

PINELLAS COUNTY HOUSING AUTHORITY
The Dean S. Robinson Administration Building
11479 Ulmerton Rd., Largo, Florida 33778
Telephone (727) 443-7684

Palm Lake Village Housing Corporation
Affordable Housing

APPLICATION INSTRUCTIONS
PLEASE READ CAREFULLY

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

THIS IS **NOT** A SECTION 8 OR PUBLIC HOUSING APPLICATION AND **CANNOT** BE USED FOR THE HOUSING ASSISTANCE PAYMENTS PROGRAMS.

1. This application is valid for all properties owned by the Palm Lake Village Housing Corp.
2. To be qualified for admission an applicant must:
 - a) Meet the HUD requirements on citizenship or immigration status;
 - b) Provide documentation of Social Security numbers for all family members, or certify that they do not have Social Security numbers;
 - c) Meet or exceed the Applicant Selection Criteria.
 - d) Pay any monies owed any Federally Funded Housing Payments Program.
 - e) Not have had a lease terminated by any Federally Assistant Housing Payments Program in the past 12 months;
 - f) Be able and willing to comply with the Palm Lake Village Housing Corporation lease;
 - g) Not be engaged in any criminal activity that threatens the life, health, safety, possessions, or right to peaceful enjoyment of other residents and not be engaged in any drug-related criminal activity.
3. As part of the approved suitability procedures, the Palm Lake Village Housing Corp **will** conduct a police background check on all adults who will be members of the household.

THE PALM LAKE VILLAGE HOUSING CORPORATION IS AN EQUAL HOUSING PROVIDER

The Palm Lake Village Housing Corporation is operated by the
Pinellas County Housing Authority.

Revised:
10-23-05

**THE PALM LAKE VILLAGE HOUSING CORPORATION
APPLICATION FOR LEASE**

COMPLETE ALL PAGES

Applicant Last Name _____ First Name _____ Middle Initial _____
 Co-Applicant Last Name _____ First Name _____ Middle Initial _____
 Present Address _____ Apt. No. _____ City _____
 State _____ Zip Code _____ Telephone No. () _____
 Message No. () _____ Work No. () _____

FOR STATISTICAL PURPOSES ONLY

Race: White/Caucasian Black/African-American Asian/Pacific Islander Native American/Alaskan Native

Ethnicity: Hispanic/Latino Non-Hispanic/Non-Latino

How Long at present address? _____ Yrs., _____ Months Monthly Rent \$ _____ Utilities \$ _____
 Is rent payment current? _____ If not, Explain: _____

A. Present Landlord/Apt Manager Name _____ Telephone No () _____
 Address _____ Zip Code _____

B. Previous Address _____ City _____ Zip Code _____
 How Long? _____ (Yr./mo.)

C. Have you ever been evicted? Yes No If yes, reason? _____
 A "yes" answer will not automatically disqualify you for housing.

D. Have you ever-lived in Public Housing, or any federally subsidized program? _____ If so, which City/Housing
 Authority/Program Name _____
 Dates: From _____ to _____ Address: _____
 Do you owe any money to the Agency? _____

E. FAMILY COMPOSITION: Beginning with yourself, list all persons who will live in the apartment/house including live-in attendants who are necessary for the care of a family member. You must fill out each box for each person. Your application cannot be processed without complete information.

	Last Name	First Name	Social Sec. No.	Relation To Head	Sex	Date of Birth	Place of Birth	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

F. Will any other people be living with you or joining your family? No Yes Please Explain: _____

G. Family income: List the source and the amount of all money received for the last 12 months by each members of the household including yourself. Be sure to include earnings from employment, VA Benefits, Welfare, TANF, General Assistance, Social Security, SSI, Disability, Unemployment, Worker's Compensations, Child Support. Examples: Wages \$150 per week, TANF \$535 per month, etc.

PERSON	SOURCE	AMOUNT	FREQUENCY
1. _____	1. _____	\$ _____	per _____
2. _____	2. _____	\$ _____	per _____

H. If working, please give: name _____, address, _____ telephone number of employer(s): _____

I. Assets. Do you have a savings account, check account, stocks, bonds, etc. Yes No

Enter Amounts \$ _____ Type of Asset(s) _____

Do you own any Real Estate? Yes No If yes, what is the address: _____
City _____ State: _____ Zip: _____

Did you own any Real Estate and sold it within the past two years? Yes No

J. Drivers License or Florida I.D. Nos.: Applicant _____ Co-Applicant _____
Automobile(s): Year _____ Make _____ Model _____ Tag # _____
Year _____ Make _____ Model _____ Tag # _____

K. Arrest/Convictions: Have you or anyone in the family who is applying for an apartment been charged, arrested, or convicted of a crime? Yes No If yes, please explain the nature of the problem and who in the household was involved. A "yes" answer will not automatically disqualify you for housing.-

Is anyone in your household currently on parole / probation? Yes No If yes, please explain: _____

Name of Probation Officer: _____

Phone # _____

L. Other

1. Are you currently residing in any property of the Pinellas County or Dunedin Housing Authority?
Yes No If yes, please tell us who is the lease holder's name _____ and the address _____

2. In case of applicant emergency, notify: _____, phone number (____) _____
Address _____, City _____, State _____, Zip Code _____.

In the event of serious illness or death of applicant(s) the above person **IS / IS NOT** authorized to enter the Apartment and remove all contents.

3. If the above contact "**IS NOT**", please give the name of who will be an authorized person to enter:

Name: _____ phone Number: (____) _____, Address _____,
City _____ State _____ Zip Code _____.

4. In the event of serious illness, contact the following physician: _____
Phone number: (____) _____.

5. Please list type and description of ALL PETS maintained by the applicant: _____

M. Comments, please feel free to add any other information or comments you may have.

I/we certify that the statements on this application are true to the best of my/our knowledge and belief and understand that inquiries must be made to verify them. I/we authorize the release of information to the Pinellas County Housing Authority by my/our employer(s), the Department of Public Service, the Social Security Office, and /or other business or government entities.

I/we understand that any false or omitted statements made on this application will cause me/us to be declined for tenancy.

Signed: _____
Applicant

Date

Co-applicant

Date

Warning: 18. U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

Chapter 414.39 of Florida Statutes makes it a crime, punishable by fine of \$50.00 to \$5,000.00, or imprisonment for up to five (5) years, or both, if a housing applicant or tenant deliberately makes false statements about his or her income, or fails to disclose material fact affecting income and rent.