






# PRELIMINARY APPLICATION AND PERSONAL DECLARATION

## Instructions – Keep this page for future reference

*The Lawrence-Douglas County Housing Authority (LDCHA) application process has two (2) steps:*

1. **Preliminary Application:** Complete the attached forms for placement on any or all LDCHA waiting lists.
  -  **GENERAL HOUSING** - LDCHA rental units and/or assistance to rent from private landlords. The LDCHA does **not** have separate waiting lists for public housing units or Section 8 Housing Choice Vouchers. These housing programs are filled through the General Housing waiting list.
  -  **SENIOR HOUSING** - LDCHA rental units for elderly residents at Babcock Place and Peterson Acres.
  -  **HOMELESS TRANSITIONAL HOUSING** - Temporary rent assistance for homeless families with certification of homelessness from a local shelter, law enforcement or support service agency.
  -  **Bert Nash CSS Transitional Housing** – Temporary rent assistance for persons referred by the Bert Nash Community Support Services program.
  -  **Clinton Place Apartments** – One bedroom subsidized apartments for elderly.

### *To apply for housing with the LDCHA:*

- β Fill out the attached preliminary application packet consisting of:
  1. **LDCHA Preliminary Application Form**
  2. **HUD form-9886, Privacy Act**
  3. **LDCHA Release of Information**
- β Leave no blank spaces.
- β If a question does not apply to any member of your household write N/A on the form.
- β Double check to make sure your preliminary application is complete, all forms signed and dated.
- β Attach copies of Social Security Cards and Identification Cards and Birth Certificates for all members of the household. Original Social Security and Identification Cards will be reviewed at the Housing Interview.
- β Deliver your completed forms to:

**1600 Haskell Avenue  
Lawrence, KS 66044 OR  
1700 Massachusetts St.  
Lawrence, KS 66044 OR  
2125 Clinton Parkway  
Lawrence, KS 66046  
[housing@ldcha.org](mailto:housing@ldcha.org)**

You will be notified of your placement on the waiting list within 15 days of the date your complete **Preliminary Application Form** is received at the LDCHA. Incomplete or unsigned application forms will be returned to you. All information provided as part of an application will be verified. Withholding information or giving false, misleading, or incomplete information will be grounds for denial of housing through the LDCHA.

2. **Housing Interview and Application:** Shortly before housing is available you will be invited to a Housing Interview. It is important that you bring all the required documents to the interview. At the interview LDCHA staff will discuss your housing needs and options, go over your application and collect the information needed to determine final housing eligibility, resident suitability and total household income. You will be asked to provide detailed information on all members of your household, verify citizenship status, report current income and expense information, and provide information about where all adult household members have lived for the past three years. If you do not come to the Housing Interview you will be dropped from the waiting list. **You will not be offered housing until you complete a Housing Interview and the LDCHA determines you meet eligibility criteria.**

Persons with disabilities who need assistance completing this preliminary application may request reasonable accommodation under the LDCHA Reasonable Accommodation Policy. A reasonable accommodation request form can be obtained from the LDCHA offices at 1600 Haskell Avenue or 1700 Massachusetts. Contact the housing authority at 785-842-8110 if you need more information about applying for housing assistance.

NOTE TO APPLICANT: If you believe you have been discriminated against, you may call the Fair Housing and Equal Opportunity National Toll – Free Hot Line (800) 424 – 8590.

## LDCHA Resource Page

Visit Us on the web at [WWW.ldcha.org](http://WWW.ldcha.org) for more information about the housing authority. The following is a list of other community resources.

**BALLARD COMMUNITY CENTER 842-0729** Child care, emergency food, utility assistance and other assistance.

**ECKAN 841-3357** Assistance with rent and utilities, home weatherization, food pantry, clothing, seasonal gift baskets, and referrals to other services and assistance sources in the county.

**SRS 832-3700** Adult and Child in Need of Care services, and Adult and Child Protective Services, income assistance, food stamps and medical cards, child support enforcement, job training and assistance, and income eligible child care.

**THE LEO CENTER 832-1845** A collective of service providers, including the Heartland Medical Clinic, the Lawrence Association of Evangelicals Food Pantry, Marriage and Family Counselors (for Christ centered therapy), and Continuing Education classes including, parenting, job readiness, vocational training and Christian 12-Step programs.

**PELATHE CENTER OF LAWRENCE 841-7202** A multicultural social service agency offering services to enhance and protect family unity. Legal aid, emergency assistance, counseling, crisis intervention, support groups, youth development, social outreach, food pantry and transitional housing.

**PENN HOUSE 842-0440** Services for low-income families including: clothing, emergency medical and food needs, utilities, household and furniture items and a stress support group.

**SALVATION ARMY 843-4188** Crisis intervention services, emergency food, clothing, referral and advocacy, overnight shelter for homeless individuals. A light meal is served and shower and laundry facilities are available. A Feeding Program provides well-balanced nutritional meals to homeless and low income individuals and families. The Vision USA program provides assistance with eye exams and glasses, as well as limited assistance with prescription medication.

**HEADQUARTERS 841-2345 24 hour hotline.** Answers to questions about personal concerns, information about helping services, and referral and assistance contacting those services. Individuals needing help but who are unsure where to begin are encouraged to contact the center.

**BERT NASH MENTAL HEALTH CENTER 843-9192** Homeless Outreach Specialist to assist people with mental illness in locating housing or transitional housing, free and confidential mental health crisis line. Outpatient mental health services for children, adolescents and adults: therapy, psychological testing, screening, attendant care, crisis intervention, evaluations, referrals and educational program

**COMMUNITY DROP-IN CENTER 832-8864** A place for homeless people to drop in and relax, read the paper, have snacks and socialize. A goal of the center is assisting individuals with obtaining employment and housing. M-F 8:30-noon

**JUBILEE CAFE 843-8202** Provides breakfast in the parish hall of Trinity Episcopal Church. Volunteers take orders from the day's menu and serve participants. Tues. & Fri. 7-8:15 am

**L.I.N.K. FIRST CHRISTIAN CHURCH 331-3663** Free, hot lunch. Tue, Thurs. Sat. and Sun. 1:30-2:30 pm

**WOMEN'S TRANSITIONAL CARE SERVICES 843-3333** An emergency shelter for women and their children who are in abusive situations. The location is confidential, so an advocate meets with clients and transports them to the shelter. Once at the shelter, clients may participate in counseling and support groups for both them and their children. There is a thirty day limit on shelter stay, but extensions may be requested.

**CATHOLIC COMMUNITY SERVICES, INC. 841-0307** Counseling: marital, family, individual (children and adults) on a sliding payment scale.

**ALCOHOLICS ANONYMOUS 842-0110** Assistance through mutual support and fellowship for those who desire to stop drinking and/or maintain sobriety.

**DCCCA 841-4138** Outpatient intervention, assessment and treatment for individuals and families where the abuse of alcohol and other drugs has become a problem; individual and group options are available. Court evaluations for DUI, criminal charges and child custody disputes. Support groups for recovering individuals and their families are offered.

**FIRST STEP HOUSE 843-9262** A residential licensed drug treatment center providing reintegration services for women recovering from chemical dependency. Call for admissions details.

**HEARTHSTONE 749-5409** A residential center providing reintegration services for men recovering from chemical dependency. Call for admissions details.

**LAWRENCE ALANO SOCIETY 841-1992** A place for people in recovery to relax, socialize and discuss recovery-related topics. Groups M-F at noon and 7 pm as well as weekends (hours vary).

**NARCOTICS ANONYMOUS 749-6631** Hot line support and referral services for individuals and families dealing with drug addiction.

**DOUGLAS COUNTY AIDS PROJECT 843-0040** Advocacy for those with HIV/AIDS in applying for benefits and programs, transportation, assistance with living needs and social interaction, emotional support, financial assistance for medical needs, case management, referrals, information and education.

**HASKELL INDIAN HEALTH CENTER 843-3750 2415** General Clinic: mental health, chemical abuse, and social services. Special clinics: well baby clinic, immunizations, vision screenings, diabetic clinic and eye appointments.

**HEALTH CARE ACCESS 841-5760** A primary care clinic. Referrals to dentists and assistance with purchase of medication may also be available.

**LAWRENCE-DOUGLAS CO. HEALTH DEPARTMENT 843-0721** Family planning clinic (including exams, birth control and pregnancy tests), diagnosis and treatment of sexually transmitted diseases, HIV antibody testing, HIV-AIDS education and counseling, vaccines, Well Baby clinics and special health screenings for the elderly.

**DOUGLAS CO. DENTAL CLINIC 312-7770** Patients must live in Douglas County and earn less than twice the poverty level. The clinic charges \$15 per visit and other costs are on a sliding scale.

**HEARTLAND COMMUNITY CLINIC 832-1845** Free discounted medical care, spiritual encouragement and social agency referrals to those in need without regard to socio-economic status, race, gender, age, religion, nationality or disability.

**BOYS AND GIRLS CLUB OF LAWRENCE 841-5672** Programs and activities in six Core Service Areas: Character and Leadership Development, Education and Career Development, Health and Life Skills, the Arts, Sports, Fitness and Recreation.

**DOUGLAS CO. CHILD DEVELOPMENT ASSOCIATION 842-9679** Referral services for providers, offers training for childcare providers and information about scholarships that are available for parents going back to school.

**EARLY CHILDHOOD EDUCATION 832-5962, ext.24** Lawrence Public Schools offer three programs: Parents as Teachers, Even Start Family Literacy and Readiness Preschool. Call for details about each program.

**MOTHER TO MOTHER 841-0838** Builds teams of moms who support each other by sharing goals, values and ideas about parenting and promoting growth in children. They also offer a support group for dads entitled, "Dad's Time."

**PARENT INFO LINE 841-2345** Operated through the Headquarters Counseling Center. They provide information and referrals to area agencies dealing with children and parenting issues.

**WOMEN INFANTS AND CHILDREN (WIC) 843-0721** Food, nutritional and health assistance to pregnant women and children under 5.

**COTTONWOOD, INC. 842-0550** A community based, non-profit organization with the mission of helping people with disabilities shape their own future. They provide residential services, work services, employment services/joblink, support services, retirement services and life enrichment services.

**FULL CITIZENSHIP 749-0603** Helps individuals with disabilities and their families to work toward a successful transition to independent life through job readiness training, job placement, post employment services and intensive case management.

**HEARTLAND WORKS 840-9675** Training and employment assistance.

**INDEPENDENCE, INC. 841-0333** Services for those with disabilities, including: advocacy, information and referrals, independent living skills training, peer counseling, benefits assistance, assistance technology, computer training, personal care attendant management, accessible housing program, community education, resource library and home and community based waiver services.

**TRINITY RESPITE CARE, INC. 842-3159** Respite and attendant care to individuals with disabilities and older adults.

**LAWRENCE WORKFORCE CENTER 840-9675** Office Training and Assessment Program, and Job Success program, intake interviews and assessments, computer, customer services and employment skills training, and employment assistance.

**EDUCATIONAL OPPORTUNITY CENTER 1-888-320-4097** Free assistance and information to adults who seek to enter or continue in an educational program beyond high school or the GED.

**LAWRENCE CONTINUING EDUCATION 832-5097** Classes including but not limited to, computer and foreign languages, swimming and private pilot ground school for those wishing to continue their education.

**ADULT LEARNING CENTER 832-5960, ext.12** GED classes and assessments, basic skills for employment and help with setting your educational goals.

**HABITAT FOR HUMANITY 832-0777** Develops communities with people in need by building and renovating houses.

**TENANTS TO HOMEOWNERS, INC. 842-5494** Affordable renovated, rehabilitated, or new housing to low to moderate income residents who do not otherwise qualify for a traditional home loans.

**HOUSING AND CREDIT COUNSELING INC. 749-4224** A private, non-profit community service agency for people who need help with money problems.

**NEIGHBORHOOD RESOURCES OFFICE 832-3100** Building inspections of rental property.

**LEGAL AID OF DOUGLAS COUNTY 864-5564** Free legal services to Douglas County residents who qualify, including: domestic relations (divorce, child custody), landlord/tenant relations, juvenile and misdemeanors.

Revised 4/07/04

**LDCHA PRELIMINARY APPLICATION and PERSONAL DECLARATION**  
**PRINT OR TYPE WITH INK – FILL IN ALL BLANKS – SIGN AND DATE BACK OF FORM**

**PLEASE MARK THE TYPE OF HOUSING YOU WANT:**

- GENERAL HOUSING (LDCHA rental units and/or assistance to rent from private landlords.)**
- SENIOR HOUSING (LDCHA rental units at Babcock Place and Peterson Acres dedicated to elderly residents.)**
- HOMELESS TRANSITIONAL HOUSING (Temporary rent assistance for homeless families with certification of homelessness from a local shelter, law enforcement or support service agency.)**
- BERT NASH CSS TRANSITIONAL HOUSING (Temporary rent assistance for persons referred by the Bert Nash CSS program.)**
- CLINTON PLACE APARTMENTS (One bedroom apartments for elderly.)**

Applicants are considered for housing without regard to race, sex, religion, color, national origin, age, ancestry, marital status, sexual orientation and/or disability. To help us comply with Federal, State and local record keeping and reporting requirements, please provide the information requested for each household member. This information is needed for statistical purposes. Thank you.

**Head of Household Information:**

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Other Contact: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place: \_\_\_\_\_

Sex	Race	Ethnicity	Marital Status	Citizenship

Race: White; Black/African American; American Indian/Alaskan Native; Asian; Native Hawaiian/Pacific Islander; Mixed Ethnicity: Hispanic/Latino; Not Hispanic/Latino

If not a U.S. citizen, Immigration status and Alien Registration Number: \_\_\_\_\_  
 Require wheelchair or other accessibility features:  Yes  No  
 Require live-in attendant care:  Yes  No Attendant's Name: \_\_\_\_\_

**Spouse/Other Adult:**

Name: \_\_\_\_\_ Relation to Head of Household: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place: \_\_\_\_\_

Sex	Race	Ethnicity	Marital Status	Citizenship

If not a U.S. citizen, Immigration status and Alien Registration Number: \_\_\_\_\_  
 Require wheelchair or other accessibility features:  Yes  No  
 Require live-in attendant care:  Yes  No Attendant's Name: \_\_\_\_\_

**Other Household Members – (Attach additional page if needed):**

Name – Last, First, Middle	Sex	Relation to Head of Household	Race	Ethnicity	Social Security Number	Date of Birth	Place of Birth

**Name & Address of parents not listed above for each minor in the household:** \_\_\_\_\_

**Sources of Income**

For all people in the household, list each type of income, the address of the source of the income, and the monthly gross amount before any deductions. Income is money from any source received in the form of checks, cash, or credit toward an account.

SOURCE/TYPE OF INCOME	HOUSEHOLD MEMBER PAID	NAME & ADDRESS OF SOURCE (STREET/CITY/STATE)	MONTHLY AMOUNT
Employment Income			
Unemployment Benefits			
Worker's Compensation			
Child Support/Alimony			
TANF/General Assistance			
Social Security/ SSI			
Pension/Annuity/VA Benefits			
Cash Contributions			
Interest/Dividend Income			
Tribal Allotments/Payments			
Student Financial Aid			
Assets Checking Accounts, Savings Accounts, Certificates of Deposit, Money Market, IRA's, Annuity or Investments			

Has any household member disposed of any asset or property for less than fair market value during the past two years?

YES  NO If YES, please briefly describe: \_\_\_\_\_

**PLEASE answer YES or NO to the following questions:**

- 1. Has ANY household member been arrested? YES  NO
- 2. Is ANY household member on any State's Sexual Predator List? YES  NO
- 3. Has ANY household member been convicted of manufacture or sale of methamphetamine? YES  NO

If you answered YES to any of the above questions, please explain here by giving question number, date, charges, location, name of federal housing provider,;

(Examples: #1 12/01/1998 DUI Lawrence, KS, #3 12/15/2003 Topeka, KS Topeka Housing Authority)

Has ANY household member ever lived in any type of federally subsidized housing?  YES  NO If YES, list below:

Former Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Housing Authority/Agency's Name: \_\_\_\_\_ Date moved in: \_\_\_\_\_ Date moved out: \_\_\_\_\_

Does ANY member owe a debt to this housing program?  YES;  NO. If YES, have arrangements been made to pay it back?  YES  NO

**CERTIFICATION (All adults must sign)**

I/we certify that the information given to the Lawrence-Douglas Housing Authority on this Preliminary Application is accurate and complete to the best of my/our knowledge. I/we understand that false statements or information is punishable under Federal Law and is grounds for denial of eligibility, termination of housing assistance and termination of tenancy. Under of penalty of perjury I/we do hereby certify to the information provided in this Certification of Eligibility and Personal Declaration of Information.

Signature of Head of Household: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Other Adult Member: \_\_\_\_\_ Date: \_\_\_\_\_

**Please go over this form and be sure it is filled in completely. Incomplete Preliminary Applications will not be processed.**

How Did You Hear About LDCHA? \_\_\_\_\_