

METROPOLITAN DEVELOPMENT AND HOUSING AGENCY

Cayce Place * 510 Summer Place * Nashville, TN, 37206 Office Phone (615) 252-2280 * Telephone device for the deaf (615) 252-8599

Application Date & Time: Prospect Code:

This waitlist application form is for reference only and does not signify that your online application has been completed, submitted, nor has

This waithst application joint is	ו וטן	ejerence omy un	been approv		ion nus been	completed, sub	milleu, nor nas	
Household Informatio	n							
FULL LEGAL NAME (First, Middle, Last)		RELATIONSHIP	SOCIAL SECURITY/ ALIEN REG. #	GOVERNMENT ISSUED PHOTO ID #	EXP. DATE	BIRTH DATE	FULL TIME STUDENT Y/N	
	l							
Household Information								
1st Bedroom Preference			Estimate	d Annual Income				
Current Residency Info	orm	nation						
CURRENT FULL STREET ADDRESS:						OWN, RENT OR OTHER:		
CITY: HOME PHONE NUMBER:	CEI	LL PHONE NUMBER:	EMAIL ADDRESS:	STATE: MOVE IN DATE:		ZIP CODE: MOVE OUT DATE:		
LANDLORD NAME:			PROPERTY/LANDLORD PI	JONE:		MONTHLY RENT	/MODICACE:	
LANDLORD NAIVIE.			PROPERTY LANDLOND PI	TONE.		WONTHLY KENT,	/WORTGAGE.	
Charles the farmer time.								
Student Information Do you or any household member (18 y	ears o	or older) attend or pl	lan to attend an "Institution	of Higher Learning" - full	or part time?			
Members of your household who are at Member Name	tendi	ing or plan to attend		ning", full or part-time. nber Name				
Institution				Institution				
Full Time Or Part Time			Full	Time Or Part Time				
Household Income								
Member Name			Income Type		Annual Amo	unt		
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1.1						
Do you receive Child Support?		Court Ordered?				
When child support is court ordered, but not received, what attempts have been made to collect the child support?						
Reasonable Accommodations/Modification						
We are required by HUD to request the following information for the purpose of determining eligibility for admission to our Section 8						
Program. In addition to giving special considerations with regards to allowances in determining rent we also will make reasonable accommodations or modifications based						
on disability.						
62 years of age or older?	Disabled?	Displaced?				
	•	•				

Household Signatures

Child Support

APPLICANT REPRESENTS ALL OF THE ABOVE STATEMENTS ARE TRUE AND CORRECT. APPLICANT AUTHORIZES CONTINUING VERIFICATION OF THE ABOVE INFORMATION, REFERENCES, CRIMINAL HISTORY AND CREDIT RECORDS AT ANYTIME INCLUDING BEFORE, DURING AND AFTER THE EXPIRATION OF THE LEASE TERM AND RELEASES FROM LIABILITY ALL PERSONS AND ENTITIES REQUESTING OR SUPPLYING INFORMATION. APPLICANT ACKNOWLEDGES THAT FALSE, INCOMPLETE OR MISLEADING INFORMATION CONSTITUTES GROUNDS FOR REJECTION OF THIS APPLICATION; DISCOVERY OF FALSE, INCOMPLETE OR MISLEADING INFORMATION THAT OCCURS AFTER OCCUPANCY WILL RESULT IN TERMINATION OF THE RIGHT OF OCCUPANCY OF ALL OCCUPANTS UNDER LEASE AND/OR FORFEITURE OF DEPOSITS AND FEES. SECTION 1001 OF TITLE 18 OF THE U.S. CODE MAKES IT A CRIMINAL OFFENSE TO WILLFULLY FALSIFY A MATERIAL FACT OR MAKE FALSE STATEMENT IN ANY MATTER WITHIN THE JURISDICTION OF A FEDERAL AGENCY.

I, THE UNDERSIGNED APPLICANT(S), HAVE READ AND AGREE TO ALL OF THE PROVISIONS OF THIS APPLICATION AND REPRESENT AND PROMISE THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

Print Name:	Signature:	Date:
Print Name:	Signature:	Date:



