NEIGHBORS OF WATERTOWN, INC.

A Neighborhood Preservation Company
Serving Watertown Since 1969

Initial Preliminary Application

PLEASE PRINT CLEARLY. THIS FORM MUST BE COMPLETED IN INK. To properly assist you, WE MUST HAVE ACCURATE AND CURRENT INFORMATION. ALL questions must be answered. If the question does not apply, write "N/A" or "NONE". Failure to answer all questions may delay your interview and/or eligibility determination. Any mis-representation of information related to eligibility or family composition is grounds for rejection. Additionally, you should be aware that Section 1001 of Title 18 of the U.S, Code makes it a criminal offense to make willful, false statements or mis-representations of any material fact involving the use of or obtaining federal funds. All information is kept confidential.

MAILING ADDRESS:_____
Number Street Apt # City State Zip Code

Home phone: _____ Work: _____ Cell: _____

Email: _____

ABOUT YOUR FAMILY: List each member, including yourself, that will be living in your household.

	LAST NAME	FIRST NAME	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX M / F	DATE OF BIRTH	FULL TIME STUDENT? Y / N / NA	RECEIVING INCOME? Y / N
1			HEAD				
2							
3							
4							
5							
6							

OTHER HOUSEHOLD INFORMATION:

Ethnicity: (select only one)		**Race:** (select one or more)	
		☐	American Indian/Alaska Native
☐	Hispanic or Latino	☐	Asian
		☐	Black / African American
☐	Not Hispanic or Latino	☐	Native Hawaiian/Pacific Islander
		☐	White

Do you or any member of your household have a disability that requires any of the following (check all that apply):
Unit for Hearing impaired _____**Unit for visually impaired**_____ **Wheelchair accessible unit** _____

Does your household meet the definition of homeless? **(family lacks a fixed regular and adequate night time residence, or has a primary night time residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations, such as welfare voucher hotels, congregate shelters or transitional housing designed for homeless persons, or a public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings)**
_____ Yes _____ No

EQUAL HOUSING OPPORTUNITY

The Housing & Redevelopment Store
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