and HHA regulations; and that I will be subject to a criminal history check. I agree that HHA can share my information with other state agencies for the purposes of determining program eligibility.

Signature of head of household _____ Date _____

