



Milton Housing Authority
 PO Box 637 Milton, WV 25541
 (304) 743-9530



RENTAL APPLICATION

NAME _____ DOB _____ AGE _____

DATE _____

PHONE NUMBER _____

FULL NAME of OCCUPANTS	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	RACE	SOCIAL SECURITY NUMBER	INDICATE MARRIED (M) WIDOWED (W) SEPARATED (S) DIVORCED (D)
1	APPLICANT				
2					
3					
4					
CHILDREN'S NAME AS ON SS CARD	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	SCHOOL ATTENDING	SOCIAL SECURITY	ABSENT PARENTS NAME IF ANY
1					
2					
3					
4					

If separated or divorced, list name & address of spouse/ex-spouse below:

NAME _____

RELATIONSHIP _____

STREET ADDRESS _____

CITY, STATE ZIP _____

SOCIAL SECURITY NUMBER IF KNOWN _____

OFFICE USE _____

DATE/TIME RECEIVED: _____ / _____

RECEIVED BY: _____



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 INCOME INFORMATION

Does anyone, outside of your household, pay for any of your bills or give you money? YES NO

TOTAL HOUSEHOLD INCOME _____

List all money earned or received by everyone living in your household. This includes money from wages, self-employment, child and or spousal support, contributions, social security disability payments (SSI), Workman's Compensation, retirement benefits, Veterans Benefits, rental property income, stock dividends, income from bank accounts and all other sources

Household Members Name	Employer	Total Weekly Wages	Child and/or Spousal Support	Social Security Benefits	All Other income
1					
2					
3					
4					



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 RESIDENT HISTORY

Present Address: _____ Zip Code: _____

Present contact telephone number: _____

Present Landlord: _____ Present Landlord's Phone Number: _____

Landlord's Address: _____

At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____

Reason for Moving: _____

Previous Address: _____ Zip Code: _____

Previous Landlord: _____ Previous Landlord's Phone Number: _____

Landlord's Address: _____

At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____

Reason for Moving: _____

Previous Address: _____ Zip Code: _____

Previous Landlord: _____ Previous Landlord's Phone Number: _____

Landlord's Address: _____

At this address FROM: _____ TO: _____ Amount of rent (\$\$) _____

Reason for Moving: _____

Have You or any of your household ever been evicted? YES NO

If yes, from where? _____ When _____

Please give details _____

Do you or any of your household owe money to any Public Housing Authority, HUD, Apartment or Community Landlord? YES NO

If yes, to whom? _____ How much _____

Have you or any family member ever lived in public or assisted housing? YES NO

If yes, give address _____

Dates of occupancy: _____

Have you ever committed any fraud in a federally assisted housing program or been asked to repay money for knowingly misrepresenting information for such housing programs? YES NO

If yes, please explain _____

Personal Reference (NOT RELATED) _____ Phone: _____

Personal Reference (NOT RELATED) _____ Phone: _____

Personal Reference (NOT RELATED) _____ Phone: _____

Personal Reference (NOT RELATED) _____ Phone: _____



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 ASSETS AND CREDIT INFORMATION

Has any household member disposed of any assets for less than their fair market value during the past two years? YES NO

If yes, give date and explain: _____

Does any household member own or have interest in any real estate, boat, or mobile home? YES NO

If yes,, please explain _____

Has any household member sold any real estate in the last two years? YES NO

If yes, please explain: _____

Does any household member own any stocks or bonds? YES NO

If yes, please explain: _____

Does any household member have checking or savings accounts or certificate of deposit? YES NO

If so, list below: _____

Type & Account number	Value	Interest Rate	Annual Income from Asset	Bank Name



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 Additional Information

Number of vehicles? _____ Owned by whom? _____

Make/Model _____ Year _____ Color _____ Tag# _____

State _____ Vehicle Registered to: _____ Vin# _____

Make/Model _____ Year _____ Color _____ Tag# _____

State _____ Vehicle Registered to: _____ Vin# _____

Make/Model _____ Year _____ Color _____ Tag# _____

State _____ Vehicle Registered to: _____ Vin# _____

Do you have Insurance for your personal belongings? YES NO

Does anyone in your household have a criminal or juvenile record or has anyone ever been convicted of any crime other than a traffic violation? YES NO

If yes, Please list all convictions: _____

Are you or any member of your household a current, illegal user of or addicted to a controlled substance: YES NO

Have you or any household member ever been convicted of the illegal manufacturing or distribution of a controlled substance? YES NO

Have you or any other adult household member ever used any name(s) or social security number(s) other than the one you are currently using YES NO Please Explain _____

Emergency Contact: _____ Relationship: _____

Address _____ Phone: _____

Please provide any additional information that would help us to process your application: _____



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 Certification

By signing this application, we (I) certify the accuracy of the following: The information submitted is true and correct and you authorize management to verify any references you have listed and you authorize management to access any records pertaining to you which may be on file with law enforcement and credit bureau authorities. You understand that it is a crime to knowingly provide false information for the purpose of obtaining or maintaining occupancy in; and/or for the purpose of securing a lower rent in a subsidized housing development. You also understand that the penalty for knowingly providing false information is up to five years in prison and/or a \$10,000 fine upon conviction.

I do hereby swear and attest that al of the information above about me is true and correct. I also understand that all changes in the income of any member of the household as well as all changes in the household members must be reported to the Milton Housing Authority in writing immediately.

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

IT IS THE POLICY OF THIS ORGANIZATION TO PROVIDE HOUSING ON AN EQUAL OPPORTUNITY BASIS. WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR, CREED, SEX, FAMILIAL STATUS, NATIONAL ORIGIN OR HANDICAP.