

ELKHART HOUSING AUTHORITY

Updated Applicant’s Self Certification of a Local Preference

NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

I hereby certify that I am: (Check preferences that apply to you)

**IMPORTANT NOTICE: You MUST provide proof** for all the preferences that apply to you at the time you complete and turn in your application to our office.

- ( ) 1. Adult household member working in Elkhart County 20 points
(Paycheck stub within the past 30 days required for credit)
( ) 2. Head of households residing in Elkhart County (Copy of local lease, valid state ID 40 points
Or, a copy of other LOCAL assistance programs you are
Enrolled in (food stamps, school registration).
( ) 3. Adult Head of household participating in a job training program 20 points
(Letter from Director/Staff on organization letterhead required for credit)
( ) 4. Victims of domestic violence 40 points
(Police Report/Restraining Order/or notice from Women’s Shelter stating Domestic
Violence.)
One of the first 3 forms AND the completed VAWA form is required for credit)
( ) 5. Adult Head of household who are (please check one of the following ONLY 40 points
If applicable)
( ) Near Elderly – 50 years old or older
( ) Elderly – 62 years old or older
( ) Disabled or handicapped AND receiving Social Security Benefits
(Copy of SS letter stating amount of benefit required for credit)
( ) 6. A Veteran who has served in the Armed Forces 40 points
(Copy of DD214, Discharge paperwork or military ID required for credit.)
( ) 7. Living in substandard housing (Deemed to be in unsafe condition 20 points
Determined by (The Elkhart CITY CODE ENFORCEMENT.)
(Notice from law enforcement to landlord of violation–photos helpful but not required
For credit.)

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I understand that before I am offered assistance based on any of the above listed preferences, the Elkhart Housing Authority Management must verify all statements that I have checked. I further understand that if at the time my name reaches the top of the waiting list and that I no longer have a Local Preference, I could be placed back on the waiting list.

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