

NAME FAMILY MEMBER	SOURCE OF INCOME/TYPE OF INCOME NAME/ADDRESS OF EMPLOYER	ANNUAL INCOME HRLY/WKLY/MONTHLY

ASSET INFORMATION

List all checking, savings and credit union accounts (including IRA's, Keogh accounts, and Certificates of Deposit of all household members.

NAME FAMILY MEMBER	BANK NAME	ACCOUNT NUMBER	CURRENT BALANCE

List value of all stocks, bonds, trusts, pension contributions, or other assets: _____

Total Household Income \$ _____

Total Income from Household Assets \$ _____

Do you own any other home or other real estate? Yes ____ No ____

Have you sold or given away real property or other assets in the past two years? Yes ____ No ____
 If yes, what is the current market value of the assets? _____

FAMILY COMPOSITION

MEMBER #	NAME	DOB	SOCIAL SECURITY #

REPAIRS REQUESTED:

COMMENTS/ADDITIONAL INFORMATION:

APPLICANT CERTIFICATION: I/We certify that the information given to the City of Douglas PHA on household composition, income, net family assets, is accurate and complete to the best of my/our knowledge and belief. I/We understand false statements or information are punishable under Federal Law.

Signature of Head: _____ Date: _____

Signature of Spouse: _____ Date: _____

Representative of PHA: _____ Date: _____

NOTE OF APPLICANTS: If you believe you have been discriminated against, you may call the Fair Housing and Equal Opportunity National Toll-Free Hotline at 1-800-669-9777.