

HOUSING AUTHORITY OF THE TOWN OF WATERTOWN
Application for Rental Housing for Elderly Persons
(ALL INFORMATION IS CONFIDENTIAL)

You must meet the necessary requirements of the Tenant Selection Policy of the Watertown Housing Authority to be eligible. Applicant must be 62 years of age or older, or be certified as disabled by the Federal Social Security Act. Income includes Social Security, Pension, Interest, Dividends, Social Service Assistance, Wages, and other income. All sources of Income combined cannot exceed the following annual amounts:

Single Occupancy limit minimum **\$15,000.00** maximum **\$45,500.00** and

Double Occupancy limit minimum **\$21,500.00** maximum **\$52,000.00**.

Note: Base Rents start at \$375.00 per month.

If you do not meet these requirements, you are not eligible to apply for tenancy and should not complete this form.

If you meet these requirements, please complete the entire application with supporting documentation. Incomplete applications may not be acknowledged and may be returned for completion.

APPLICANT #1

| | | |
|-----------|------------|----------------|
| Last Name | First Name | Middle Initial |
|-----------|------------|----------------|

DOB: _____ Social Security# _____

The following information is required for statistical purposes so that Watertown Housing Authority and HUD may determine the degree to which minority families utilize housing. Please check the appropriate boxes:

White Black Indian Hispanic Asian Other

Do you need a Handicapped Accessible Unit: Yes No If yes, appropriate verification is required

Present Address (Include Street, Apt#, City, State & Zip)

_____ Phone#: _____

How long at this address _____ Present Landlord: _____ Phone#: _____

Landlord's Address: _____

How long at this address _____ Present Landlord: _____ Phone#: _____

Landlord's Address: _____

If less than 5 years at present address, Former Address _____

Have you ever been evicted or are currently under eviction from any unit you have rented? Yes No

If yes, please explain _____

APPLICANT #2

| | | |
|-----------|------------|----------------|
| Last Name | First Name | Middle Initial |
|-----------|------------|----------------|

DOB: _____ Social Security# _____

The following information is required for statistical purposes so that Watertown Housing Authority and HUD may determine the degree to which minority families utilize housing. Please check the appropriate boxes:

White Black Indian Hispanic Asian Other

APPLICANT #2 continued

Do you need a Handicapped Accessible Unit: Yes No If yes, appropriate verification required

Present Address (Include Street, Apt#, City, State & Zip)

_____ Phone#: _____

How long at this address _____ Present Landlord: _____ Phone#: _____

Landlord's Address: _____

If less than 5 years at present address, Former Address _____

Have you ever been evicted or are currently under eviction from any unit you have rented? Yes No

If yes, please explain _____

INCOME INFORMATION (All fields must be completed and proper documentation must be attached)

Applicant #1 Social Security: _____ Pension: _____

Employment: _____ Income: _____

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Employment: _____ Income: _____

Do you own any Real Estate Property? _____ If yes, what is the Value? _____

Have you disposed of any assets within the last (3) years? Yes No If yes, please explain:

If you have a live-in aide/healthcare worker: Name: _____ Agency: _____

Emergency Contact: _____ Relationship: _____

Address: _____ Phone: _____

To the best of my knowledge, the information is true and accurate. I understand that I will be asked to sign an Authorization Form which will give the Watertown Housing Authority permission to check my credit, employment, police record and landlord reference.

Applicant #1 _____ Date: _____

Applicant #2 _____ Date: _____

The Watertown Housing Authority Provides and Equal Housing Opportunity

1091 Buckingham Street, Watertown, CT 06795

(860) 274-0598