



# HOUSING CHOICE VOUCHER WAIT LIST APPLICANT UPDATE FORM

This form must be completed and returned if any changes occur while your name is on the waiting list. Changes may affect your placement on the waiting list.

NAME: \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Are you or your spouse/domestic partner disabled?  Yes  No

Is this an address change?  Yes  No Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Please check any of the boxes below that currently apply to you:

- Your family is being displaced from your present housing (does not apply to evictions).
- Your family is homeless or living in substandard housing.
- Head of household or spouse lives and or works within city limits of Minneapolis.
- Your family is rent burdened by paying 50% of your income for rent and utilities consistently for more than 90 days.
- The Head of Household or spouse is participating in an economic self-sufficiency program (work training program).
- A member of your household is a veteran of the United States military forces.
- A member of your household is participating in a program for victims of domestic violence.
- Your family lives in the City of Minneapolis and your current landlord will accept an HCV voucher (Lease in Place).
- An adult member of your household is working at least 40 hours per week.

X \_\_\_\_\_  
Signature of Applicant Date

Please return this form to:

MPHA Housing Choice Voucher Program  
Attn: Waitlist  
1001 Washington Ave N  
Minneapolis, MN 55401-1043

You can also fax this update form to 612-335-4427, Attn: HCV Waitlist

#### IMPORTANT NOTICE

It is your responsibility to notify MPHA of all changes. If mail is returned, your name will be removed from the waiting list.

# MPHA RANKING PREFERENCES

## **Involuntary Displacement**

By circumstances that are no fault of your own, such as disaster, Government action, owner action (excluding eviction for nonpayment of rent), reprisal, “hate crimes, inaccessibility of the unit, or HUD disposition of multifamily projects.”

## **Homeless or living in substandard housing**

Having no fixed or permanent place to live. Living with family and friends are not considered homeless. Living in a homeless shelter is considered homeless. Living in substandard housing such as a unit without working plumbing, electricity or unsafe conditions.

## **Live or Works in Minneapolis**

For families who live, work or have been hired to work in the jurisdiction of the PHA.

## **Rent Burdened**

Paying more than 50% of your income for rent and utilities for more than 90 days.

## **Educated/Training Participants**

This preference is available for families whose Head of Household and/or spouse are graduates of or participants in educational or training programs designed to prepare the individual for the job market.

## **Veteran or Service Person**

This preference is available to current members of the US Military Armed Forces, veterans, or surviving spouses of veterans.

## **Victims of Domestic Abuse**

Applicants who have been victims of domestic abuse and are actively involved in ongoing counseling and assistance from a licensed shelter program either as a resident or as an out-reach client.

## **Lease-in place preference**

This preference is given to an applicant who currently lives within the city limits of Minneapolis and can certify that their existing landlord is willing to continue to rent to them if they are determined eligible for admission to the Section 8 Program.

## **Working preference**

This preference is given to families with at least one adult who is employed at least 40 hours per week.