

# **GREELEY/WELD HOUSING AUTHORITIES APPLICATION**

315 N. 11<sup>th</sup> Avenue, Bldg. B

PO Box 130

Greeley, CO 80632-0130

---

## **INSTRUCTIONS FOR COMPLETING YOUR APPLICATION**

**1. Fill out entire application in ink pen.** You must complete the entire application, including social security numbers for all household members who have them, dates of birth, and a mailing address. Incomplete applications or applications filled out in pencil will be returned.

**2. Read the descriptions of the priorities and check those that apply to you.**

**3. Turn in your completed application with the following verification:**

- **Original social security cards for all household members** (Non-citizens must sign a statement that they elect not to contend eligible immigration status. These forms are available in our office. Birth certificates can be used for babies who have not been issued a social security card.)
- **Photo ID's for all family members 18 or older, including applicant**
- **Original state-issued birth certificates (originals) for all household members**
- **Verification of all income to your family**

**4. APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE INFORMATION LISTED ABOVE.** Incomplete applications will be mailed back to the applicant for completion.

**5. All applicants will be contacted by mail and notified of their eligibility.** You may drop off your application at 315 N. 11<sup>th</sup> Avenue, Building B, or mail it to:

Greeley/Weld Housing Authorities  
P.O. Box 130  
Greeley, CO 80632-0130

---

**EQUAL OPPORTUNITY HOUSING**

# GREELEY/WELD HOUSING AUTHORITIES APPLICATION

Please mark all programs you wish to apply for:

\_\_\_\_\_ Public Housing: These are apartments owned by the Housing Authority. There are three locations: 1<sup>st</sup> Avenue, 17<sup>th</sup> Avenue, and 28<sup>th</sup> Street. These are NOT available to couples without children, or one-person households as we have no one bedroom units.

\_\_\_\_\_ Greeley Section 8

\_\_\_\_\_ Weld County Section 8

Section 8 is a rental assistance program that subsidizes rent to private landlords. We have two Section 8 lists, one for Greeley city residents and one for Weld County residents. Greeley residents get a priority on the City Section 8 list. Weld County residents get a priority on the County Section 8 list.

## HOUSEHOLD INFORMATION

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_  
(Last) (First)

Street Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address (If different from above): \_\_\_\_\_

List family members, **include yourself**:

Name	Birth Date	Relationship	Sex M/F	Age	Social Security Number

## INCOME

List all sources of income including employment, welfare, social security, SSI, disability or unemployment compensation, interest on accounts, alimony, child support, etc.

Family Member	Source of Income	Amount Received	How Often

**Continued on Back**

**PRIORITY QUALIFICATION: Check as many as apply.** *Verification will be required when your name comes up on the list.*

\_\_\_\_\_ **Displaced by domestic violence:** You have left your home to escape domestic violence within the past six months. You are still homeless. You and your abuser were living together at the time, and the incident that caused you to be displaced is documented by a Police Department, a woman's shelter, counseling agency or court action.

\_\_\_\_\_ **Displaced by fire, flood or condemnation:** You are homeless and have been displaced from your home through no fault of your own, due to a fire, flood or condemnation of your home by a government entity.

\_\_\_\_\_ **Enrolled in a Homeless Case Management Program:** You are homeless and actively participating in a Homeless Case Management Program with the Greeley Transitional House, A Woman's Place, Catholic Charities, North Range Behavioral Health, or Room At The Inn.

\_\_\_\_\_ **Head of household is elderly, handicapped or disabled.**

\_\_\_\_\_ **Participating in the TANF work program:** You are participating in the TANF work program without sanctions. If you are receiving TANF benefits only for your children or grandchildren, or if you are disabled, you do not qualify for this priority.

\_\_\_\_\_ **Live, work or attend school inside Greeley city limits.**

\_\_\_\_\_ **Live, work or attend school in Weld County, outside Greeley city limits.**

\_\_\_\_\_ **Handicapped accessibility requirements:** Check here if you need a unit with handicapped fitted restrooms, wider doorways, no stairs, and a ramp. *Verification by a medical professional required.*

**PROGRAM INFORMATION:**

Have you ever participated in a rental assistance or public housing program? \_\_\_\_\_

If yes, where and when did you participate? \_\_\_\_\_

**ALL APPLICATION INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements of misrepresentation to any Department of Agency of the United States as to any matter within its jurisdiction.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**RACIAL GROUP IDENTIFICATION: The following information is required for statistical purposes so the Department of Housing and Urban Development may determine the degree to which minority families utilize its programs.**

**RACE—Check one:** White \_\_\_\_\_ Black/African American \_\_\_\_\_ Asian \_\_\_\_\_  
Native Hawaiian/Pacific Islander \_\_\_\_\_ Multi-cultural \_\_\_\_\_

**ETHNICITY—Check one:** Hispanic \_\_\_\_\_ Non-Hispanic \_\_\_\_\_