



HALE MAHAOLU – HOUSING APPLICATION

General Information:

Hale Mahaolu is a private, nonprofit housing corporation that develops, owns and manages low- and moderate-income housing units throughout Maui County for individuals, families, seniors, and/or those with disabilities.

- Original housing applications may be dropped off at any Hale Mahaolu housing location (Monday thru Friday, 8:00 a.m. to 12:00 p.m.) or mailed in to 200 Hina Avenue, Kahului, Hawaii 96732.
- Complete all information as required including the HUD 92006 Supplement to Application for Federally Assisted Housing form. Print clearly in ink. **Incomplete applications will not be accepted.**
- Signatures required by all adult household members.
- Assistance in subsidized housing may be restricted to the following: U.S. Citizen(s) or nationals; and/or noncitizen(s) with eligible immigration status.
- Applicant must select Housing Preferences. Hale Mahaolu will not choose on your behalf. Some housing sites are for seniors only; other sites are listed as “family” for individuals and families with head of household over the age of 18.
- There are income limits at most sites. The household gross income must be less than or equal to the established current HUD maximum income limit for the household size. Site specific information can be found on the Hale Mahaolu website under Housing.
- Each Housing Site maintains and manages its own wait list. An applicant may only have one (1) active application on each individual housing site wait list.
- Accepted applications will be processed and placed on a waitlist on a first-come-first-served basis for upcoming vacancies. You will be notified in writing of your placement status. Prior to placement, you will be notified in writing and additional information and forms (verification of current income, assets, etc.) will be required.
- All Hale Mahaolu owned and/or managed housing sites have a No Smoking Policy and Drug Free Policy. Federally funded / subsidized housing prohibits the use of controlled substances **including** medical marijuana.
- Hale Mahaolu provides equal housing opportunity; we do not discriminate on the basis of race; sex, including gender identity or expression; sexual orientation; color; religion; marital status; familial status; ancestry/national origin; disability; age; or human immunodeficiency virus (HIV) infection, as stated in Hawaii Revised Statutes, Chapter 515 and Title VIII of the Civil Rights Acts of 1968, as amended by the Fair Housing Amendments of 1988.

Application will be denied or removed from the waitlist for the following reasons:

- Any household member has been evicted from Federally-assisted housing for drug-related criminal activity, for three years from the date of eviction. If the evicted household member who engaged in drug-related criminal activity has successfully completed a supervised drug rehabilitation program or circumstances leading to the eviction no longer exist, the Owner may, but is not required to, admit the household.
- The Owner/Managing Agent determines that there is reasonable cause to believe that a household member’s illegal use or a pattern of illegal use of drugs may interfere with the health, safety, or right of peaceful enjoyment of the premises by other residents. (Examples of evidence of illegal activities may include a conviction record, former landlord references, etc.) Federally funded / subsidized housing prohibits the use of controlled substances **including** medical marijuana.
- Any member of the household is subject to a lifetime registration requirement under a state sex offender registration program. In accordance with Federal law, Owner/Managing Agent shall establish standards that prohibit admission to any Federally-assisted property to sex offenders subject to a lifetime registration requirement under a state sex offender’s registration program.

- The Owner/Managing Agent determines that there is reasonable cause to believe that a household member's abuse of alcohol interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents.
- Within 10 years before the admission decision, you had a conviction for:
 - Violent criminal activity;
 - Drug-related criminal activity;
 - Other criminal activity that would threaten the health, safety, or right to peaceful enjoyment of the premises by other residents; or
 - Other criminal activity that would threaten the health or safety of the Owner/Managing Agent, or any employee, contractor, subcontractor, or agent of the Owner who is involved in the housing operations.
- Negative landlord reference.
- Falsifying of information on the application.
- Unsatisfactory credit history.
- Verbal and/or physical harassing, threatening and/or intimidating Hale Mahaolu's personnel and its volunteers, contractors, vendors, etc.
- Demonstrated aggressive, disruptive, disrespectful and/or repeated behavior that may result in serious or repeated interference with the rights and quiet enjoyment of others.

Move In Qualifying Criteria:

- A personal (physical – face to face) interview must be conducted at the housing site prior to the offer of a unit.
- Applicants must sign and submit verification consent forms.
- During the admission screening process, applicants must successfully pass criminal and credit history background checks.
- Applicant must have acceptable rental history from landlord(s) as listed on application.

Unit Assignment:

- Units are assigned by existing resident accommodation requests, VAWA regulation and wait list status.
- When a unit is offered, you are allowed one first refusal per housing site that you are waitlisted. You will remain on the respective wait list and maintain your status. A second refusal will result in your application being cancelled from that particular housing site.
- You will be notified of a unit when your name comes up on the waitlist. Notification may be less than 30 days.



November 2004

Things You Should Know

Don't risk your chances for Federally assisted housing by providing false, incomplete, or inaccurate information on your application forms.

Purpose	This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.
Penalties for Committing Fraud	<p>The United States Department of Housing and Urban Development (HUD) places a high priority on preventing fraud. If your application or recertification forms contain false or incomplete information, you may be:</p> <ul style="list-style-type: none">▫ Evicted from your apartment or house:▫ Required to repay all overpaid rental assistance you received:▫ Fined up to \$ 10,000:▫ Imprisoned for up to 5 years; and/or▫ Prohibited from receiving future assistance. <p>Your State and local governments may have other laws and penalties as well.</p>
Asking Questions	When you meet with the person who is to fill out your application, you should know what is expected of you. If you do not understand something, ask for clarification. That person can answer your question or find out what the answer is.
Completing The Application	When you answer application questions, you must include the following information:
Income	<ul style="list-style-type: none">▫ All sources of money you or any member of your household receive (wages, welfare payments, alimony, social security, pension, etc.):▫ Any money you receive on behalf of your children (child support, social security for children, etc.);▫ Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stock, etc.);▫ Earnings from second job or part time job;▫ Any anticipated income (such as a bonus or pay raise you expect to receive)
Assets	<ul style="list-style-type: none">▫ All bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.. that are owned by you and any adult member of your family's household who will be living with you.

- Any business or asset you sold in the last 2 years for less than its full value, such as your home to your children.
- The names of all of the people (adults and children) who will actually be living with you, whether or not they are related to you.

Signing the Application

- Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate.
- When you sign the application and certification forms, you are claiming that they are complete to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information.
- Information you give on your application will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with various Federal, State, or private agencies to verify that it is correct.

Recertifications

You must provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You must report on recertification forms:

- All income changes, such as increases of pay and/or benefits, change or loss of job and/or benefits, etc., for all household members.
- Any move in or out of a household member; and,
- All assets that you or your household members own and any assets that was sold in the last 2 years for less than its full value.

Beware of Fraud

You should be aware of the following fraud schemes:

- Do not pay any money to file an application;
- Do not pay any money to move up on the waiting list;
- Do not pay for anything not covered by your lease;
- Get a receipt for any money you pay; and,
- Get a written explanation if you are required to pay for anything other than rent (such as maintenance charges).

Reporting Abuse

If you are aware of anyone who has falsified an application, or if anyone tries to persuade you to make false statements, report them to the manager of your complex or your PHA. If that is not possible, then call the local HUD office or the HUD Office of Inspector General (OIG) Hotline at (800) 347-3735. You can also write to: HUD-OIG HOTLINE, (GFI) 451 Seventh Street, S.W., Washington, DC. 20410.





Rural Housing and Community Programs

Things You Should Know About USDA Rural Rental Housing

Don't risk losing your chances for federally assisted housing by providing false, incomplete, or inaccurate information on your application or recertification

Penalties for Committing Fraud

You must provide information about your household status and income when you apply for assisted housing in apartments financed by the U.S. Department of Agriculture (USDA). USDA places a high priority on preventing fraud. If you deliberately omit information or give false information to the management company on your application or recertification forms, you may be:

- Evicted from your apartment;
- Required to repay all the extra rental assistance you received based on faulty information;
- Fined;
- Put in prison and/or barred from receiving future assistance.

Your State and local governments also may have laws that allow them to impose other penalties for fraud in addition to the ones listed here.

How To Complete Your Application

When you meet with the landlord to complete your application, you must provide information about:

- **All Household Income.** List all sources of money that you receive. If any other adults will be living with you in the apartment, you must also list all of their income. Sources of money include:
 - Wages, unemployment and disability compensation, welfare payments, alimony, Social Security benefits, pensions, etc.;
 - Any money you receive on behalf of your children, such as child support, children's Social Security, etc.;
 - Income from assets such as interest from a savings account, credit union, certificate of deposit, stock dividends, etc.;
 - Any income you expect to receive, such as a pay raise or bonus.
- **All Household Assets.** List all assets that you have. If any other adults will be living with you, you must also list all of their assets. Assets include:
 - Bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.;
 - Any business or asset you sold in the last 2 years for less than its full value, such as selling your home to your children.

- **All Household Members.** List the names of all the people, including adults and children, who will actually live with you in the apartment, whether or not they are related to you.

Ask for Help if You Need It

If you are having problems understanding any part of the application, let the landlord know and ask for help with any questions you may have. The landlord is trained to help you with the application process.

Before You Sign the Application

- Make sure that you read the entire application and understand everything it says;
- Check it carefully to ensure that all the questions have been answered completely and accurately;
- Don't sign it unless you are sure that there aren't any errors or missing information.

By signing the application and certification forms, you are stating that they are complete to the best of your knowledge and belief. Signing a form when you know it contains misinformation is considered fraud.

- The management company will verify your information. USDA may conduct computer matches with other Federal, State or private agencies to verify that the income you reported is correct;
- Ask for a copy of your signed application and keep a copy of it for your records.

Tenant Recertification

Residents in USDA-financed assisted housing must provide updated information to the management company at least once a year. Ask your landlord when you must recertify your income.

You must **immediately** report:

- Any changes in income of \$100 or more per month;
- Any changes in the number of household members.

For your annual recertification, you must report:

- All income changes, such as increases in pay or benefits, job change or job loss, loss of benefits, etc., for any adult household member;

- Any household member who has moved in or out;
- All assets that you or your adult housemates own, or any assets that were sold in the last 2 years for less than their full value.

Avoid Fraud, Report Abuse

Prevent fraudulent schemes through these steps:

- Don't pay any money to file your application;
- Don't pay any money to move up on the waiting list;
- Don't pay for anything not covered by your lease;
- Get receipts for any money you do pay;
- Get a written explanation for any money you are required to pay besides rent, such as maintenance charges.

Report Abuse: If you know anyone who has falsified an application, or who tries to persuade you to make false statements, report him or her to the manager. If you cannot report to your manager, call your local or state USDA office at 1 (800) 670-6553, or write: USDA, STOP 0782, 1400 Independence Ave., SW, Washington, DC 20250.

If You Disagree With a Decision

Tenants may file a grievance in writing with the complex owner in response to the owner's actions, or failure to act, that result in a denial, significant reduction, or termination of benefits. Grievances may also be filed when a tenant disputes the owner's notice of proposed adverse action.

Notice of Adverse Action

The complex owner must notify tenants in writing about any proposed actions that may have adverse consequences, such as denial of occupancy and changes in the occupancy rules or lease. The written notice must give specific reasons for the proposed action, and must also advise tenants of the "right to respond to the notice within 10 calendar days after the date of the notice" and of "the right to a hearing." Housing complexes in areas with a concentration of non-English-speaking people must send notices in English and in the majority non-English language.

Grievance Process Overview

USDA believes that the best way to resolve grievances is through an informal meeting between tenants and the landlord or owner. Once the owner learns about a tenant grievance, the process should begin with an informal meeting between the two parties. Owners must offer to meet with tenants to discuss the grievance within 10 calendar days of receipt of the complaint. USDA encourages owners and tenants to try to reach a mutually satisfactory resolution to the problem at the meeting.

If the grievance is not resolved, the tenant must request a hearing within 10 days of receipt of the meeting findings. The parties will then select a hearing panel or hearing officer to govern the hearing. All parties are notified of the decision 10 days after the hearing.

When a Grievance Is Legitimate

The landlord must determine if a grievance is within the established rules for the program. For example, "I want to file a complaint because the manager doesn't speak to me" is not a legitimate complaint. However, "I want to file a complaint because the manager isn't maintaining the property according to USDA guidelines" is a legitimate complaint. Below are examples of cases in which tenants may and may not file a complaint.

A complaint may not be filed with the owner/management if:	A complaint may be filed with the owner/management if:
USDA has authorized a proposed rent change.	There is a modification of the lease, or changes in the rules or rent that are not authorized by USDA.
A tenant believes that he/she has been discriminated against because of race, color, religion, national origin, sex, age, familial status, or disability. Discrimination complaints should be filed with USDA and/or the Department of U.S. Housing and Urban Development (HUD), not with the owner/management.	The owner or management fails to maintain the property in a decent, safe, and sanitary manner.
The complex has formed a tenant's association and all parties have agreed to use the association to settle grievances.	The owner violates a lease provision or occupancy rule.
USDA has required a change in the rules and proper notices have been given.	A tenant is denied admission to the complex.
The tenant is in violation of the lease and the result is termination of tenancy.	
There are disputes between tenants that do not involve the owner/management.	
Tenants are displaced or other adverse effects occur as a result of loan prepayment.	

PA 1998
December 2008

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

HALE MAHAOLU APPLICATION FOR RENTAL HOUSING

Please Print Clearly



A. General Information

Applicant Name (First, MI, Last):			
Mailing Address:		Primary Phone:	
City State, Zip:		Email:	

Alternate Contact Information

Alternate Contact Person:			
Contact Phone Number:		Relationship:	

B. Family Composition – Household Member(s) Applying for Housing

If any adult household member is a full-time student for more than five calendar months/year please indicate below

Household Member	Relationship to Applicant	First Name	Last Name	Student?*(Y/N)
Applicant	self			
Co-Applicant				
3				
4				
5				
6				

NUMBER OF HOUSEHOLD MEMBERS INCLUDED IN THIS APPLICATION:

Household Member	Place of Birth: City, State, Country	Date of Birth (MM/DD/YYYY)	Occupation	Social Security or Alien Registration number <i>(Optional. Disclosure required at initial screening)</i>
Applicant				
Co-Applicant				
3				
4				
5				
6				

B. Income & Family Assets

(Attach a separate sheet, if necessary)

CURRENT EMPLOYMENT: Identify each employed member by Household Member from Family Composition in Section A.

Household Member	Employer's Name	GROSS pay per hour or month	Work hours per week	Estimated GROSS Monthly Income
		\$		\$
		\$		\$
		\$		\$

SELF EMPLOYMENT / BUSINESS INCOME (Include Rental Income):



Identify each self-employed member by Household Member from Family Composition in Section A.

Household Member	Business Name	NET income per month	Estimated Annual NET income
		\$	\$
		\$	\$

Other Income: Identify each income by Household Member from Family Composition in Section A.

Household Member	Source	GROSS Monthly Amount	Household Member	Source	GROSS Monthly Amount
	Social Security:	\$		Veteran's Pension:	\$
	Supplemental Security (SSI):	\$		Veteran's Educational Benefits:	\$
	Unemployment Compensation:	\$		Legally Entitled Child Support From:	\$
	Workers' Compensation:	\$		Other Child support from:	\$
	Retirement from:	\$		Legally Entitled Alimony:	\$
	Pension from:	\$		Support from Adult Children:	\$
	Scheduled Payments from Investments or Annuities:	\$		Financial Aid (excluding loans):	\$
	Welfare Assistance Type:	\$		Other:	\$

Assets: Identify each asset by Household Member from Family Composition in Section A.
(Attach a separate sheet, if necessary)

Household Member	Checking / Savings / CD's / IRA's / Direct Express <i>List name of Institution, Bank, Credit Union, etc.</i>	Total Value Amount	Household Member	Stocks/Mutual Funds <i>List Names</i>	Total Estimated Value
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$

Household Member	List all real property owned: Location Est. Market Value Est. Equity	Household Member	List all Bonds: Denomination	Total Estimated Value
				\$
				\$
				\$

Household Member	List all Trust Accounts: Location Est. Market Value Est. Equity	Household Member	List all Life Insurance Accounts:	Whole/ Term	Total Face Value
					\$
					\$

C. Additional Information & Criminal History



- Yes No 1. Do you require to have a mobility, visual or hearing impaired modified unit?
(please check appropriate box)
- Yes No 2. Does household currently hold a HUD rental housing voucher?
- Yes No 3. Have you or any member of your household been evicted by court action from any housing?
- Yes No 4. Are you or any member of your household currently using illegal substances?
NOTE: Federally Funded/Subsidized Housing Prohibits the Use of Controlled Substances including Medical Marijuana
- Yes No 5. Are **any** members of the household subject to lifetime sex offender registration in any state?
If yes, list below.
- Yes No 6. Have you **or any other person on your application** been convicted of any criminal offense against the law within the past 10 years? If yes, list below.

(If YES, list each offense and the date. Attach a separate sheet, if necessary. **Omit traffic violations and any offense tried in juvenile court**): _____

7. List all cities & states where **each** member of the household has resided (attach a separate sheet, if necessary):

D. Rental History

Present Landlord:	How Long?	Home Phone:
Landlord Mailing Address:		Work Phone:
Reason for leaving:		
Previous Landlord:	How Long?	Home Phone:
Landlord Mailing Address:		Work Phone:
Reason for leaving:		
Previous Landlord:	How Long?	Home Phone:
Landlord Mailing Address:		Work Phone:
Reason for leaving:		

E. Housing Preferences



CHECK all the housing site(s) where you wish to live. Hale Mahaolu will not check or choose of your behalf.

Application will be rejected if no housing site(s) is selected. If you are offered a unit at a housing site of your choice and you don't accept it, this will be counted as a first refusal at that housing site. After two (2) refusals, your application will be taken off that respective housing site's waiting list. Only one active application per household per site allowed. Each property manages its own waitlist. Must qualify for waitlist placement at time of application.

Project Based Subsidized Units = Resident rent portion determined in accordance with HUD / Rural Development Federal Guidelines. Resident pays approximately 30% of qualified income.

Non Subsidized = No financial rental assistance included. Resident is responsible for the entire monthly amount of rent. HUD Section 8 Housing Vouchers or other rental assistance may be accepted.

SENIORS: (age 62+ unless otherwise noted)	INDIVIDUALS / FAMILIES: (Head of Household age 18+)
<p><i>Project Based Subsidized Units:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> ELUA, Kahului (872-4180)* <input type="checkbox"/> ELIMA, Kahului (893-0002) <input type="checkbox"/> EKOLU, Wailuku (242-4377)* <input type="checkbox"/> EHIKU, Kihei (891-8588)** <input type="checkbox"/> EHA, Makawao (573-1647) <input type="checkbox"/> EONO, Lahaina (661-5957)** <input type="checkbox"/> HOME PUMEHANA, Kaunakakai, Molokai (553-5788)* <input type="checkbox"/> HALE KUPUNA 'O LANAI, Lanai City, Lanai (565-6615)** <p><i>Non Subsidized:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> AKAHI, (age 62+), Kahului (877-0544) <input type="checkbox"/> LOKENANI HALE (age 55+), Wailuku (243-9272) <input type="checkbox"/> EWALU II (age 62+), Pukalani (573-5500) <p>All senior housing properties offer accessible units. Senior housing properties offer studio or one-bedroom units. *Mobility Impaired Under 62 Eligible to Apply **Disabled Under 62 Eligible to Apply</p> <p>Note: Hale Mahaolu Ewalu Phase I (age 62+) –Waitlist managed by the County of Maui Section 8 housing office.</p>	<p><i>Project Based Subsidized Units:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> LAHAINA SURF, Lahaina (661-3771) (1-2-3 br units) <i>(No Mobility Impaired Units)</i> <input type="checkbox"/> LUANA GARDENS, Kahului (871-9009) (1-2-3-4 br units) <p><i>Non Subsidized:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> KOMOHANA HALE, Lahaina (661-5957) (1 br units) <i>(Workforce Housing: must be employed Fulltime (min. 30 hours/wk) in Lahaina or retired from Lahaina business)</i> <input type="checkbox"/> KULAMALU HALE, Pukalani (868-4148) (1-2 br units) <p>Mobility Impaired units offered at above properties unless otherwise noted.</p> <p>Note: All Individual/Family Housing Sites listed above have a No Pet Policy except for permitted service animals or emotional support animals.</p>

**ALL HALE MAHAOLU OWNED AND/OR MANAGED HOUSING SITES
HAVE A NO SMOKING POLICY & DRUG FREE HOUSING POLICY**

Federally Funded/Subsidized Housing Prohibits the Use of Controlled Substances including Medical Marijuana



Optional Information

The information regarding ethnicity and/or race designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Development, that federal laws prohibiting discrimination are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application nor to discriminate against you in any way. However, if you choose not to furnish it, the owner may be required to note the ethnicity and/or race designation of individual applicants on the basis of observation or surname. **Can list multiple household members together if data is identical.**

Household Member	Ethnicity	Race (check as appropriate)
	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino <input type="checkbox"/> Decline to respond	<input type="checkbox"/> White <input type="checkbox"/> Black / African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Native Hawaiian / Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Decline to respond
	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino <input type="checkbox"/> Decline to respond	<input type="checkbox"/> White <input type="checkbox"/> Black / African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Native Hawaiian / Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Decline to respond
	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino <input type="checkbox"/> Decline to respond	<input type="checkbox"/> White <input type="checkbox"/> Black / African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Native Hawaiian / Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Decline to respond

F. Applicant Certification

I certify that the above information is correct to the best of my knowledge; that the unit being applied for will be the permanent residence of the household and agree not to maintain a separate rental unit; that I am not falsifying or withholding any information from HALE MAHAOLU, and I understand that false statements or information may be punishable under Federal Law. **IF HALE MAHAOLU IS UNABLE TO CONTACT ME (US) AT THE ADDRESS PROVIDED, MY (OUR) APPLICATION WILL BE CANCELLED.** I also understand that HALE MAHAOLU assumes NO responsibility for applications NOT received.

I authorize HALE MAHAOLU to obtain and verify information about the income, assets, personal data, and conduct of all persons listed in household.

Signature (Applicant)

Date

Signature (Co-applicant)

Date

To be completed by HALE MAHAOLU

Received by:

Date:

Time:

Signature, Location

Confirmation of Acceptance/Rejection sent by:

Name, Housing Site

Signature

Date

**DELIVER OR MAIL ORIGINAL APPLICATION TO:
HALE MAHAOLU**

200 HINA AVENUE KAHULUI, MAUI, HAWAII 96732

***P:(808) 872-4100 *TDD 1-800-545-1833ext.432**

Original applications may also be delivered to any Hale Mahaolu housing office.

Faxed or Emailed copies will not be accepted.

Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING

This form is to be provided to each applicant for federally assisted housing

Instructions: Optional Contact Person or Organization: You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

Applicant Name:	
Mailing Address:	
Telephone No:	Cell Phone No:
Name of Additional Contact Person or Organization:	
Address:	
Telephone No:	Cell Phone No:
E-Mail Address (if applicable):	
Relationship to Applicant:	
Reason for Contact: (Check all that apply)	
<input type="checkbox"/> Emergency	<input type="checkbox"/> Assist with Recertification Process
<input type="checkbox"/> Unable to contact you	<input type="checkbox"/> Change in lease terms
<input type="checkbox"/> Termination of rental assistance	<input type="checkbox"/> Change in house rules
<input type="checkbox"/> Eviction from unit	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Late payment of rent	
Commitment of Housing Authority or Owner: If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.	
Confidentiality Statement: The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.	
Legal Notification: Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant's application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.	

Check this box if you choose not to provide the contact information.

--	--

Signature of Applicant

Date

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

Privacy Statement: Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.