

Applicant Name: _____

Current Address: _____

City, State, Zip Code: _____

Phone: _____ (h) (c) Phone: _____ (h) (c) (other)

I am applying for housing at: Keystone Place The Maples Both

Household Composition

(List the Head of Household and all other members who will be living in the unit. Give the relationship of each family member to the head.)

Member's Full Name	Relationship	Birth Date	Age	Sex	Social Security No.
	Self				

Defining Persons with Disabilities

Any adult having a physical, mental, or emotional impairment that:

- Is expected to be of long-continued and indefinite duration;
- Substantially impedes the person's ability to conduct the activities of daily living;
- Is such that the person's inability to conduct the activities of daily living could be improved by more suitable housing conditions.

A person having a developmental disability, as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act, that is a person with a severe chronic disability which:

- Is attributable to a mental and/or physical impairment or combination of mental and physical impairments;
- Was manifested before age 22;
- Is likely to continue indefinitely;
- Results in substantial functional limitation in three or more of the following areas of major life activity: self-care, receptive and responsive language; learning; mobility; self-direction; capacity for independent living; and economic self-sufficiency; and,
- Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated.

A person with a chronic mental illness, that is a person who has a severe and persistent mental or emotional impairment that seriously limits his/her ability to live independently, and whose impairment could be improved by more suitable housing conditions.

The Maples and Keystone Place operate under the HUD program 811 PRAC and offers housing to individuals with developmental disabilities.

Do you have a developmental disability? Yes No

List assets below (i.e. checking accounts, savings accounts, mineral rights, land, etc...)

- 1.
- 2.
- 3.
- 4.

If you have expenses, please list below (i.e. doctor co-pays, prescription co-pays, bus fare to get to work, insurance premiums, etc...).

- 1.
- 2.
- 3.
- 4.
- 5.

Are you a registered sex offender? Yes No

Please List all states that you have lived in.

- | | |
|----|----|
| 1. | 5. |
| 2. | 6. |
| 3. | 7. |
| 4. | 8. |

What is the total annual income of all household members? (Include wages, salaries and tips; other income such as alimony, child support; and Social Security, AFDC or other benefits)

\$ _____

You may qualify for a preference for housing assistance if any of the following circumstances can be verified for your family. Please check any that apply to you.

Are you currently homeless or living in substandard housing? Yes No

If yes, please explain:



Have you been (or are you about to be) displaced from your housing? Yes No

If yes, please explain:

APPLICATION CERTIFICATION: I/we understand that the above information is being collected to determine if I am/we are eligible to receive rental assistance. I/we authorize the HUD Housing Coordinator to verify all information provided on this application.

Head Of Household Signature

Date

Spouse/Co-head Signature

Date

AGENT USE ONLY:

Date Received: _____

Time Received: _____

Initials: _____

Comments: _____



Race and Ethnic Data Reporting Form

U.S. Department of Housing and Urban Development
Office of Housing

OMB Approval No. 2502-0204

Keystone Place and/or The Maples

Name of Property Project No. Address of Property

/Progressive Community Services **811 PRAC**

Name of Owner/Managing Agent Type of Assistance or Program Title:

Name of Head of Household Name of Household Member

Date (mm/dd/yyyy): _____

Ethnic Categories*	Select One
Hispanic or Latino	
Not-Hispanic or Latino	
Racial Categories*	Select All That Apply
American Indian or Alaska Native	
Asian	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Other	

***Definitions of these categories may be found on the reverse side.
There is no penalty for persons who do not complete the form.**

Signature

Date

Public reporting burden for this collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits and voluntary. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information is authorized by the U.S. Housing Act of 1937 as amended, the Housing and Urban Rural Recovery Act of 1983 and Housing and Community Development Technical Amendments of 1984. This information is needed to be in compliance with OMB-mandated changes to Ethnicity and Race categories for recording the 50059 Data Requirements to HUD. Owners/agents must offer the opportunity to the head and co-head of each household to "self certify" during the application interview or lease signing. In-place tenants must complete the format as part of their next interim or annual re-certification. This process will allow the owner/agent to collect the needed information on all members of the household. Completed documents should be stapled together for each household and placed in the household's file. Parents or guardians are to complete the self-certification for children under the age of 18. Once system development funds are provided and the appropriate system upgrades have been implemented, owners/agents will be required to report the race and ethnicity data electronically to the TRACS (Tenant Rental Assistance Certification System). This information is considered non-sensitive and does not require any special protection.

Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. Parents or guardians are to complete the form for children under the age of 18.

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.
 1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
 2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
2. The five racial categories to choose from are defined below: You may mark one or more.
 1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
 2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
 3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
 4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.