



1438 Church Street  
Decatur, GA 30030  
404-377-5507

[www.decaturchristiantowers.com](http://www.decaturchristiantowers.com)

**PRELIMINARY APPLICATION**

**OFFICE USE ONLY:** Date Rec'd \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time Rec'd \_\_\_\_\_ Unit Size Needed: \_\_\_\_\_ Rec'd by \_\_\_\_\_

1. List each person who would live with you if you received housing. (Start with yourself. If necessary, use additional sheets.)

Last Name	First Name	Date of Birth (mm/dd/yyyy)	Sex	Relationship	Social Security Number	Annual Income	Student full or part-time
				Head of Household			

2. Does anyone live with you now who is not listed above?  Yes  No
3. Do you expect any changes in your household composition?  Yes  No
4. If you answered YES to either #2 or #3 above, please explain: \_\_\_\_\_  
\_\_\_\_\_
5. Current street address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Apartment Number: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Alt. Telephone: \_\_\_\_\_ Email: \_\_\_\_\_
6. Do you or any household member need an accessible unit or accessible features?  Yes  No
7. If you answered YES to #6 above, please explain: \_\_\_\_\_  
\_\_\_\_\_
8. Are you currently receiving Section 8 Assistance?  Yes  No
9. What is/are your source/s of income?  Employment  Unemployment  Child Support  Social Security  SSI  
 Recurring Gift  Other: \_\_\_\_\_
10. Have you or any member of your household ever been evicted?  Yes  No
11. If you answered YES to #9 above, please explain: \_\_\_\_\_  
\_\_\_\_\_

**APPLICANT CERTIFICATION:** I certify that the statements made on this pre-application are true and complete to the best of my knowledge and belief. I understand that providing false statements or incomplete information may result in punishment under Federal law.

\_\_\_\_\_  
Head of Household (Signature)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Spouse or Co-Head (Signature)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Management Agent (Signature)

\_\_\_\_\_  
Date Signed

PENALTIES FOR MISUSING THIS CONSENT: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a)(6),(7) and (8). Violations of these provisions are cited as violations of 42 USC 408 (a)(6),(7) and (8)



*This property does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.*  
504 Coordinator: Santasha Harvey 1438 Church Street, Decatur, GA 30030, Telephone: 404.377.5507, TTY: 800.255.0056

