**FOR OFFICE USE ONLY – DO

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Project Based Rental Assistance (PBRA) Application

(Boynton Terrace)

Thank you for your interest in the Chattanooga Housing Authority's ("CHA") Project Based Rental Assistance (PBRA) Program. You may submit the application to the site you are applying for or at our central office located at 801 North Holtzclaw Avenue, Chattanooga, TN 37404. You must be 18 or older to apply. Please see the CHA's website at www.chahousing.org regarding the status of waiting lists. All of CHA's communities are SMOKE FREE inside buildings and 25 feet from the building.

HEAD OF HOUSEHOLD INFORMATION (All fields required; please print very legibly)

NAME:						
SOCIAL SECURITY NUMBER:						
DATE OF BIRTH:						
GENDER:		Male	Female			
Do <u>you</u> consider yourself as having	a DISABILITY?	Yes	No			
RACE: Black / African Americ White American Indian / Alas Asian Other I do not wish to report						
ETHNICITY - Do you consider yours	self Hispanic?	Yes	No			
CURRENT MAILING ADDRESS:						
Street / Apt #:						
City:	State: Zi _l	o Code:				
HONE NUMBER: ALTERNATE PHONE NUMBER: (if primary line is disconnected)						
EMAIL:	· · · · · · · · · · · · · · · · · · ·					
WHAT IS THE PRIMARY LANGUAGE SPOKEN BY THE HEAD OF HOUSEHOLD?						
AP-0089 EQUAL	HOUSING OPPORTUNITY		Rev. 9/1/2022			

	Male/	Social Security		cluded in the household) Relationship (Spouse,
Name	Female	Number	Date of Birth	Child, Live-In-Aide, etc
Duefenoneses				
Preferences: If vou submit additio	onal documen	<u>tation</u> with your applic	cation, vou mav be gi	ven preference.
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		cumentation other than older) or Near Elderly (a		
		n to be considered soor		riaving tins
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Do you wish to clain	n an Elderly/N	lear Elderly (age 62 &	older/age 50-61) Pre	ference?Yes
•	•		,	
Note: Applicants a	aged 62 and	lear Elderly (age 62 & older will receive the reference, applic	e highest preferenc	ce, applicants
<u>Note:</u> Applicants a aged 50-61 will re	aged 62 and ceive a lowe	older will receive the	e highest preferenc	ce, applicants
Note: Applicants a aged 50-61 will re the lowest prefere	aged 62 and ceive a lowe	older will receive the r preference, applic	e highest preference ants less than age	ce, applicants 50 will receive
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Information Release and Consent to Perform Credit, Background and Reference Checks:

I, the above named individual, hereby authorize the Chattanooga Housing Authority ("CHA") to verify the accuracy of information that I have provided, from the following sources:

Social Security Administration
Veterans Administration
Department of Defense
U.S. Postal Service
Law Enforcement Agencies
Schools and Colleges

Pharmacies

Sources for Child Support & Alimony

Department of Public Welfare

Courts

Financial Institutions

Sources for Annuities/Pensions Landlords: Past and Present Employers: Past and Present

Child Care Providers

Dept. of Employment and Training

I understand that the information, which will be collected by the CHA, is used to manage the housing programs, to protect the public's financial interest and to verify the accuracy of the information submitted. When permitted by law, it may be released to government agencies, other housing authorities and to court or criminal investigators and prosecutors. Otherwise, the information will be kept confidential and used only by the CHA staff in the course of their duties.

I authorize and permit Chattanooga Housing Authority to perform background checks and obtain information about me from credit reporting sources, current and previous landlords, and law enforcement agencies.

I also authorize and give permission for all parties listed to disclose any information requested about me to the rental owner or manager stated above.

By signing below, I hereby give my permission for 3rd parties, including landlord screening services and credit reporting agencies, to release information, subject to the conditions listed above. This authorization is valid for a period of one year from the date noted with signature. I understand that a photocopy of this authorization is as valid as the original.

**Please Note: Completion of this application does not guarantee that you will receive housing. All eligibility criteria must be met for you to qualify and receive housing. You have an ongoing responsibility to update the CHA regarding any change in contact information (address, phone number) and in family composition. Failure to do so can result in your name being removed from the waiting list(s) in which you have applied **

By signing below, you acknowledge you have read, understand, and certify that the information provided herein is complete and accurate to the best of your knowledge. Falsification will be grounds for disqualification from housing.

Head of Household Signature	 Date