



## Housing Authority of the City of Tampa

Public Housing Community Application

1529 W. Main Street, Tampa, FL 33607

**PLEASE RETURN APPLICATION MONDAY – THURSDAY 8AM – 3PM**

*POR FAVOR DE REGRESAR LA APLICACION*

*DE LUNES A JUEVES DE 8AM A 3PM*

The Housing Authority of the City of Tampa provides equal opportunity to participate in our housing programs. Any disabled person, as outlined by the Americans with Disabilities Act, requiring a reasonable accommodation to make this process accessible may request such by contacting the Public Housing Department at 253-0551, extension 111. The Housing Authority operates a site-based application and waitlist system and applicants should apply at the property (ies) where they desire to live.

### **Please note:**

We are accepting applications for public housing communities with 0-5 bedroom apartment homes.

### **QUALIFICATIONS:**

- You must be an adult, 18 years of age or older.
- You must pass a criminal history check (if any family member has been arrested or convicted for drug-related, violent criminal activity, or is subject to sexual predator registration with the State Law Enforcement, you will be denied).
- You must meet income guidelines.
- You must have good creditable landlord references with **no evictions in the last three years.**

### **PLEASE PROVIDE THE FOLLOWING REQUIRED DOCUMENTS WITH YOUR APPLICATION:**

- Birth certificates for all family members or voter's registration card & Resident Alien Card or Citizenship
- Social Security cards for all family members
- Picture ID for all adult members (such as driver's license)
- Marriage License, Divorce Decree, or affidavit certifying separation
- Income information (wages, social security, SSI, TANF, veterans benefits, child support, unemployment, gifts, workers comp, or other sources where you obtain money to pay your bills)
- Child care expenses (employed & students only)
- All out of pocket medical expenses (for elderly and disabled only)
- Verification of housing expenses (rent receipt, lease agreement, or a letter from the person or agency you live with at the present time)

**IMPORTANT INFORMATION FOR YOU TO KNOW:**

- Please keep you mailing address and phone number current in order for our office to reach you. If we are unable to update your file at the necessary time, you will be withdrawn and must re-apply.
- We cannot accept an incomplete application. We must have all the documents in order to process your application. We appreciate you attention to detail with this requirement.

**PRELIMINARY APPLICATION FOR PUBLIC HOUSING ASSISTANCE**

**MUST CHECK AT LEAST ONE OR MORE PROPERTIES FROM THE LIST OF PROPERTIES BELOW THAT YOU ARE APPLYING FOR:  
(You must also be working, in school/job training, elderly or disabled to receive the highest preference for a THA apartment).**

**PUBLIC HOUSING**

- |  |                           |                    |
|--|---------------------------|--------------------|
| <input type="checkbox"/> ROBLES PARK VILLAGE | 3814 CENTRAL AVENUE 33603 | 1,2,3,4,5 BEDROOMS |
| <input type="checkbox"/> NORTH BLVD. HOMES   | 1129 MAIN ST. 33607       | 2,3,4,5 BEDROOMS   |

**ELDERLY APARTMENTS:**

- |  |                      |                   |
|--|----------------------|-------------------|
| <input type="checkbox"/> J.L. YOUNG APARTMENTS | 8220 N. FLORIDA AVE. | STUDIO,1 BEDROOMS |
| <input type="checkbox"/> BETHUNE HIRISE        | 1515 UNION ST.       | 1,2 BEDROOMS      |

**SCATTERED SITES**

- |   |                                       |                |
|---|---------------------------------------|----------------|
| <input type="checkbox"/> SQUIRE VILLA                           | 5817 N. ROME 33603                    | 1 BEDROOMS     |
| <input type="checkbox"/> AZEELE APARTMENTS                      | 2801 AZEELE 33609                     | 1,2 BEDROOMS   |
| <input type="checkbox"/> BAY CEIA APARTMENTS                    | 3422 MACDILL AVENUE                   | 1,2 BEDROOMS   |
| <input type="checkbox"/> SOHO APARTMENTS                        | 212 S HOWARD AVENUE                   | 1,2 BEDROOMS   |
| <input type="checkbox"/> SEMINOLE                               | 4706 MUSKOGEE CT. 33610               | 1,2,3 BEDROOMS |
| <input type="checkbox"/> AZZARELLI APARTMENTS                   | 5038 TEMPLE HIGHTS 33617              | 2,3 BEDROOMS   |
| <input type="checkbox"/> SCRUGGS MANOR                          | 11201 N 22 <sup>ND</sup> AVENUE 33612 | 2,3 BEDROOMS   |
| <input type="checkbox"/> ST. LOUIS/ST. CONRAD                   | 2310 ST. LOUIS 33607                  | 3 BEDROOMS     |
| <input type="checkbox"/> C. BLYTHE ANDREWS                      | 2201 E. OSBORNE AVENUE                | 3,4,5 BEDROOMS |
| <input type="checkbox"/> THE ARBORS AT PADGETT ESTATES          | 4714 S. TRASK AVENUE                  | 1,2,3 BEDROOMS |
| <input type="checkbox"/> SANCTUARY at JAMES H. SHIMBERG ESTATES | 1314 W SLIGH AVENUE                   | 1,2 BEDROOMS   |

**Application Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Heads of Household Information:**

**First Head of Household Information:**

Social Security Number: \_\_\_\_\_ Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex: Male or Female  
 Driver's License Number: \_\_\_\_\_ Race: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_ Also Known As: \_\_\_\_\_

**Co-Head of Household Information:**

Social Security Number: \_\_\_\_\_ Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex: Male or Female  
 Driver's License Number: \_\_\_\_\_ Race: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_ Also Known As: \_\_\_\_\_

Current Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_  
 Day/Work Phone: \_\_\_\_\_ Alternate/Message Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**Emergency Contact Information:**

Name	Address	City	State & Zip	Phone	Relationship to Head

Please circle the one that applies to you:

<u>Marital Status</u>	<u>Ethnicity</u>	<u>Language</u>	<u>Are you living with another family member?</u>	<u>Which of the following family members are disabled?</u>
C = Separated	1 = Hispanic	C = Chinese	Y = Yes	H = Head of Household
D = Divorced	2 = Non-Hispanic	E = English	N = No	C = Co-Head of Household
L = Legal	3 = Other	F = French		F = Family Member
M = Married		G = German	<u>Are you a resident to Tampa?</u>	
S = Single	<u>U. S. Citizen</u>	I = Italian	Y = Yes	<u>Do you or a family member need an accessible unit?</u>
W = Widowed	Y = Yes	J = Japanese	N = No	
	N = No	P = Polish		Y = Yes
<u>Veteran Status</u>		R = Russian	<u>Do you pay Rent?</u>	N = No
Y = Yes		S = Spanish	Y = Yes How Much?	
N = No		V = Vietnamese	N = No	

**Race Codes: 1= White 2= Black 3=American Indian/Alaskan Native 4=Asian Pacific Islander 5=Hispanic 6=Other 7=Unkown**



**Assets:**

(Savings and Checking Accounts, CD's Property, Stocks, & Bonds, etc)

Description of Assets	Amount of Assets	Name of Bank /Credit Union

**Preferences:**

**Must select only One Per Category in order to receive the maximum preference points**

**Category One: (Ranking Preferences)**

- 1. Are you or a co-head of household employed, over 62, or disabled?** Yes No  
 (Have you been working 90 consecutive days or more?)
- 2. Are you or any adult over 18 years of age in job training?** Yes No  
 ( Are you currently enrolled in a program that is preparing you for employment?)
- 3. Are you or any adult over 18 years of age enrolled in post-secondary education program?** Yes No  
 (Are you currently enrolled in a program at the collegiate or vocational/technical level?)

**Category Two: (Local Preferences)**

- 1. Are you living in substandard housing?** Yes No  
 (Has your dwelling been determined to be substandard by a government agency or are you homeless?)
- 2. Have you been involuntarily displaced?** Yes No  
 (Have you had to vacate your property through no fault of your own, including fleeing domestic violence?)  
 If so, name of person or place you stay? \_\_\_\_\_ Their phone number? \_\_\_\_\_  
 How long have you stayed there? \_\_\_\_\_ days \_\_\_\_\_weeks \_\_\_\_\_months \_\_\_\_\_years
- 3. Are you paying 50% of your income for rent?** Yes No  
 (Are you paying half or more of your income towards rent and utilities for the past 90 days?)

**If so, Monthly Rent Payment \$ \_\_\_\_\_ Average Utilities per month (electric/water/gas) \$ \_\_\_\_\_**

**Additional Disclosures:**

Are you an employee of the Tampa Housing Authority? YES NO If yes, in which department? \_\_\_\_\_

Do you have any relatives working for the Tampa Housing Authority? YES NO If yes, in which department? \_\_\_\_\_

**Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make false statements or misrepresentation to any department or agency of the U.S. as to any matter within its jurisdiction.**

**Consent: My signature is the consent which will allow the Tampa Housing Authority to acquire my criminal record in order to determine my eligibility for public housing..**

\_\_\_\_\_  
Head of Household Signature

\_\_\_\_\_  
Co-Head of Household Signature

\_\_\_\_\_  
Date

Revised 5/28/04

**References for Public Housing Community Application**

Please provide the Tampa Housing Authority with three (3) rental references, if you do not have rental references list three (3) personal references. These references will be verified in order for the Housing Authority to rent to the most qualified applicant.

Applicant Name

Social Security Number

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

Landlord Reference  Personal Reference

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Landlord Reference  Personal Reference

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Landlord Reference  Personal Reference

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Have you ever been prosecuted for writing bad checks?  Yes  No If Yes, please explain: \_\_\_\_\_

I give my permission for the Tampa Housing Authority to gain any information necessary to process my Public Housing Application which will allow me to have the potential to become a resident at a Tampa Housing Authority Public Housing Community.

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Applicant Signature

Date