

**Mail this application to:**

**The name of the waitlist I'm applying for is:** \_\_\_\_\_

*Some waitlists are closed: Before sending this application, check <http://www.housingworks.net/> to see what is open*

You **must** answer every question on this application: respond to questions that are not applicable by writing "N/A".  
**Incomplete applications may be returned or discarded.**

**Name of HoH:** \_\_\_\_\_

**Long-Term Mailing Address** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_  
(this address should ideally work for the next 3-5 years):

**Phone(s):** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Email:** \_\_\_\_\_

The **SSN** for the head of household is: \_\_\_\_\_

Does the HoH have a **Social Security Number (SSN)**? ☐ Yes ☐ No *If "Yes" you must provide it above).*

What is your **date of birth**? \_\_\_\_\_ What is your **gender**? \_\_\_\_\_

**Race** (white, black, asian, etc)? \_\_\_\_\_

What was your **mother's last name** when she was born? *Protects your privacy*) \_\_\_\_\_

**How many people** will be living in the unit? \_\_\_\_\_ people. What **unit size** are you seeking? \_\_\_\_\_ BR

Describe your **Income Sources** (Job, Food Stamps, SSI, TAFDC, etc.) \_\_\_\_\_

What is your family's **ANNUAL** income? \$ \_\_\_\_\_ (do NOT write an hourly, weekly, or monthly amount!)

☐ YES ☐ NO Do you have a **rental voucher** or **some other form of regular rental assistance**?

**Specify:** ☐ Section 8 ☐ MRVP ☐ AHVP ☐ Homebase ☐ \_\_\_\_\_

☐ YES ☐ NO Do you need a **wheelchair accessible unit** (or a "no-steps" unit)?

☐ YES ☐ NO Do you need **reasonable accommodations** due to a disability, either during the application period or tenancy? \_\_\_\_\_

☐ YES ☐ NO Are you or any member of your household subject to a lifetime registration requirement under a **State Sex Offender Registration** program?

☐ YES ☐ NO **Priority/Preference Status:** If there is a section in this application that asks about priorities and preferences, did you claim any?

**Office Only: Date/Time Stamp**



P. Curtis Hiebert  
Executive Director

# Keene Housing Authority

*Providing affordable housing in the Monadnock Region.*

105 Castle Street Keene, NH 03431  
Phone & TDD: (603) 352-6161  
Fax: (603) 352-6845

*you keep this*

TO: APPLICANTS FOR HOUSING ASSISTANCE

FROM: KEENE HOUSING AUTHORITY STAFF

RE: APPLICATION PROCEDURES

The Keene Housing Authority manages more than three hundred apartments. Also, it provides rental assistance payments for another three hundred apartments owned by private landlords or nonprofit organizations. In addition, it manages a waiting list for housing which has the names of several hundred individuals or families, most of whom have serious housing problems. Increasing federal regulations during the past five years have increased the workload; at the same time, federal budget cutbacks have prevented the Authority from increasing its staff. We dedicate our time to providing housing assistance, while minimizing the bureaucratic maze for families who already have difficulties. To that end, this memo is intended to explain our application procedures and to ask for your cooperation.

APPLICATION TIMES: You may apply for housing assistance by coming to the Housing Authority for a personal interview on

TUESDAY AFTERNOONS BETWEEN 1:00 PM AND 3:00 PM  
THURSDAY MORNINGS BETWEEN 9:00 AM AND 11:00 PM  
AM

Applications will be taken in the order of arrival. If you work or attend school and are unable to come at regularly scheduled times, you may call to make an appointment. In most cases, it will be to your advantage to come on the schedule above because you will get an earlier application date.

APPLICATION INFORMATION: In order to file an application for housing, you will need to provide the following information:

1. Your name, address and phone number where you can be reached
2. Names and dates of birth for all persons in your household
3. Copies of social security cards for all household members over the age of six (6)

If this occurs, we will remove your name from the waiting list, and you will need to re-apply and obtain a new date of application on the waiting list.

The Keene Housing Authority is an organization established to provide decent, safe and sanitary affordable housing opportunities to low and moderate income families in Keene. It is not a department of the City of Keene, but works closely with the City for the benefit of the individuals and families it serves. Funding for Authority projects and operations comes from the U.S. Department of Housing and Urban Development (HUD) and from the rents paid by tenants in its properties. It administers its housing programs in accordance with rules and procedures established by HUD and other government agencies.

#### HOUSING PROGRAMS OFFERED BY THE AUTHORITY:

Public Housing:	Bennett Block-	14 apartments for elderly and disabled
	Harper Acres-	112 apartments for elderly and disabled
	Harmony Lane-	37 2 & 3 bedroom apartments for families
	North & Gilsum St.-	29 3 & 4 bedroom apartments for families
	Scattered Sites-	25 apartments

#### Section Eight New Construction:

Central Square Terrace-	90 apartments for elderly and disabled
Meadow Road-	18 2 & 3 bedroom apartments for families

Section Eight Existing Program: Subsidies for about 300 families and elderly, handicapped and disabled persons, in apartments which are owned by private landlords or non-profit housing organizations.

RENTS: Rents (including heat, hot water and electricity) in all Housing Authority programs are established at 30% of the tenant's gross monthly income. Rents are re-evaluated at least once each year for each tenant, and may change during the year if the tenant experiences a change in income.

ELIGIBILITY: Each year HUD publishes the income limits for low and moderate income households, which are used by the Authority to establish eligibility.

*You keep this*

# SUBSIDIZED APARTMENTS IN CHESHIRE COUNTY

Hinsdale	Post Office Square	10-family	Community Resource Group 16 Church Street Keene, NH 03431 352-8329
	Todd Block	20-Elderly	
	Rolling Hills Village	60-Elderly	
Jaffrey	Gilmore Court	28-Elderly	SK Management Co Inc. PO Box 250 New Ipswich, NH 03071 878-2400
	Village of Jaffrey	44-Elderly/ Family	EastPoint Properties PO Box 4190 Manchester, NH 03108 669-8551
Keene	Harper Acres	112-Elderly	Keene Housing Authority 105 Castle Street Keene, NH 03431 352-6161
	Bennett Block	14-Elderly	
	Central Square Terrace	90 Elderly	
	Harmony Lane	38-Family	
	North & Gilsum Street	29-Family	
	Scattered Sites	25-Family	
	Meadow Road	18-Family	
	Autumn Leaf Village Cleveland Building	56-Elderly 75-Elderly	EJL Management (See above)
Marlborough	Cheshire Homes Ashbrook	75-Family 24-Family/ Elderly	Cheshire Homes, Inc 245 Pearl Street Keene, NH 03431 352-5459
	Pierce Elderly Housing	32-Elderly	THM, Inc. RR#1 Box 1115 Manchester Ctr., VT 05255 802-362-4662
Swanzey	Affordable Housing at Riverbend	24-Family	Keene Housing Authority (See above)
	Ashuelot River Apartments	40-Elderly	Stewart Property Management PO Box 10540 Bedford, NH 03110-0540 641-2163
	Winchester Wood	36-Family	
	Waterview	24-Elderly	EJL Management (See above)



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## LANDLORD REFERENCES

Please complete this sheet, listing all of the places you have lived during the past three years, even if you did not rent during that period. Complete landlord names and addresses are required because references are requested by mail. Landlord phone numbers are helpful if you have them.

If you are too young to have rented or if you have owned your own home in the past three years, use the landlord spaces to list three references who can comment on your ability to comply with the terms of a rental lease and the kind of neighbor you would be. Clergy, neighbors, teachers and employers are examples of references you could use. In the past, the Housing Authority has found that relatives and counselors usually provide only favorable information about applicants because of loyalty or obligations of confidentiality. Housing Authority staff accept and consider all information from these sources. However, your application will not be considered complete unless you have provided independent references as well.

\*\*\*\*\*

Your Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_

Dates of Residency: From: \_\_\_\_\_ to Present

Landlord's Name: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

Why do you want to move? \_\_\_\_\_

Are you rent payments current? \_\_\_\_\_

If not, please explain: \_\_\_\_\_

\*\*\*\*\*

Application Date \_\_\_\_/\_\_\_\_/\_\_\_\_    ☐ Public Housing                      ☐ Section Eight New Construction  
   ☐ Riverbend                                  ☐ Section 8 Existing  
   ☐ Other    ☐ Welfare to Work Voucher Program

Residence \_\_\_\_\_

### FAMILY COMPOSITION

(See other side for additional household members)

## INCOME

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Income Total \_\_\_\_\_

**ASSETS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Divested \_\_\_\_/\_\_\_\_/\_\_\_\_ Current imputed rate = .024.

### ELIGIBILITY DETERMINATION

\$ \_\_\_\_\_ Income for eligibility  
\$ \_\_\_\_\_ Low income limit Eligible? \_\_\_\_\_  
\$ \_\_\_\_\_ Very low income limit Eligible? \_\_\_\_\_

### SECTION 8 INFORMATION

If you are now renting an apartment, would you like to stay there? \_\_\_\_\_ # Bedrooms \_\_\_\_\_  
Landlord: \_\_\_\_\_ Is it decent safe and sanitary? \_\_\_\_\_  
Monthly costs: Rent \$ \_\_\_\_\_ Utilities \$ \_\_\_\_\_

### BACKGROUND INFORMATION

- ❖ How long at current address? \_\_\_\_\_ Is your present housing appropriate for you're needs, If not why? \_\_\_\_\_
- ❖ If you are assisted by local agencies, what are they and who are your contacts? \_\_\_\_\_
- ❖ If you have ever received rental assistance through a Section Eight program or a Housing Authority, state where and when: \_\_\_\_\_
- ❖ Did you owe any rent or damage fees when you left? \_\_\_\_\_ Paid? \_\_\_\_\_
- ❖ Are any of the household members full time students, or have been full time students at an educational institution with regular faculty and students? Yes No
- ❖ Where have you been employed in the past year? \_\_\_\_\_
- ❖ Do you or members of your household have any criminal record? \_\_\_\_\_
- ❖ If you have friends or relatives in KHA housing, who are they? \_\_\_\_\_

### FOR ELIGIBILITY PURPOSES ONLY

- ❖ Do you or any member of your household require a barrier free or accessible unit? \_\_\_\_\_

### PLACEMENT

- ❖ Is there a need for any family member to use a chairlift? \_\_\_\_\_
- ❖ Does any family member require a live-in aide? \_\_\_\_\_
- ❖ Do you have pets? \_\_\_\_\_
- ❖ Do you have a car? \_\_\_\_\_
- ❖ Do you have a preference among the programs for which you are eligible? \_\_\_\_\_
- ❖ How many bedrooms does your household require? \_\_\_\_\_

\*\*\*\*\*

**CERTIFICATION**

I CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT I CAN BE FINED UP TO \$10,000, OR IMPRISONED UP TO FIVE YEARS, OR LOSE THE SUBSIDY HUD PAYS AND HAVE MY RENT INCREASED IF I FURNISH FALSE OR INCOMPLETE INFORMATION.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Interviewer : \_\_\_\_\_ Comments: \_\_\_\_\_

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Approved: \_\_\_\_\_  
(Reviewer's comment)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

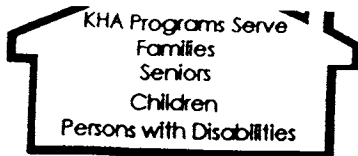
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## REQUIRED VERIFICATIONS AND INFORMATION

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

At the time of your application for housing assistance you could not provide the following verifications and information. We cannot complete your application until you provide these. Please bring or mail the following items to this office at your earliest convenience. However, if we do not receive the required verifications within sixty (60) days from this date, your application will not be processed and your name will not be placed on the waiting list for housing assistance.

Please provide the following verifications or information checked below:

- ☐ Court order concerning \_\_\_\_\_.
- ☒ Copies of Social Security cards for all those in your household over the age of five (5).
- ☐ Employer's complete names and addresses.
- ☐ Bank or asset holder's complete address and account numbers.
- ☒ Landlord's name, complete addresses and dates of occupancy.
- ☐ Complete names, addresses and account numbers for pensions or compensations.
- ☐ Child support verification.
- ☐ Rent receipts or cancelled checks.
- ☐ Property value.
- ☐ Divestiture.
- ☐ Pregnancy verification.
- ☒ Forms signed and returned (Application, Consent of Release, Citizenship Status Form). *lead based form*
- ☐ Others as listed below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Initial \_\_\_\_\_

# SHELTER'S

*you keep this*

SHELTER	TOWN	PHONE#	CAPACITY
MONADNOCK AREA HOUSING	KEENE	357-1654	ALL
SULLIVAN HOUSING COALITION	SULLIAVN	542-6502	ALL
JAFFERY MINI SHELTER	JAFFREY	532-4866	ALL
MY FRIEND'S PLACE	DOVER	749-3017	ALL
CROSSROAD'S	PORTSMOUTH	433-4190	ALL
MCKENNA HOUSE	CONCORD	228-3505	M & F
FRIEND'S PROGRAM	CONCORD	228-1462	FAMILIES
FRANKLIN SHELTER	FRANKLIN	934-3401	FAMLIES
HARBOR HOMES	NASHUA	881-8797	ALL
NEW HORIZON'S	MANCHESTER	668-8778	M & F
PETERBROUGH SHELTER	PETERBROUGH	924-8050	ALL
HELPING HANDS	MANCHESTER	623-8778	M
HEADREST	LEBANON	448-4400	M & F
PEMI-BRIDGE	PLYMOUTH	536-7631	
LYSEY HOUSE	LANCHESTER	788-2344	
SALVATION ARMY	LACONIA	524-8086	
OPEN ARMS	LACONIA	542-4580	
MORNINGSIDE SHELTER	BRATT VT.	1-802-257-0066	ALL
UPPER VALLEY HAVEN	WHITE RIVER VT.	1-802-295-6500	F & F
COTS SHELTER	BURLINGTON VT.	1-802-864-7402	FAMILIES
OPEN DOOR MISSION	RUTLAND VT.	1-802-775-5661	M

## Housing History, Page 1

**Note: you can often locate landlord information by using the Tax Assessor's website in each town (or by calling the Tax Assessor's phone number in most towns):** To determine if there is an online Tax Assessor page for a town search the web like this: "Tax Assessor, Boston MA" or "Property Assessment, Dallas TX".

### CURRENT RESIDENCE

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to: \_\_\_\_\_ or present

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### PRIOR RESIDENCE

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

## Housing History, Page 2

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

## Housing History, Page 3

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

### RESIDENCE BEFORE THAT

### DATES YOU LIVED THERE:

Name on the lease \_\_\_\_\_ to \_\_\_\_\_

Address you lived at: \_\_\_\_\_  
Street and Apt# City State Zip

Landlord's Name and Address \_\_\_\_\_

Landlord Tel: \_\_\_\_\_

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A