



OUTAGAMIE COUNTY HOUSING AUTHORITY

Leasing Division

218 E. Randall Street, Appleton, WI 54911-3600

Phone: (920) 734-5596 Fax: (920) 734-5568

Website: www.outagamiehousing.us

Dear Applicant:

Thank you for considering our rental programs for your possible future tenancy with us. Please read the following before completing the application. If you have any questions, please call our leasing division at (920) 734-5596.

Outagamie County Housing Authority

Outagamie County Housing Authority units are funded by the U.S. Department of Housing and Urban Development (HUD) or Wisconsin Housing and Economic Development Authority (WHEDA) and we, as management, are required to follow the rules and regulations set up by these agencies.

Outagamie County Housing Authority has one, two, and three bedroom units in Appleton, Kimberly, Seymour and Hortonville and four bedroom units in Appleton and Kimberly.

Once We Receive Your Application

Once your application is received by Outagamie County Housing, a preliminary check of income is done to determine eligibility. If your application appears to be income-eligible, your application is put on a waiting list. When a vacancy occurs, we call the names on the waiting list according to Program Regulations. Typically our waiting list has been about one year long but does vary depending on the type of unit and the community the applicant is applying for.

Screening of Applicants

Outagamie County Housing requires reference checks on all applicants to ensure that the buildings will be cared for, the rent will be paid, and that all tenants will have a peaceful, safe, secure, and sanitary living environment. We check the following information for every applicant (whenever possible):

- All information on application
- Credit history
- References from previous landlords
- Criminal checks where allowed by law

Amount of Rent

The amount of rent paid for a unit varies according to income. Income includes social security, wages, pensions, child support or alimony, government assistance such as disability or AFDC payments, etc. Property such as real estate, bank accounts, certificates of deposits, etc., are considered as assets and only the interest is included as income. For elderly households, out of pocket medical expenses may be used as a deduction. The tenant will pay 30% of the adjusted monthly income toward rent and utilities.



Outagamie County Housing Authority supports equal housing opportunities for all persons.

Updated 04/03/2008

Security Deposit

A security deposit equal to the first full month's rent is required at move-in and is refunded at the end of tenancy less charges for damages or unpaid rent.

Governmental Requirements

Each tenant is re-certified at least once a year on the anniversary date of their move-in. The process of verifying income and deductions begins 10-12 weeks ahead of time to allow for the paperwork to be completed. Rent may go up or down according to income changes. Changes in income or family composition must be reported as they occur.

Keeping Your Application Up To Date

You, as the applicant, are responsible for keeping your application up-to-date. If you have a change of address or telephone number, you should notify us by telephone or letter as soon as possible. If you do not notify us of these changes and we are unable to locate you, your application will be removed from our waiting list.

Admission Policy

For more information or to receive a complete copy of our Admission Policy, please do not hesitate to call or write to our office.

Other Available Housing

Outagamie County Housing also owns Glenpark Apartments, a non-subsidized, single and family student housing development near the Fox Valley Technical College. Rent for these units are below market rent to allow residents to attend school to work towards economic self-sufficiency. If you are interested in finding out more about these apartments, please call our Glenpark Housing Director at (920) 731-8793.

Questions?

If you have any questions regarding this application, please contact our Leasing Division at (920) 734-5596.

Thank you.

Income

List all sources of income and assets:

| Household Member Name | Income Source | Monthly Earnings |
|-----------------------|-----------------|------------------|
| | Employment | |
| | Child Support | |
| | Social Security | |
| | S.S.I. | |
| | V.A. Pension | |
| | Pension | |
| | Other | |

| Bank or Agency Name | Type of Asset | Amount | Interest rate |
|---------------------|------------------------|--------|--------------------------------------|
| | Checking | | |
| | Savings | | |
| | Certificate of Deposit | | |
| | Stocks or Bonds | | |
| | Annuity | | |
| | Life Insurance | | |
| | I.R.A. | | |
| | 401k/457 | | |
| | Real Estate | | Fair market value from tax statement |
| | Burial Trust | | |
| | Other | | |
| | | | |
| | | | |

Is the Head of Household (Please check one--for statistical purposes only):

White non-minority African American
 Hispanic Asian
 Native American Other

There is no penalty for persons who do not complete the ethnicity section of this application.

Please answer Yes or No to the following questions:

1. Has your family ever participated in a subsidized housing program? No [] Yes []
If yes, please list the housing authority or landlord's name and address:

2. Has your family ever been evicted from rental housing? No [] Yes []
If yes, please explain: _____
3. Has anyone in your family ever been charged with possession, manufacture or sale of illegal drugs? No [] Yes [] If yes, please explain _____
4. Has anyone in your family ever been convicted of a felony or other criminal act that may bar your admittance to subsidized housing? No [] Yes []
If yes, please explain: _____
5. Has anyone in your family ever been required to register on any Sexual Offender Registry list? No [] Yes [] If Yes, please explain: _____
6. If you are disabled, is your sole disability due to drug addiction or alcoholism? No [] Yes [] Not Applicable []
7. Does anyone in your family require the use of a unit that was specifically designed for wheelchair accessibility? No [] Yes []
8. Has anyone in your family disposed of any assets (gifts of money to children, etc) valued at \$1,000 or more in the past two years? No [] Yes [] If yes, list asset _____ and Cash value of asset _____ and Disposal date of asset _____
9. Have you or any household member sold any real estate in the past two years? No [] Yes []
If yes, Sale date: _____ Sale Price: _____
10. Is there a full or part-time student in your household (other than minor children)? No [] Yes []
If yes, please list who: _____

Please list two people we can call if you can not be reached:

1. Name _____ Relationship _____ Phone No. _____
2. Name _____ Relationship _____ Phone No. _____

Please Read Before Signing

I/We certify that all of the information on this application is true and correct. I/We have no objections to inquiries being made for the purpose of verifying the statements made herein as well as checking my/our credit, landlord reference(s) and criminal history. I/We understand that I/We can be denied housing and can be fined up to \$10,000 or imprisoned up to five years if I/We knowingly furnish false or incomplete information.

Signature of Applicant

Date

Signature of Spouse or
Other Adult Family Member

Date