--OFFICE USE ONLY--

APPLICATION # _____ **B/R** _____

Former resident of: _____

EQUAL HOUSING OPPORTUNITY

Columbia Housing Authority Pre-Application

Date: _____ (ex. 1/1/2000) Time: _____ (ex. 10:00 am) Are you in a homeless shelter? __ Yes __ No Are you a veteran? __ Yes __ No

Name: _____
Last First Middle Maiden

Address _____
Mailing Apt# City State Zip Code Phone Alternate Phone

Address _____
Residence Apt# City State Zip Code Phone Alternate Phone

Social Security Number _____ Race _____ Ethnicity _____

City/State of Birth _____ Birth Date _____ (ex. 1/1/2000) Age ____ Marital Status _____

Sex __ Male __ Female Pregnant? __ Yes __ No If Yes, what is the due date? _____

Disabled? __ Yes __ No Handicapped? __ Yes __ No Disabled Spouse? __ Yes __ No Handicapped Spouse? __ Yes __ No

List all people who will be living in your home:

FIRST NAME	LAST NAME	DATE OF BIRTH (ex. 1/1/2001)	BIRTH PLACE	SEX	AGE	SOCIAL SECURITY #	RELATIONSHIP
							Head
							Spouse

Income Dollar Amounts

Household Members with Income	Name of Employer	Gross Weekly Wages	Public Assistance	Child Support Monthly	Social Security	Unemployment Benefits	All Other Income

CURRENT RENT: $ _____ **WATER: $** _____ **ELECTRIC: $** _____

Reasonable Accommodations
Available Upon Request
TDD: (803) 256-7762

EQUAL HOUSING OPPORTUNITY

Do you owe money to the Columbia Housing Authority? __ Yes __ No

Have you been evicted from public housing or Section 8? __ Yes __ No (ineligible regulations are listed here)

Have you been charged with a felony? __ Yes __ No What felony? _____

Have you or your spouse been employed full time for at least 1 year? __ Yes __ No Where? _____ How Long? _____

Are you or your spouse in school or a training program? __ Yes __ No Where? _____ How Long? _____

TYPE OF HOUSING ASSISTANCE REQUESTED Qualifications are listed here.

Public Housing __ Section 8 voucher __ Section 8 moderate rehabilititation __

If you selected Public Housing, you may select a category or up to (3) communities where you want to live. If you select "First Available", do not select any other communities.

1. Senior Housing
(50 or older)

__ First Available
__ Arrington Manor
__ Marion Street
__ Oak Read
__ Fair Street
__ Cayce
__ Elderly Cottages
__ Rosewood Hills Highrise

2. Select Housing
(Employed or recieving Sociial Security for 1 year)

__ First Available
__ Archie Drive
__ Arsenal Hill
__ Atlas Road
__ Congaree Vista **(3 BR only)**
__ Fontaine Road
__ St. Andrews
__ Single Family
__ Rosewood Hills
__ Rivers Edge
__ Wheeler Hill
__ Pinewood Terrace **(2 BR only)**
__ Celia Saxon
__ Columbia Apts **(2 BR only)**
__ Village at Greenfield **(2 BR only)**
__ Pine Forrest **(2 BR only)**
__ Corners Garden Apts. **(2 BR only)**
__ Waverly Apts.
__ Reserves at Faraway Terrace

3. Standard Housing

__ First Available
__ Dorrah Randall **(3 BR only)**
__ Gonzales Gardens
__ Hammond Village
__ Latimore Manor **(NO 1 BR)**

4. Eastover Housing

__ Lewis Scott Court

*See "Site-Based Waiting Lists for Conventional Housing" brochure for guidance.

5. Cayce Housing

__ Cayce

Please read the articles below by clicking on the blue arrows and then click in the adjoining box

Community Service & Self-Suffiency Act __

Violence Against Women Act __

All information on this form will be verified by the Columbia Housing Authority.
It is your responsibility to keep us informed of any change of address.
If you have any additional questions, please call the Applications Department at (803) 254-3886.

I understand that all notifications are through the mail. If I do not respond or the mail cannot be delivered to the address given, my application will be deleted from the waiting list.

Signature: **X** _____ Date: _____
If using a computer, please type in your full name (ex. 1/1/2001)

For Office Use Only **Application Reviewed By**

Date entered in computer: _____ Entered by _____ Bedroom Size _____

Preference: __ Yes __ No Local _____ Ranking _____

Category _____ Sites _____ **Revised: 11/2006**

Reset Form **Check For Errors**