



APPLYING FOR HUD HOUSING ASSISTANCE?

**THINK ABOUT THIS...
IS FRAUD WORTH IT?**

Do You Realize...

If you commit fraud to obtain assisted housing from HUD, you could be:

- Evicted from your apartment or house.
- Required to repay all overpaid rental assistance you received.
- Fined up to \$10,000.
- Imprisoned for up to five years.
- Prohibited from receiving future assistance.
- Subject to State and local government penalties.

Do You Know...

You are committing fraud if you sign a form knowing that you provided false or misleading information.

The information you provide on housing assistance application and recertification forms will be checked. The local housing agency, HUD, or the Office of Inspector General will check the income and asset information you provide with other Federal, State, or local governments and with private agencies. Certifying false information is fraud.

So Be Careful!

When you fill out your application and yearly recertification for assisted housing from HUD make sure your answers to the questions are accurate and honest. You must include:

All sources of income and changes in income you or any members of your household receive, such as wages, welfare payments, social security and veterans' benefits, pensions, retirement, etc.

Any money you receive on behalf of your children, such as child support, AFDC payments, social security for children, etc.

Any increase in income, such as wages from a new job or an expected pay raise or bonus.

All assets, such as bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc., that are owned by you or any member of your household.

All income from assets, such as interest from savings and checking accounts, stock dividends, etc.

Any business or asset (your home) that you sold in the last two years at less than full value.

The names of everyone, adults or children, relatives and non-relatives, who are living with you and make up your household.

(Important Notice for Hurricane Katrina and Hurricane Rita Evacuees: HUD's reporting requirements may be temporarily waived or suspended because of your circumstances. Contact the local housing agency before you complete the housing assistance application.)

Ask Questions

If you don't understand something on the application or recertification forms, always ask questions. It's better to be safe than sorry.

Watch Out for Housing Assistance Scams!

- Don't pay money to have someone fill out housing assistance application and recertification forms for you.
- Don't pay money to move up on a waiting list.
- Don't pay for anything that is not covered by your lease.
- Get a receipt for any money you pay.
- Get a written explanation if you are required to pay for anything other than rent (maintenance or utility charges).

Report Fraud

If you know of anyone who provided false information on a HUD housing assistance application or recertification or if anyone tells you to provide false information, report that person to the HUD Office of Inspector General Hotline. You can call the Hotline toll-free Monday through Friday, from 10:00 a.m. to 4:30 p.m., Eastern Time, at 1-800-347-3735. You can fax information to (202) 708-4829 or e-mail it to Hotline@hudoig.gov. You can write the Hotline at:



HUD OIG Hotline, GFI
451 7th Street, SW
Washington, DC 20410

**CITY OF SHEBOYGAN HOUSING AUTHORITY
APPLICATION**

611 N. WATER ST., P.O. BOX 1052, SHEBOYGAN, WI 53082-1052
920-459-3466

INSTRUCTIONS FOR COMPLETING YOUR APPLICATION

- 1. Fill out entire application in ink pen.** You must complete the entire application, including social security numbers for all household members who have them, dates of birth, and a mailing address. Please sign and date the application. Incomplete applications or applications filled out in pencil will be returned.
- 2. Read the descriptions of the priorities and check those that apply to you.**
- 3. All applicants will be contacted by mail and notified when their name comes near the top of the list. If you move, please contact us with your new address.**

You may drop off
Your application between **8:00 a.m. - 4:30 p.m.** or
mail it to the address listed above.

EQUAL OPPORTUNITY HOUSING

SHEBOYGAN HOUSING AUTHORITY APPLICATION

Please mark all waiting lists you wish to apply for:

Public Housing - Public Housing are apartments and houses owned by the Housing Authority that we rent to tenants for approximately 30% of their gross income. These are located in various parts of Sheboygan. Georgia Avenue units with 2 or 3 bedrooms are available to families with minor children.

- ___ Wasserman Building
- ___ Tamarack House
- ___ Park Plaza
- ___ Georgia Avenue (**Family Units**)

HEAD OF HOUSEHOLD INFORMATION

Name: _____ Social Security # _____
(Last) (First) (Middle)

Birthdate _____ Sex _____ Age _____ Street Address _____ Apt # _____

City: _____ State: _____ Zip Code: _____ Phone # _____

Mailing Address (If different from above): _____

List all other family members:

First	Middle	Last	Birth Date	Relationship	Sex M/F	Age	Social Security #

Bedroom
Size:

Date/time stamp

INCOME

List **all** sources of income including employment, cash income, W-2, social security, SSI, disability or unemployment compensation, alimony, child support, etc. This includes income you receive for a child such as SSI, food stamps, etc. ***IF someone is helping you with monthly expenses, food, utilities, car payments or other cash payments, you must list it below.***

Family Member	Source of Income	Amount Received	How Often

List all assets and asset value for your household:

Savings Account \$_____ Checking Account \$_____ Real Estate \$_____ Cash on Hand \$_____
 Certificate of Deposit \$_____ Stamp/Coin Collection \$_____ Collector Cars_____

Friend or Relative you want us to notify in case of emergency.

Name_____ Relationship_____ Telephone_____

PRIORITY QUALIFICATION: Check as many as apply.

_____ **Displaced by federal, state, or local declared disaster within the last 6 months.** *Government disaster documentation required.*

_____ **Sheboygan Resident for 6 months or longer:** You LIVE, WORK or attend SCHOOL within the city limits of Sheboygan, Wisconsin. ***Verification showing where you live, work or attend school is required at time of interview***

_____ **Handicapped accessible UNIT required:** Check here if you need a unit with handicapped fitted restrooms, wider doorways, no stairs, and a ramp. ***Verification by a medical professional is required.***

_____ **Participant in program for victims of Domestic Violence** *Verification by a DV program director is required AND documentation of a pattern of abuse within the last 6 months. Verification must include one of the following: police reports, hospital records, counselor records, or HUD-50066 form. Verification required at time of application.*

_____ **Currently Homeless.**

PROGRAM INFORMATION:

Have you ever participated in a rental assistance or public housing program? _____ If yes, where and when did you participate? _____

History of Applicant/Co-Applicants:

Have you or any household member over seventeen years old ever been convicted of a crime other than a traffic ticket? _____ Yes _____ No

If yes, List here. _____

(If you run out of space use notebook paper and attach with application.)

Maiden name or other names used by any members of the household _____

Are any members of your household handicapped or disabled? _____ If so who _____

ALL APPLICATION INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements of misrepresentation to any Department of Agency of the United States as to any matter within its jurisdiction.

Signature:

Date:

RACIAL GROUP IDENTIFICATION: The following information is required for statistical purposes so the Department of Housing and Urban Development may determine the degree to which minority families utilize its programs. The categories have been defined by HUD. Hispanic is defined as an ethnicity; races are defined as White, Black/African American, Asian, and Native Hawaiian/Pacific Islander.

**Check ALL races that apply to each person in your household.
Circle Yes or No to identify if each person in your household is Hispanic.**

List family members, including yourself	Race				Ethnicity	
	White	Check <u>all</u> that apply			Circle one	
Name		African American	Asian	Native Hawaiian/ Pacific Islander	Is this person also Hispanic?	
					YES	NO
					YES	NO
					YES	NO
					YES	NO
					YES	NO
					YES	NO
					YES	NO

