



330 E. Main Street  
P.O. Box 1726  
Durham, NC 27701  
(919) 683-1551  
FAX: (919) 683-1237  
durhamhousingauthority.org

A Commitment to Quality Living

Thank you for submitting an application. Durham Housing Authority maintains several Waiting Lists to serve eligible individuals and families who desire affordable housing. As your name approaches the top of the Waiting List, we must interview you and request various documents. All information you provide is kept confidential and will not be released without your written consent. Certain information you will be asked to provide will be of a highly sensitive and personal nature. Our Housing Specialists are skillfully trained to handle all of our client's sensitive documents confidentially and caringly.

Your rent will be calculated according to income guidelines established by the U. S. Department of Housing and Urban Development. If you meet the standards set by the Durham Housing Authority Board of Commissioners, you are well on your way to placement in an affordable housing unit.

You must provide documentation to the Housing Specialist assigned to your application. This information will be used to determine if you meet the income eligibility and suitability requirements. The Durham Housing Authority has an Admissions and Continued Occupancy Policy which must be considered when determining suitability for occupancy within our developments. We will request documentation from all adult family members who will be sharing tenancy with you, which includes, but it's not limited to the following:

- **Verification of Income**
- **Rental payment history**
- **Credit History/Landlord Court Records**
- **Investigation of criminal history**
- **Proof of Residency for the past five years**
- **Verification of eligible immigration status**

Additionally, you must attend an interview and an orientation class held at the Authority. This program is scheduled as we gather information to determine suitability. The program is designed to explain our process and allow you to ask any questions concerning our practices. After the orientation is completed, you will receive a letter informing you of the location of the next available vacancy. Please keep your address current by notifying us immediately, should you change your mailing address.

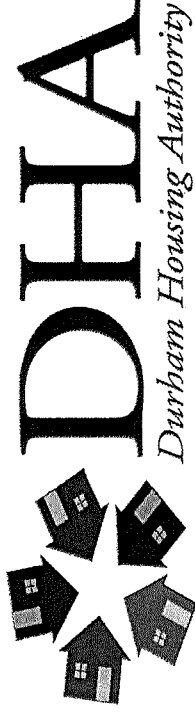
If you are elderly, or a person with a disability, a reasonable accommodation will be considered for you upon your written request. This accommodation is to afford you the opportunity to use and enjoy the residential unit or to assure your equal participation in our Housing Programs. We can assist you in obtaining referrals to various agencies in the community if you need assistance.

If unfavorable information exists in your background, you will need to provide a written, verifiable explanation of the circumstances that led up to the event(s). Past unfavorable events may render your application unsuitable for placement with the Durham Housing Authority. It would, therefore, be helpful to obtain references from members of the medical or social service community who are willing to attest to your ability to comply with the terms of our lease agreement.

If it is determined that you do not meet our criteria, you will receive a **Notice of Rejection** letter from your Housing Specialist. You are entitled to request an informal hearing, if you feel an error was made in determining your eligibility. All requests for reconsideration must be received, in writing, within ten (10) days of the **Notice of Rejection**. In this request, you **must** state the reason you are requesting a hearing. You will receive a letter informing you when the hearing has been scheduled. Although the hearing is informal in nature, you are expected to defend your grievance and should supply proof to support your reason for reconsideration.

Thank you for considering the Durham Housing Authority.





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## ELIGIBILITY SCREENING REQUIREMENTS

Photo Identification	Proof of Social Security Number	Proof of Age	Proof of Selection Preference	Proof of Income
<ul style="list-style-type: none"> <li>◆ Valid driver's license</li> <li>◆ Valid state photo ID card</li> <li>◆ Valid passport</li> <li>◆ US Military ID card</li> </ul> <p><b>Note:</b> All household members age 18 and older will need to present valid ID.</p>	<ul style="list-style-type: none"> <li>◆ Original Social Security Card (<i>no copies will be accepted.</i>)</li> </ul> <p><b>Note:</b> Each household member must submit a Social Security card.</p>	<ul style="list-style-type: none"> <li>◆ Original Birth Certificate</li> <li>◆ Certified Birth Certificate</li> </ul> <p><b>Note:</b> No copies will be accepted. Each household member <b>must</b> have a birth certificate. Please contact the N. C. Vital Records Unit of the Register of Deeds in the county where the child was born if you do not have an original or certified birth certificate.</p>	<ul style="list-style-type: none"> <li>◆ Proof of the number of hours working per week</li> <li>◆ Proof of participation in an accredited educational and training program</li> <li>◆ Proof of disability</li> <li>◆ Proof of DHA Relocation</li> <li>◆ Proof of City of Durham Relocation</li> <li>◆ Completed Homeless Veteran Authorization Form and Self-Statement Certification</li> <li>◆ Proof of paying more than 50% of income in Rent and utilities</li> </ul>	<ul style="list-style-type: none"> <li>◆ Paystubs</li> <li>◆ Letter from employer on company letterhead</li> <li>◆ Self-employed affidavit</li> <li>◆ Child support printout</li> <li>◆ Social Security benefits letter</li> <li>◆ Unemployment Compensation</li> <li>◆ Pension</li> <li>◆ Alimony</li> <li>◆ Public assistance – TANF/Work First</li> <li>◆ Stocks</li> <li>◆ Bonds</li> <li>◆ Trusts</li> <li>◆ Other investments</li> <li>◆ Life insurance policy</li> </ul>
<b>Proof of Citizenship</b>				
<b>Citizen</b>				
<ul style="list-style-type: none"> <li>U. S. birth certificate or</li> <li>U. S. consular report of birth</li> <li>U. S. passport</li> <li>Certificate of Naturalization</li> <li>Certificate of Citizenship</li> </ul>	<p><b>Non-Citizen</b></p> <p>If you are not a U. S. citizen, Social Security will ask to see your current U. S. immigration documents. Acceptable documents include your Form 1-551 (includes machine-readable immigrant visa with your unexpired foreign passport), 1-94 with your unexpired foreign passport; or Work permit card from the Department of Homeland Security (1-766 or 1-688B).</p>			

In order to be considered for admission to Public Housing or the Housing Choice Voucher Program, an applicant **must**, at a minimum, submit the items above upon request at the time of prescreening for eligibility. The omission of any of these items may cause a delay in processing or a denial of eligibility.



# Preliminary Application for Admission

Please complete and return to:  
**Durham Housing Authority**  
 Attn: Edgemont Elms  
 PO Box 1731  
 Durham, NC 27702

(DHA office use only)  
 Control # \_\_\_\_\_  
 F D E NE

If you need assistance completing the Application or have questions about the Application process, please contact Edgemont Elms Property Manager at 919-479-5050 TDD/TTY 1-800-545-1833, Ext. 774

Please print neatly in ink. All fields are required.

Are you a current or prior DHA resident?  Yes  No  
**YOU ARE APPLYING FOR PUBLIC HOUSING AT EDMONT ELMS**

HEAD OF HOUSEHOLD														
Last Name:	First Name:	Middle Initial:	Social Security Number (SSN): <table border="1"> <tr> <td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td> </td> </tr> </table>				-			-				
			-			-								
Address (include Apt. #) (best place for DHA to reach you by mail):			Date of Birth: ____/____/____ Gender: <input type="checkbox"/> Male or <input type="checkbox"/> Female											
City:		State:	Zip:											
Race: <input type="checkbox"/> White(1) <input type="checkbox"/> Black(2) <input type="checkbox"/> Asian(4) <input type="checkbox"/> Native Hawaiian/ Pacific Islander(5)		Ethnicity: <input type="checkbox"/> American Indian/ Alaskan(3) <input type="checkbox"/> Other <input type="checkbox"/> Hispanic(1) <input type="checkbox"/> Non-Hispanic(2)												
Primary Phone:		Alternate Phone:												
Email: _____		Marital Status: Married / Single / Widowed / Divorced												
Monthly Gross Income: \$ _____		Source of Income: _____												

**LIST ALL MEMBERS WHO WILL LIVE IN THE UNIT OTHER THAN THE HEAD OF HOUSEHOLD:**

Legal Name	Race	Ethnicity Hispanic/ Non- Hispanic	Social Security No. ###-##-####	Relationship to Head of Household	Date of Birth mm/dd/yyyy	Gender (M or F)	Monthly Gross Income	Source of Income
1				Spouse or Co-Tenant				
2								
3								
4								
5								
6								
7								

Do you anticipate any changes in your family composition?  Yes  No If yes, describe? \_\_\_\_\_

Primary Language Spoken:  English  Spanish  Portuguese  Chinese  Other: \_\_\_\_\_

- 1) Do you own a home?  Yes  No
- 2) At your current residence, is there a lease in your name?  Yes  No
  - a. If yes, name and address of current property / owner \_\_\_\_\_
- 3) Are you living with another family?  Yes  No
  - a. If yes, list the name of the Head of Household with whom you live: \_\_\_\_\_
- 4) Description of apartment / house where you live: \_\_\_\_\_
  - a. Do you have running water? Y / N
  - b. Do you have a private bath or a shared bath? Private / Shared
  - c. Do you have an outside toilet? Y / N
  - d. Do you have a kitchen with a sink? Y / N
  - e. Do you have electricity? Y / N
  - f. Do you have hot water? Y / N
- 5) How much is your monthly rent? \_\_\_\_\_ per  week  month. Are you without housing? Y / N
- 6) Has your family been asked to move by an agency through no fault of your own? Y / N
  - a. If Yes, please explain why and the type of notice you received, i.e. 30 day notice to vacate: \_\_\_\_\_
- 7) Does anyone in your household have a recent history of criminal activity? Y / N
- 8) Are you or anyone in your family subject to a lifetime registration requirement under a state sex offender registration program? Y / N
- 9) Have you ever lived in Public Housing or Federally-Assisted Housing? Y / N Section 8/HCV? Y / N
  - a. If Yes, where and when? \_\_\_\_\_

**SELECTION PREFERENCES**

Check ALL of the following situation(s) that apply:

Please note that when your name reaches the top of any waiting list, you will be required to provide verification of the preference(s) selected.

- Homeless Veterans** – Members of the US Armed Forces, Veterans, or surviving spouses of Veterans who served in active military, naval, or air service, and have been discharged or released from such service under conditions other than dishonorable who meet both the homeless and Veteran definitions.
- Working** – Where the head, spouse, co-head, or sole member has been continuously employed for at least 6 months, and who is employed at least 20 hours per week, or who are active participants in an accredited educational and training programs designed to prepare the individual for the job market.
- Person age 50 or older** – Where the head, spouse, co-head, or sole member is person age 50 or older.
- Disabled** – Where the head, spouse, co-head, or sole member is a person with disabilities.
- DHA Relocation** – families who reside in DHA-owned units who are required to relocate as a result of DHA demolition or rehabilitation.
- City of Durham Relocation** – families referred to the DHA by the City of Durham's Relocation Program.
- NONE OF THE ABOVE APPLIES TO ME, MY SPOUSE, OR CO-HEAD.**

**REASONABLE ACCOMMODATIONS**

If you or a family member are disabled and require accessibility features or another reasonable accommodation, please complete this section. If you do not require an accommodation, skip this section.

Household Member	Mobility (M)	Hearing (H)	Vision (V)	Communication (C)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please describe in detail any other accommodations that you require.

**NOTICE OF NONDISCRIMINATION**

The Durham Housing Authority does not discriminate on the basis of race, religion, sex, color, national origin, age, disability or familial status. We provide equal access to persons with disabilities to our programs, services and activities.

**NOTIFICATION OF APPLICANT RESPONSIBILITY**

It is the responsibility of each applicant to notify the Durham Housing Authority, 330 E. Main Street, PO Box 1731, Durham, NC 27702, **in writing and in person within 10 days of the occurrence**, each time the address changes for the applicant family.

Failure to keep this office informed of any and all changes of address will prevent contact by mail, and will leave us no alternative but to withdraw the application and remove the family from the Wait List. In the event this happens, if the Wait List is open, it will be necessary for the applicant to submit a new application, which will automatically assign the family a new application position. DHA will take affirmative steps to communicate with people who need services or information in a language other than English.

If a letter is mailed and returned by the post office, the application will be withdrawn automatically, unless a forwarding address is listed. When a forwarding address is listed the DHA will re-mail the letter.

**IDENTIFICATION VERIFICATION POLICY**

Durham Housing Authority (DHA) is required by Federal Law to obtain, verify and record information that identifies each individual who does business with us. When you visit us, we will ask for your name, address and other information that will allow us to identify you such as photo identification, social security number, and date of birth. DHA will collect this information to verify each member of the assisted family and property owner/agent.

**APPLICANT CERTIFICATION**

**I understand that this form is not an offer of housing.** Based on this form, I understand that I should not make any plans to move or end my present tenancy. I understand that it is my responsibility to inform the Durham Housing Authority of any change of address, income, reasonable accommodation, preference and/or family composition or my application will be withdrawn. I certify that the information I have given on this document is true and correct. I understand that any false statement or misrepresentations are criminal offenses punishable under state and federal laws. I also understand that false statements or information are grounds for rejection of my application or termination of tenancy or program participation. **WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODE, STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.**

Applicant Signature: \_\_\_\_\_

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

Co-Head Signature: \_\_\_\_\_

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



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## Notification of Applicant Responsibility

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It is the responsibility of each applicant to notify the Durham Housing Authority, 330 East Main Street, P.O. Box 1726, Durham, North Carolina, 27704, **in writing and in person within 10 days of the occurrence**, each time the address changes for the applicant family.

Failure to keep this office informed of any and all changes of address will prevent contact by mail, and will leave us no alternative but to withdraw the application and remove the family from the waiting list. In the event this happens, if the waiting list is open, it will be necessary for the applicant to submit a new application, which will automatically assign the family a new application number.

**If a letter is mailed and returned by the post office, the application will be withdrawn automatically, unless a forwarding address is listed. When a forwarding address is listed, the DHA will re-mail the letter.**

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I, the undersigned applicant, understand my obligation as described above, and I assume full responsibility for notifying the Durham Housing Authority of any changes of address. I understand that placing an application with the Durham Housing Authority does not guarantee Public Housing assistance. The Waiting List is subject to change in accordance with the U.S. Department of Housing and Urban Development rules and regulations, the DHA and the Admissions and Continued Occupancy Policy (ACOP).

The Waiting List will be purged regularly by requesting all applicants to indicate their continued interest, in writing, within a time frame specified by the DHA. If any applicants fail to respond, the names of the affected will be removed from the Waiting List.

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Signature

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Date

