

20 N. Church Street • Elkhorn, Wisconsin 53121 Phone: 262-723-6123 • Fax: 262-723-2079

# **\*\*\*PLEASE REMOVE THIS PAGE AND KEEP FOR YOUR REFERENCE\*\*\***

Completed applications may be returned to the Housing Authority in the following ways;

By Mail:	Walworth County Housing Authority
	20 N. Church Street
	Elkhorn, WI 53121

**By Fax:** 1-262-723-2079

Email: kfriend@wchawi.com

**Drop Box:** Completed applications may be placed in the drop box near the front door of the office building that is labeled <u>"Client Paperwork"</u>.

If you have questions regarding the application, please contact:

Kim Friend: 262-723-6123 ext. 3 / <u>kfriend@wchawi.com</u> – OR – Nancy Zikuda: 262-723-6194 / <u>nzikuda@wchawi.com</u> – OR – Jessica DiRienzo: 262-723-6123 ext. 7 / <u>idirienzo@wchawi.com</u>

#### **Commonly Asked Questions**

#### How long is the waiting list?

 The length of time your name could remain on the list is based on federal funding and voucher availability. Therefore, we are not able to provide an estimated time your application may remain on the waiting list.

#### How do I know if I qualify?

• This is a pre-application to place your name on the waiting list. Eligibility will be determined at the time your name reaches the top of the waiting list.

### What happens if my mailing address changes?

• If your mailing address changes, you must contact the office to update your address. Failure to do so may result in removal from the waiting list.

### What happens after my name reaches the top of the waiting list?

 Once your application reaches the top of the waiting list, you will receive a letter with instructions to complete the eligibility process. You will be required to provide Social Security Cards and a form of legal identity for all household members during the eligibility process.



# ARE YOU A HOMELESS VETERAN?



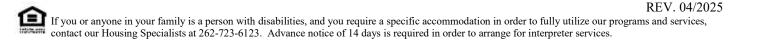
# U.S. Department of Housing and Urban Development-VA Supportive Housing (HUD-VASH) Program

HUD-VASH is a collaborative program which pairs HUD's Housing Choice Voucher (HCV) rental assistance with VA case management and supportive services for homeless Veterans. These services are designed to help homeless Veterans and their families find and sustain permanent housing and access the health care, mental health treatment, substance use counseling, and other supports necessary to help them in their recovery process and with their ability to maintain housing in the community.

Eligible homeless veterans and their families referred to a participating Housing Authority will skip the wait list for a Housing Choice Voucher (HCV).

For more information please contact:

Katie Lamb	414-384-2000 ext. 41703	Clement J Zablocki VA Medical Center
Cassandra Barnett	608-556-7909	William S Middleton Memorial VA Hospital
Emily Bredlau	608-301-7131	William S Middleton Memorial VA Hospital





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# **HOUSING CHOICE VOUCHER PROGRAM PRE-APPLICATION**

# Head of Household (Please Print)

First NameLast Name	Middle Initial
Date of Birth Social	Security Number
APPLICATIONS MUST HAVE A MAILING A	ADDRESS AND A PHYSICAL ADDRESS LISTED
Address where you will receive your mail *mailing address is required	Physical Address  Check if same as mailing If homeless list city/zip-code where you typically stay
City, State, Zip	City, State, Zip
	County Housing Authority of any change of address. name will be removed from the waiting list.
Telephone Number	_ Email
HOUSEHOLD INFORMATION How many people will live in the unit? Total r	number of adults Total number of children
Total amount of family income. This is income from all	sources – fill in one line.
Annual Income \$ OR Monthly Incom	ne \$ OR Weekly Income \$
Hud Statistical Purposes Only Please identify your race and ethnicity by checking the	box in each of the two categories below
<u>Check all that apply</u> White Black/African American American Indian/Alaskan Native Asian Native Hawaiian/Other Pacific Islander	<u>Check one</u> Hispanic or LatinoNot Hispanic or Latino How did you hear about us? Social MediaCase Worker ShelterWord of Mouth

If you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, contact our Housing Specialists at 262-723-6123. Advance notice of 14 days is required in order to arrange for interpreter services.

# WAITING LIST SELECTION

The Walworth County Housing Authority offers two waiting lists for the Housing Choice Voucher Program. Below is a brief description of each waiting list. Please indicate which list you would like to be placed on.

#### Section 8 Waiting List:

This waiting list is for the Housing Choice Voucher Program and is designed to help individuals and families living on a limited income afford a private housing unit. Once an applicant is determined eligible they will receive a Voucher to begin to look for suitable housing in Walworth County.

This waiting list offers a Homeless Preference.

#### WHEDA Section 8 Waiting List:

WAIT LIST CLOSED This waiting list is for the Housing Choice Voucher ∕is designed to help individuals and families living on a limited income afford a private housing an applicant is determined eligible they will receive a Walworth County. The policies for this program may differ from Voucher to begin to look for suitable the Section 8 Waiting List. This st does **NOT** offer any preferences.

I would like to be placed on the:

Section 8 Waiting List

WHEDA Section 8 Waiting List – THIS WAIT LIST IS CURRENTLY CLOSED

# **APPLICATION CERTIFICATION**

I certify that the information given to the Walworth County Housing Authority on this pre-application is accurate and complete to the best of my knowledge and belief. I understand that false statements of information are punishable under Federal Law. I also understand that false statements of information are grounds for denial or termination of housing assistance.

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 of the United States.

I do hereby swear and attest that all the information provided on my application about myself and my household is true and correct.

I declare under penalty of perjury under the laws of the United States of America and the State of Wisconsin that the information contained in this statement of facts is true, correct and complete.

Please sign:	
Signature of Head of Household	 Date



REV. 04/2025

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## WALWORTH COUNTY HOUSING AUTHORITY WAITING LIST PREFERENCE REQUEST FORM

The Walworth County Housing Authority has established a homeless preference for the Section 8 Housing Choice Voucher Waiting List. The preference will establish the order of placement on the waiting list.

# \*\*All applicants to the Section 8 Waiting List who wish to be considered for the homeless preference must have a <u>Certificate of Homelessness</u> completed and turned in to the Walworth County Housing Authority\*\*

Please check if you are requesting to be considered for the homeless preference on the waiting list:

The Walworth County Housing Authority offers a homeless preference to individuals/families who are homeless <u>within Walworth County</u> and are certified as homeless by a homeless service provider, such as Twin Oaks Shelter for the Homeless.

- The Homeless Preference is defined as any individual or family, who lacks a fixed, regular, and adequate nighttime residence that meets certain, defined criteria. Defined criteria includes: living in a publicly or privately-operated shelter designated to provide temporary living arrangements, is exiting an institution where they have resided for 90 days or less <u>and</u> who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution, has a primary nighttime residence that is a public or private place not meant for human habitation or is fleeing, or is attempting to flee, domestic violence; has no other residence <u>and</u> lacks the resources or support network to obtain permanent housing.
- Doubling up, "couch-surfing, or anticipating homelessness is NOT considered as eligible criteria for the homeless preference.
- You must have a completed Certificate of Homelessness on file to receive the homeless preference.

#### I am requesting that my application be considered for the Preference marked above. Please initial below:

		I understand that I must turn in a fully completed Certificate of Homelessness before my application will
be	e el	gible for the homeless preference.

\_\_\_\_\_I understand that my application will be entered onto the wait list(s) **without** the homeless preference until the fully completed **Certificate of Homelessness** is returned to the Housing Authority.

# The *Certificate of Homelessness* form can be found in the lobby or on our website. You may also request the form from any of our Housing Specialists.

Signature	Date	
Print Name		

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