



# Prime Haven - Nederland One Bedroom Apartments



**PRELIMINARY  
APPLICATION  
Rural Development**

**Complete and return to:  
Boulder County Housing Authority  
P.O. Box 471  
Boulder, CO 80306**

**Phone: 303-441-3929  
Fax: 720-564-2283  
TDD: 7-1-1**

## HEAD OF HOUSEHOLD INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Sex: Female    Male    SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Month                      Day                      Year

## MAILING ADDRESS:

Street: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact Number: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Secondary Contact Number: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Email: \_\_\_\_\_

Do you require any special accommodations? (physically accessible unit, first floor, no stairs)  
\_\_\_\_ Yes    \_\_\_\_ No

If yes, please describe here: \_\_\_\_\_

Have you ever been convicted as a sex offender in any state and are you compelled to register as a sex offender?  
\_\_\_\_ Yes    \_\_\_\_ No

## FAMILY INFORMATION (Please list people that will be living with you):

	Name (last, first)	Sex	SS#	Date of Birth	Relationship to You
1					
2					
3					
4					

## FAMILY INCOME AND STATUS INFORMATION: I have zero income at this time \_\_\_\_\_

Family Member	Source(s) of Income	Monthly Gross Income

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**I hereby give permission to the BCHA to perform a national criminal background and sex offender registry check to verify my eligibility for its programs. This includes checking police records.**

**I certify that this unit will serve as my primary residence.**

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Date

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The Fair Housing Act prohibits discrimination in the sale, rental or financing of housing on the basis of race, color, religion, sex, handicap, familial status, or national origin. Federal law also prohibits discrimination on the basis of age.

**Race:** Please check one or more below.

American Indian/Alaska Native

Asian

Black/African American

Native Hawaiian or Other Pacific Islander

White

**Ethnicity:**  Hispanic or Latino

Not Hispanic or Latino

The information regarding race, ethnicity and sex designation solicited on this application is requested in order to assure the Federal Government acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in anyway. However, if you chose not to furnish it, the owner is required to note race, ethnicity, and sex of the individual applicants on the basis of visual observation or surname.

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**PLEASE NOTE: It is your responsibility to inform the Boulder County Housing Authority of any changes in your status, such as a change of address or number of members in your family. If mail sent to you is returned by the Post Office, you will be removed from our waiting list.**

It is the policy of BCHA to make programs, meetings, activities and services accessible to individuals with disabilities. In order to provide special services such as interpreters or provide special materials in special formats such as large print, Braille, or computer disks the county needs to be informed of the individual's special needs. If you need special assistance please contact Domingo Garza at 303-441-1496 at least 48 hours before the scheduled event.

REVISED 7/2017—PREVIOUS EDITIONS OBSOLETE