

The Housing Authority of Columbus, Georgia  
 1180 Martin Luther King Blvd, Columbus, Georgia 31906  
 706-571-2873

**ARBOR POINTE 3**

**PERSONAL DECLARATION PLEASE USE BLUE INK ONLY**

The Housing Authority of Columbus, Georgia administers Public Housing and Section 8 (HAPP). You may apply for one or both programs when the waiting lists are open.

This form must be completed **IN YOUR OWN HANDWRITING**. You must use the correct legal name for each member of your household as it appears on the Social Security Card. All adult members of the household must sign below certifying to the information pertaining to them. **PLEASE PRINT.**

**1. HOUSEHOLD COMPOSITION:** List all persons who will be living in your home, listing Head of Household first.

ADULTS 18 AND OVER (legal name)	Date of Birth	Relationship to Head of Household	Social Security number	Indicate if Married (M) Widowed (W) Separated (S) Divorced (D)
1.				year
2.				year
3.				year
4.				year

**Your current or Mailing Address**

Name \_\_\_\_\_

Street address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

SS Number \_\_\_\_\_

Telephone# \_\_\_\_\_

**If separated or divorced, list name and address  
Of Spouse/Ex-Spouse as follows:**

Name \_\_\_\_\_

Street address \_\_\_\_\_

SS number if known \_\_\_\_\_

**2. Total Household Income:** List all money earned or received by everyone who will be living in your household. This includes money from wages, self-employment, child support, contributions, Social Security, disability payments (SSI), workman's compensation, retirement benefits, TANF, veteran's benefits, rental property income, stock dividends, income from bank accounts, alimony, and all other sources.

**LIST AMOUNTS RECEIVED BELOW**

Household Member	Employer	Total weekly wages	TANF	Child Support monthly	Social Security Benefits	Unemployment benefits	All other incomes
1.							
2.							
3.							
4.							

**3. Assets:** If yes to any, list below. \*Do you or any household member own or have an interest in any real estate, boat, and/or mobile home? \_\_\_\_\_ \*Have you sold any real estate in the last two years? \_\_\_\_\_ \*Do you own any stocks or bonds? \_\_\_\_\_ \*Do you have a savings/checking account(s)? \_\_\_\_\_ If yes, list bank account numbers and amounts \_\_\_\_\_ \*Do you own a car? \_\_\_\_\_ Model/Year \_\_\_\_\_ Tag number \_\_\_\_\_ \*Do you own a second car? \_\_\_\_\_ Model/Year \_\_\_\_\_ Tag number \_\_\_\_\_.

1. Does anyone outside of your household pay for any of your bills or give you money? Yes/No \_\_\_\_\_ If yes, please explain below.
2. Have you or any other adult members ever used any name(s) or Social Security number(s) other than the one you are currently using? Yes/No \_\_\_\_\_ If yes, explain below.
3. Have you or any member lived in any assisted housing? Yes/No \_\_\_\_\_ If yes, list where and when below.
4. Have you or anyone in your household ever been convicted of any crime other than traffic violations? Yes/No \_\_\_\_\_ If yes, explain below.
5. Have you ever committed fraud in a Federally assisted housing program or been requested to repay money for knowingly misrepresenting information for such housing programs? Yes/No \_\_\_\_\_ If yes, explain below.

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I, do hereby swear and attest that all information above about me is true and correct. I also understand that **all changes** in the income of any member of the household as well as **any changes** in the household members must be reported to the Housing Authority **IMMEDIATELY**.

\_\_\_\_\_  
**SIGNATURE OF HEAD OF HOUSHOLD**      **DATE**

\_\_\_\_\_  
**SIGNATURE OF SPOUSE**      **DATE**

\_\_\_\_\_  
**SIGNATURE OF OTHER ADULT**      **DATE**

\_\_\_\_\_  
**SIGNATURE OF OTHER ADULT**      **DATE**

**WARNING!** TITLE 18, SECTION 1001 OF THE UNITED STATES CODE STATES, THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.

Office Use Only: Date \_\_\_\_\_ Time \_\_\_\_\_ Initials \_\_\_\_\_