FIELD ESTATES



HURON HOUSING & REDEVELOPMENT AUTHORITY

255 IOWA AVENUE S.E. PO BOX 283 HURON, SOUTH DAKOTA 57350 (605) 352-1520

APPLICATION FOR OCCUPANCY

			For Office	Use Only:
			Date:	
			Time:	
HEAD OF HOUSEHOLD:				
LEGAL NAME:				
PRESENT ADDRESS:				
TELEPHONE – HOME:	CELL:		WORK:	
E-MAIL ADDRESS:				
PRIOR ADDRESS:				
How long have you lived at preser	nt address?			
How long have you lived at prior a	ddress?			
PLEASE LIST ALL HOUSEHOLD Name			T: Date of Birth	US Citizen
Name	Relationship	Social Security No.	Date of Birth	(Yes / No)
	HEAD			

EMPLOYMENT:					
YOU:					
Employer Name:	Pho	Phone No:			
Employer Address:					
		City	State	Zip	
Position:		Length of time	employed:		
OTHER HOUSEHOLD MEMB	BER:				
Employer Name:		Phor	Phone No:		
Employer Address:	· · · · · · · · · · · · · · · · · · ·			<u>-</u>	
		City		·	
Position:		Length of time	Length of time employed:		
BANK REFERNCE:					
Bank Name:					
Address:					
		City	State	Zip	
LANDLORD REFERENCES:					
Name	Address	Erom	Dates	То	
ivanie	Address	From		10	
PERSONAL REFERENCES:					
Name	Address		Telephone		
Name Audless					

N THE EVENT OF AN EMERGENCT, WHO DO WE NOTIFT!
Name:
Relationship:
Address: City State Zip
Telephone:
UNIT SELECTION:
Are you interested in a 2-Bedroom/1 Bath unit?
Are you interested in a 2-Bedroom/2 Bath unit?
Are you interested in a 3-Bedroom/2 Bath One Story unit?
Are you interested in a 3-Bedroom/2 Bath Two Story unit?
Are you interested in renting an additional detached garage? Yes No
Do you have an animal that will reside with you in the unit? Yes No Failure to disclose an animal in the unit will result in a fine and possible eviction.)
Have you or any other household member ever been charged with a crime in any local, state, or federal urisdiction? Yes No
f so, please explain the charge(s), date(s) of such charge(s), and resulting outcome of such charge(s).
APPLICATIONS WILL BE PROCESSED BASED ON THE DATE AND TIME RECEIVED:
f you are interested in reserving a unit, we require a deposit equal to one month's rent. Your deposit will be applied as your security deposit under the Lease and is returned at the time you vacate the apartment, less any charges for damages to the apartment. IN THE EVENT YOU DECIDE NOT TO LEASE THE UNIT, THE DEPOSIT IS NON-REFUNDABLE. The first month's rent is due at the time you sign your lease.

All applicants will be interviewed and screened by Housing Authority staff before acceptance. The following screening criterion will be applied uniformly to all applicants and will form the basis of final acceptance of this Application:

- 1 Prior landlord references.
- 2 Personal references.
- 3 Financial institution references.
- 4 Employer references.
- 5 Criminal history of all household members 18 or older.

The Huron Housing Authority does not discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin. The Huron Housing & Redevelopment Authority is an equal housing opportunity provider and employer.

Signature of Head of Household	Date

AUTHORIZATION TO FURNISH/RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I hereby authorize any person, agency, or institution to release information requested by the Huron Housing & Redevelopment Authority, concerning me or my family. This authorization includes allowing any duly authorized representative of the Huron Housing & Redevelopment Authority to inspect and reproduce records pertaining to me or my family.

I herewith release any person, agency, or institution from any and all liability to me or my family for supplying such information.

Printed Name of Head of Household	
Signature of Head of Household	
State(s) of Residency in Past 3 Years	Date
Printed Name of Other Household Member over 18	
Signature of Other Household Member over 18	
State(s) of Residency in Past 3 Years	Date
Printed Name of Other Household Member over 18	
Signature of Other Household Member over 18	
State(s) of Residency in Past 3 Years	Date