

SCOTT COUNTY CDA PRE-APPLICATION FOR PUBLIC HOUSING

Please complete both sides of this form. Please print legibly. You must use the correct legal name for each member of your household as it appears on their Social Security card.

| Legal Name: | (First/Last) | | | | | | |
|---|---------------------------------------|---|---|---------------------|-------------------------|---|--------------------|
| Social Securi | ity Number: | / | | | | | |
| Address: | | | | | Apt N | lumber: | |
| City: | | | State: | | | Zip: | |
| Phone Numb | er: | | Email: | | | | |
| Do you speal Ye No | S | you speak? | | | | | |
| Legal Name: (First/Middle/ | /Last) | Social Security # | Relationship to Family Head | Gend | er | Date of Birth (MM/DD/YYYY) | Disabled? (Y/N) |
| 1 | | | | | | | |
| 2 | | | | | | | |
| to fully util For each h complete | ize our progra ousehold me | ams and services, p mber listed above, | with disabilities, and blease contact the Society complete the information of the Head of | cott Co nation k | unty CDA pelow. Fo | r example, in numb | er 1 below, |
| Household # | Race* (You may use more than or | | Place of Birth (City/State/Countr | y) | Race Co | | |
| 1 | | | | | 4 Asian | an Indian/Alaska Native Hawaiian/Pacific Islande | er |
| 2 | | | | | Ethnicity 1. Hispani | y Code: c 2. Non-Hispanic | |

This information is for statistical purposes only

| | al Annual Income |
|----------------------------|------------------|
| Check all that apply: | |
| WagesMFIPSSSSIPensionOther | |

| Citizenship Information | Yes | No |
|---|-----|----|
| Is at least one family member a US citizen, US National or noncitizen with eligible immigration status? | | |

Checklist for local preference: Answer the following question as they apply to the head of household and/or cohead. The information you furnish will be used to determine your placement on the waiting list. This information will be verified by a third party.

| Displaced Preference | Yes | No |
|---|-----|----|
| Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster, declared or otherwise formally recognized pursuant to Federal Disaster Relief laws. | | |

Applicant Certification: I/We certify that the information on this application is correct and complete to the best of my/our knowledge and belief. I/We understand that such information will be verified, and any false statements made on this application will cause me/us to be disqualified for admission I/We also understand that false statements or information are punishable under Federal law.

| Signature of Applicant: | Date: |
|-------------------------------|---------|
| | |
| Ciana akuwa afi akhawa akulki | Data |
| Signature of other adult: | . Date: |

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United Sates as to any matter within its jurisdiction.

Privacy Statement

If you do not understand this form, please ask CDA staff to help you.

Terms used:

- 1. CDA The CDA is the Scott County Community Development Agency.
- 2. HUD- HUD is the U.S. Department of Housing and Urban Development, which gives money to the CDA for housing.

The CDA asks you for many facts and papers when you apply for housing. While you live in public housing, we ask you for more facts. Why?

- 1. When you apply for housing, we ask how much money you receive and have. We ask where you have been living and how much rent you pay. We ask who lives with you. We do this to learn if you can receive housing assistance and how soon. We also use these facts to set the amount of your rent; and we decide what size unit your family needs.
- 2. While you receive public housing assistance, we ask you each year for more facts about your money and your family. Again, we must do this to see if you can continue to receive public housing assistance; and we must check that your rent is the right amount. We also check how many bedrooms your family needs.
- 3. We ask for some facts like your family size, income and expenses, because we must report them to HUD and other public agencies. We also use these facts to run the Public Housing and Section 8 Programs well.
- 4. You do not have to give us the facts and papers we ask for. If you decide not to, the CDA may not be able to provide you with housing assistance. Please ask CDA staff if you do not know whether to give us certain facts. We can explain more about why we need the facts and whether we must have them.
- 5. Most of the facts we ask you for are PRIVATE under state law. We will not give out private facts about you or your family unless a law says we can or must. Sometimes we also ask you to sign papers which say we can give out certain private facts about you to a certain person or office (like welfare).
- 6. When a state or U.S. law says we can, we may give facts about you (usually just your name and address) to any of these agencies or people:
 - a. HUD and other public housing agencies
 - b. People who work for or with the CDA. Also volunteer programs helping you or the CDA.
 - c. Health and human service agencies which have contracts with the CDA.
 - d. Scott County Human Services (the welfare office).
 - e. School districts.
 - f. Fire Department and paramedics in an emergency or for investigations into the cause of a fire.
 - g. Utility Companies, cable TV company, phone company.
 - h. U.S. Census Bureau
 - i. Scott County City Departments: Police, Citizen Service Office, Housing and Code Enforcement
 - j. Federal, State, or local auditors
 - k. Minnesota Department of Revenue (tax office)
 - l. Other state and U.S. agencies which the law allows to see CDA files.
- 7. Housing tenants who may have broken the law may be investigated by police, county, state, or other officers. The CDA will give out facts needed by these people when the law permits it. The CDA will also give facts to a court when required.
- 8. The law says private facts about a minor (a person under 18) must be given to the parent or guardian. The minor can ask the CDA not to give facts to the parent or guardian. The minor must write the request, state the reason, and sign it.
- g. When the CDA gives private facts to another agency, that agency must also keep the facts private.
- 10. When you move out of public housing, we will keep facts about you in our files. State and U.S. laws say we must do this. We will destroy the files when the law says we can. Most records about tenants are kept for at least three years, some for longer.

- 11. If we send facts to the CDA's lawyer to prepare for going to court, those facts are CONFIDENTIAL. That means we do not have to show these facts to you. We will only show those facts to our staff, our lawyer, and other people covered by the law. You do have the right to know if we have confidential facts about you. Once we tell you that we will raise your rent or evict you, you and your representative may see all facts we have relating to the case.
- 12. You may ask to see any private facts we have about you. You may also tell the CDA to show those facts to someone else. We will do this for free. If you ask for copies of papers, we may ask you to pay for them. You may ask to see private facts the CDA has about you every six months. You may ask more often if we have new facts. You may also ask more often if these is a legal question about your privacy rights.

IF YOU THINK FACTS THE CDA HAS ABOUT YOU ARE WRONG OR NOT COMPLETE:

- 1. Write to us and tell us what you think is wrong. Write to the CDA's "Public Housing Department" at: Scott County CDA 323 S Naumkeag Street Shakopee, MN 55379
- 2. The law says we must answer you in 30 days. If you are a public housing tenant and have questions about your privacy rights, please ask the Housing Director.

If you are applying for housing and have questions, please ask for the Prior Manor Housing Specialist. You may also call the CDA's office at 952-402-9022 and ask for the Housing Director.

Again, if you do not understand this form, ask us to explain it to you.

| CIONATURE | D. 4 T. F | |
|------------|-----------|--|
| SIGNATURE: | DATE: | |