



PINAL COUNTY  
wide open opportunity

OFFICE USE ONLY

Housing Rep Initials \_\_\_\_\_  
Date Stamp \_\_\_\_\_

## Application for Housing Assistance

**INSTRUCTIONS:** Please complete all questions Any future changes to your application **must** be reported in writing within 10 days.

Applicants Last Name	First Name	MI:	Social Security Number	Date of Birth	Phone #
Mailing address/City/State/Zip				County	Gross Household Income \$

CHOOSE ONE FROM EACH COLUMN

<b>ETHNICITY:</b> <input type="checkbox"/> HISPANIC <input type="checkbox"/> NON-HISPANIC	<b>DISABLED</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>GENDER:</b> <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	<b>RACE:</b> <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander
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ANSWER YES OR NO TO EACH QUESTION

<b>YES</b>	<b>NO</b>
<input type="checkbox"/>	<input type="checkbox"/> Are you or any member of your household elderly(62 years or older) or disabled?
<input type="checkbox"/>	<input type="checkbox"/> Are you currently displaced by government action?
<input type="checkbox"/>	<input type="checkbox"/> Are you or any member of your household a lifetime registered sex offender?
<input type="checkbox"/>	<input type="checkbox"/> Are you a current victim of Domestic Violence?
<input type="checkbox"/>	<input type="checkbox"/> Are you a U. S. Veteran or currently in the U.S. Military?
<input type="checkbox"/>	<input type="checkbox"/> Are you employed? In what county is your employer located _____?

Select ALL programs you are interested in

<input type="checkbox"/> <b>Section 8 / Housing Choice Voucher (Open: August 1, 2016)</b>
<input type="checkbox"/> <b>Conventional (Public) Housing:</b> Check which areas you are interested in: <input type="checkbox"/> Apache Junction <input type="checkbox"/> Casa Grande <input type="checkbox"/> Coolidge <input type="checkbox"/> Eleven Mile Corner <input type="checkbox"/> Eloy <input type="checkbox"/> Maricopa <input type="checkbox"/> Stanfield
<b>PLEASE BE ADVISED OF THE FOLLOWING:</b> A. ONE BEDROOM UNITS AVAILABLE ONLY IN APACHE JUNCTION AND ELEVEN MILE CORNER B. FOUR BEDROOM UNITS NOT AVAILABLE IN APACHE JUNCTION AND COOLIDGE
<input type="checkbox"/> <b>Santa Cruz Village</b> (one bedroom units only for 62 years or older; handicapped and/or disabled)

Add all people who will live with you. Use backside of application if needed.

	Name	Soc. Sec. #	Gender	Disabled	Date of Birth	Relationship To Head of Household
1.						Self
2.						
3.						
4.						
5.						
6.						
7.						

**GIVING TRUE AND COMPLETE INFORMATION:**

I certify that all information provided on this pre-application is true and complete to the best of my knowledge and belief.  
I understand that false statements or information is grounds for denial.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

HOUSING DEPARTMENT

970 North Eleven Mile Corner Rd, Casa Grande, AZ 85194 T 520-866-7201 F 520-866-7235 [www.pinalcountyaz.gov](http://www.pinalcountyaz.gov)

