

TUNICA BILOXI HOUSING DEPARTMENT
WAITING LIST APPLICATION

Name _____ Home Tel. # _____

Address _____ Work Tel. # _____

City _____ State _____ Zip _____

Email (if available) _____ Roll# _____

Unit size(s) for which you are applying (please check one or more below):

___ 1-Bedroom ___ 2-Bedroom ___ 3-Bedroom ___ 4-Bedroom

HOUSEHOLD MEMBERS

Please list **ALL** household members who will occupy the unit:

Name	Date of Birth	Sex	SS#	Relationship

INCOME

What is your approximate total yearly income (before-tax income from all jobs, self-employment, Social Security, Pensions, payments from friends/family, unemployment, child support, alimony, income from assets etc.)?

\$

ADDITIONAL INFORMATION

1. Are you a veteran who has been honorably or medically discharged and can provide a copy of DD214?
___ Yes ___ No

2. Is your household currently experiencing rent burden? Yes No

**HUD defines a rent-burdened household as one that spends more than 30% of its income on housing costs, which include rent and utilities.

If yes, please explain in the space below:

3. Are you affected by substandard housing? Yes No

**HUD defines "substandard housing" as housing lacking essential facilities or posing health and safety risks.

If yes, please explain in the space provided here:

4. Do you currently rent or own your home? Own Rent Other

If you other, please explain in the space provided here:

5. Are you involuntarily displaced? Yes No

**HUD defines "involuntary displacement" as situations where individuals or families are forced to leave their housing due to circumstances beyond their control. (Natural disaster or Unnatural occurrence)

If yes, please explain in the space provided here:

6. Does any household member need a reasonable accommodation, unit modification, or alternative communication assistance? ___Yes ___No

If yes, please explain in the space provided here:

7. Please indicate the type of housing you are requesting on the TB Reservation (check all that apply):
- Lease-to-Purchase Home
 - Rental Home
 - Assigned Lot to Build On
 - Other (**please explain**): _____

Initials: _____ I and/or We hereby certify that the information contained herein is true and correct.

If you are selected for a low-income housing unit, the applicable rent determined under program guidelines will be communicated to you before you complete a lease application.

A waitlist application does not guarantee housing placement. All applicants must meet HUD eligibility and qualification guidelines.

I hereby certify, under the pains and penalties of perjury, that all information provided is true, complete, and correct.

Signature of Applicant and Date

Signature of Co-Applicant and Date

"For Office Use Only"

📅 **Date Received:** _____

📅 **Reviewed By:** _____

Applicant Contact Record

Date	Call / Email	Staff Initials	Notes / Summary of Contact