

## PARKER HEIGHTS RENTAL APPLICATION FORM

Managed by: Butler County Housing Authority, 114 Woody Dr., Butler, PA 16001.

The information collected below will be used to determine if you qualify as a resident. It will not be disclosed without your consent.

1. Applicant's Name			Social Security No.	Home Phone
2. Present Street Address	City	State	Zip Code	No. Yrs at Present Address
3. Former Street Address (if at present address for less than 2 yrs.)	City	State	Zip Code	No. Yrs. at Former Address

Currently Homeless (for reporting purposes only)

Current Housing Status: Provide the name, address, and phone number of all your landlords for the past 3 years.

Current Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

FOR STATISTICAL USE ONLY.			
6. Head of Household Gender  1 = Male 2 = Female		7. Head of Household Marital Status  Status 1 = Single 2 = Married	
8. Name and Address of Employer		Type of Business	Self Employed Yes  No
Business Phone Number	Position/Title	No. Yrs. on Job	Yrs in this line of work
1. Co-Applicant's Name		Social Security No.	Home Phone
2. Present Street Address	City	State	Zip Code
3. Former Street Address (if at present address for less than 2 yrs.)	City	State	Zip Code
4. Name and Address of Employer		Type of Business	Self-employed Yes  No
Business Phone Number	Position/Title	No. Yrs. on Job	Yrs. In this line of work

ANNUAL INCOME

Source	Applicant	Co-Applicant	Other	TOTAL
			HOUSEHOLD Members 18 YRS OR OLDER	
1. Gross Salary				
2. Overtime Pay				
3. Commissions/Fees/Tips Bonuses				
4. Unemployment Benefits				
5. Workers Compensation, etc.				
6. Social Security, Pensions, Retirement Funds, etc., Received Periodically				
7. TANF Payments				
8. Alimony, Child Support				
9. Interest and/or Dividends				
10. Net Income from Business				
11. Net Rental Income				
12. Other:				
			TOTAL	

ASSETS	CASH VALUE	Income From Assets	Name of Financial Institution	Account Number
Checking Accounts				
Savings				
Certificate of Deposit				
Mutual Funds/Stocks/Bonds IRA's or Investments				
Real Estate				
Other:				
<b>TOTAL:</b>				

**HOUSEHOLD COMPOSITION** List of household and all members who live in your home  
Give the relationship of each family member to the head.

Member No.	Full Name	Relationship	Bithdate M/D/Y	SocialSecurity No.
Head Of Household				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Are there any special housing needs or accommodations that the household will require? Examples are a unit for mobility impaired, a unit for visually impaired, a unit for hearing impaired, or grab bars, wheel-m-showers.

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\_\_\_\_Have \_\_\_\_Have not disposed of any asset(s) valued at \$1,000 or more in the past two years for less than the market value of the item. If yes, Please list the asset value under the "other" column in the above listing of assets.

Are any adults full-time students? Yes\_\_\_\_\_ No\_\_\_\_\_

Are you or any member of your household subject to a lifetime registration requirement under any state sex offender registration requirements?

Yes  No

Name of household member subject to registration: \_\_\_\_\_

Please check all states where any household members have resided:

- |                                      |  |   |   |
|--------------------------------------|--|---|---|
| <input type="checkbox"/> Alabama     | <input type="checkbox"/> Illinois      | <input type="checkbox"/> Montana        | <input type="checkbox"/> Rhode Island         |
| <input type="checkbox"/> Alaska      | <input type="checkbox"/> Indiana       | <input type="checkbox"/> Nebraska       | <input type="checkbox"/> South Carolina       |
| <input type="checkbox"/> Arizona     | <input type="checkbox"/> Iowa          | <input type="checkbox"/> Nevada         | <input type="checkbox"/> South Dakota         |
| <input type="checkbox"/> Arkansas    | <input type="checkbox"/> Kansas        | <input type="checkbox"/> New Hampshire  | <input type="checkbox"/> Tennessee            |
| <input type="checkbox"/> California  | <input type="checkbox"/> Kentucky      | <input type="checkbox"/> New Jersey     | <input type="checkbox"/> Texas                |
| <input type="checkbox"/> Colorado    | <input type="checkbox"/> Louisiana     | <input type="checkbox"/> New Mexico     | <input type="checkbox"/> Utah                 |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Maine         | <input type="checkbox"/> New York       | <input type="checkbox"/> Vermont              |
| <input type="checkbox"/> Delaware    | <input type="checkbox"/> Maryland      | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Virginia             |
| <input type="checkbox"/> Florida     | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> North Dakota   | <input type="checkbox"/> Washington           |
| <input type="checkbox"/> Georgia     | <input type="checkbox"/> Michigan      | <input type="checkbox"/> Ohio           | <input type="checkbox"/> West Virginia        |
| <input type="checkbox"/> Hawaii      | <input type="checkbox"/> Minnesota     | <input type="checkbox"/> Oklahoma       | <input type="checkbox"/> Wisconsin            |
| <input type="checkbox"/> Idaho       | <input type="checkbox"/> Mississippi   | <input type="checkbox"/> Oregon         | <input type="checkbox"/> Wyoming              |
|                                      | <input type="checkbox"/> Missouri      | <input type="checkbox"/> Pennsylvania   | <input type="checkbox"/> District of Columbia |

The information provided above is true and complete to the best of my/our knowledge and belief. I/we consent to the disclosure of income and financial information from my/our employer and financial references for purposes of income and asset verification related to my/our application for tenancy.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

If you are in need of special services, please call us at 724/287-6798 or TDD 724/287-6799

If you have a grievance complaint regarding this application, you may call:

**PHILADELPHIA FIELD**

(215) 656-0663

TDD# (215) 656-3450

1-800-669-9777 Toll-Free Complaints

**PITTSBURGH FIELD**

(412) 644-6965

TDD# 1-800-927-9275

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1 -800-433-6327 or 724/287-6798