

**WHITEFISH HOUSING AUTHORITY  
MOUNTAIN VIEW MANOR**  
100 4th Street East  
Whitefish, MT 59937  
406-862-4100 406-862-4107 (fax)

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Dear Applicant,

The Whitefish Housing Authority (WHA) operates 50 housing units within the Mountain View Manor under the Department of Housing and Urban Development (HUD) Public Housing Program. Eligibility for the Mountain View Manor is income based. The rent is based on total household income.

Please complete the attached WHA Public Housing Application, answer all questions, and return to the Mountain View Manor office.

If your total household income is within the applicable HUD income limit, your name will be placed on the Public Housing Waiting List. A criminal background check and credit check will be conducted during the applicant intake interview. An applicant intake interview will be scheduled as you move to the top of the waiting list.

It is your responsibility to keep your application information current. If you have any changes in your household, address or telephone number, you need to notify WHA of the change. Keeping your application information up to date is extremely important.

Thank you for considering Mountain View Manor as your future home. The Board of Commissioners and the Executive Director appreciate your efforts in filling out these forms. If you qualify for housing assistance and an apartment becomes available for your tenancy, we welcome you. If you are offered an apartment, further verifications will need to be made before the lease can take effect.

Sincerely,  
Mountain View Manor

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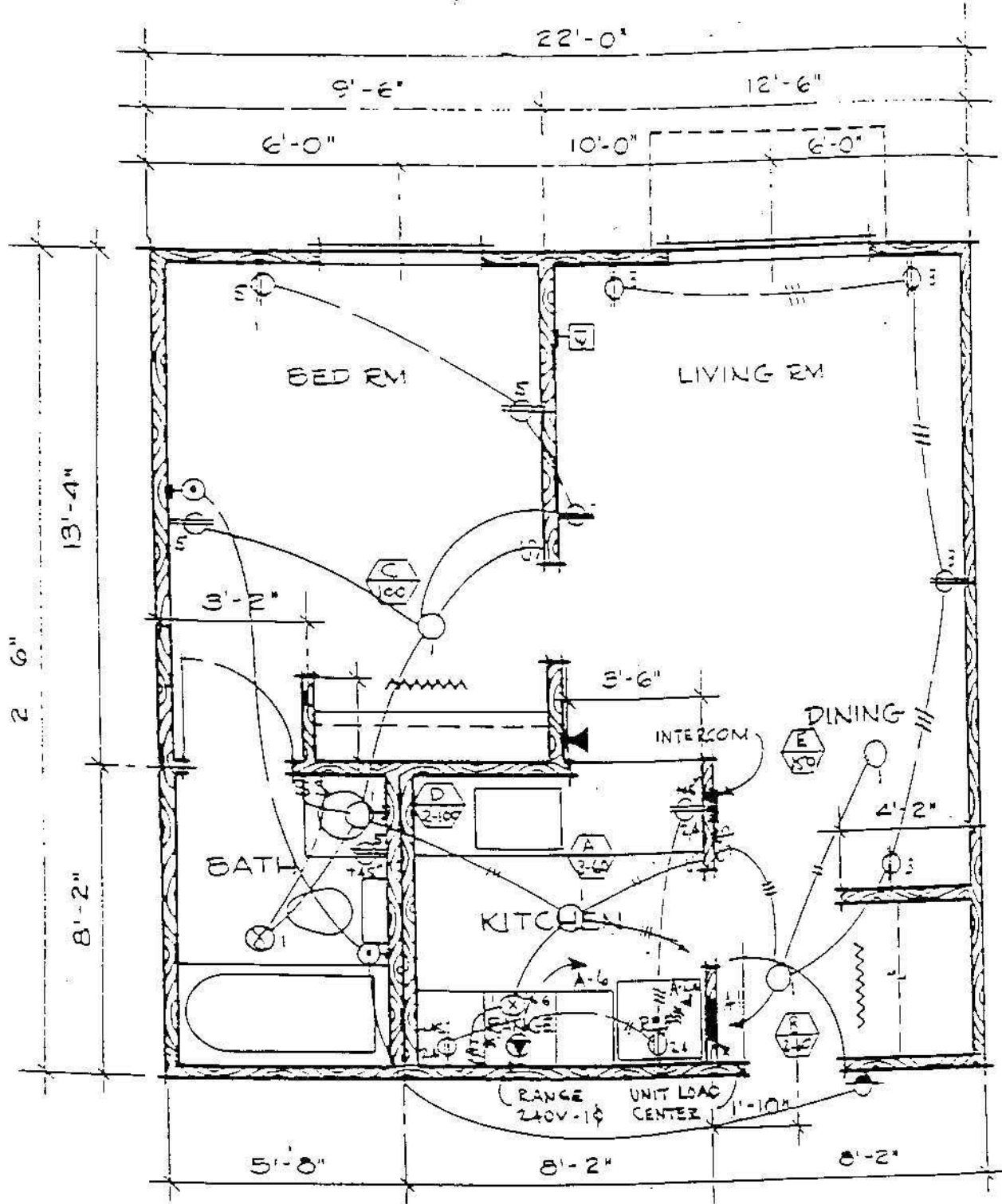
**BRIEF DESCRIPTION OF MOUNTAIN VIEW MANOR**

- Whitefish Housing Authority, overseeing Mountain View Manor, is a Public Housing Project comprised of 50 apartments. Whitefish Housing Authority is an Equal Housing Opportunity agency doing business in accordance with the Federal Fair Housing Law.
- The Mountain View Manor is located on the Whitefish River and is close to downtown Whitefish and the Golden Agers Senior Center.
- There is a management team located on the premises during daytime working hours. Each member of the team can be called after hours for emergencies.
- The rental fee is based on approximately 30% of the applicant/resident monthly net income after out of pocket medical expenses. Gas, electric, water, and sewer are included in the monthly rent. Draperies and/or blinds, refrigerator, and stove are provided to the tenant.
- The main entrance and exits are locked for security after regular office hours. Residents can enter and exit at their will using an entrance key.
- The fire alarm system is connected directly to the Whitefish Police Department to allow for quick response time.
- A Tenant Community Room and Recreation Room are provided for social activities. Also there is a craft room with reading materials. A community computer room with vending machines.
- In the back of building is a gazebo surrounded by flower gardens for social activities.
- There is an active Resident Council on the premises.
- There is a laundry room located on each floor.
- The Manor has two floors and there is an elevator in the building.
- Bus service is provided to the downtown area on Monday, Wednesday, and Fridays. Also the bus goes to Kalispell on Mondays.
- The building has a nice décor and new carpet in the hallways.

# UNIT "1-A"

1 B.R.

1/4" = 1'-0"



# UNIT "1"

1 B.R.

1/4" = 1'-0"

EQUAL HOUSING OPPORTUNITY

**WHITEFISH HOUSING AUTHORITY  
MOUNTAIN VIEW MANOR**

100 - 4th Street East  
Whitefish MT 59937  
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406-862-4107 (FAX)

UNITED STATES DEPARTMENT OF  
HOUSING AND URBAN DEVELOPMENT

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**THINGS YOU SHOULD KNOW WHEN APPLYING OR RECERTIFYING FOR  
HOUSING**

DO NOT RISK YOUR CHANCES FOR FEDERALLY ASSISTED HOUSING BY  
PROVIDING FALSE, INCOMPLETE, OR INACCURATE INFORMATION ON YOUR  
APPLICATION AND RECERTIFICATION FORMS

**PURPOSE:** This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.

**PENALTIES FOR COMMITTING FRAUD:** The United States Department of Housing and Urban Development (HUD) places a high priority on preventing fraud. If your application or recertification forms contain false or incomplete information you may be:

- Evicted from your apartment or house;
- Required to repay all overpaid rental assistance you received;
- Fined up to \$10,000;
- Imprisoned for up to 5 years; and/or
- Prohibited from receiving future assistance.

Your State and local governments may have other laws and penalties as well.

**ASKING QUESTIONS:** When you sit down with the person who fills out your application, you should know what is expected of you. If you do not understand something, say so. That person can answer your question or find out what the answer is.

**COMPLETING THE APPLICATION OR RECERTIFICATION FORM:** When you give your answers to application or recertification questions, you must include the following information:

- All sources of money you and any member of your family receive (wages, welfare payments, alimony, social security, pension, etc.);
- Any money you receive on behalf of your children (child support, social security for children, etc.);
- Income for assets (interest from a savings account, credit union, certificate of deposit, dividends from stocks, etc.);
- Earnings from second job or part time job;
- Any anticipated income (such as a bonus or pay raise you expect to receive);

- All bank accounts, savings bonds, certificates of deposits, stocks, real estate, etc. that are owned by you and any adult member of your family/household who will be living with you;
- Any business or asset you sold in the last 2 years for less than its full value, such as your home to your children;
- The names of all the people (adults and children) who will actually be living with you, whether or not they are related to you.

**SIGNING THE APPLICATION:**

- Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate;
- When you sign application and recertification forms you are claiming that they are completed to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information;
- Information you give on your application or recertification will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with the various Federal, State, or private agencies to verify that it is correct.

**RECERTIFICATIONS:** You must provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You must report on recertification forms:

- All income changes, such as pay increases or benefits, change of job, loss of benefits, etc. for all adult family/household members;
- Any family/household member who has moved in or out;
- All assets that you or your family/household members own and any asset that was sold in the last 2 years for less than its full value.

**BEWARE OF FRAUD:** You should be aware of the following fraud schemes:

- Do not pay money to file an application;
- Do not pay any money to move up on the waiting list;
- Do not pay for anything not covered by your lease;
- Get a receipt for any money you pay;
- Get a written explanation if you are required to pay any money other than rent (such as maintenance charges).

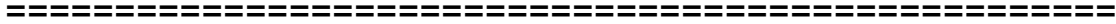
**REPORTING ABUSE:** If you are aware of anyone who has falsified an application or if anyone tries to persuade you to make false statements, report them to the manager of your project or the Housing Authority. If you cannot report to the manager, call the local HUD office or the HUD hotline on (202) 472-4200. This is not a toll free number. You can also write to the HUD HOTLINE, Room 8254, 451 Seventh Street SW, Washington DC 20410

HUD FORM 1140 - OIG

THINGS YOU SHOULD KNOW ABOUT WHEN APPLYING AND RECERTIFYING FOR HOUSING  
WHITEFISH HOUSING AUTHORITY

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MOUNTAIN VIEW MANOR**  
100 4th Street East  
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Application for the Mountain View Manor Public Housing

- 1) To be qualified for admission to public housing an applicant must:
  - (a) Be a family as defined in WHA's Admission and Continues Occupancy Policy;
  - (b) Meet the HUD requirements on citizenship or immigration status;
  - (c) Have an annual income at the time of admission that does not exceed the income limits established by HUD that are posted in WHA offices.
  - (d) Provide documentation of Social Security numbers;
  - (e) Meet or exceed the Applicant Selection Criteria, including attending and successfully completing a WHA-approved pre-occupancy orientation session, if requested to do so;
  - (f) Pay any money owed to WHA or any other housing authority;
  - (g) Not have had a lease terminated by WHA in the past 3 years;
  - (h) Be able and willing to comply with the Whitefish Housing Authority lease; and
  - (i) Not have any family members engaged in any criminal activity that threatens the life, health, safety, or right to peaceful enjoyment of the premises by other residents, and not have any family members engaged in any drug-related criminal activity.
- 2) Complete applications will be entered on the waiting list in the order received. The waiting list will then be processed in order according to unit type, size, and admission preferences.

- 3) Each applicant who meets the above qualifications will receive one unit of the size and type needed. If the applicant accepts the offer, the applicant will be offered a lease. If the applicant refuses the offer without good cause, WHA will remove the applicant's name from the waiting list and send a notice to the family of such removal. The applicant may reapply for assistance if the waiting list is open.
- 4) Applicants with disabilities may seek assistance with the completion of the application at WHA's office.
- 5) WHA will conduct a criminal record check on all applicants.

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Date of Application: \_\_\_\_\_

**APPLICANT INFORMATION:**

Name of head of household: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Current address, street, Apt #: \_\_\_\_\_

Current City, State, and Zip: \_\_\_\_\_

Current Area Code, Home, & Work Phone #'s: \_\_\_\_\_

Do you own a pet? Yes No If yes, type of pet: \_\_\_\_\_

Do you or any members of your household that will live in the apartment need reasonable accommodation? Yes No Wheelchair Accessibility? Yes No

Is the head of household or spouse age 62 or older or a person with a disability? Yes No

**SPOUSE/LIVE IN AIDE INFORMATION:**

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security #: \_\_\_\_\_

1) Is any adult family member employed? Yes No If yes, who can verify this? Please give name, address, and phone number: \_\_\_\_\_

\_\_\_\_\_

2) Is any adult family member enrolled in a job training program, including one required under the Welfare program? Yes No If yes, who can verify this?

Please give name, address, and phone number: \_\_\_\_\_

\_\_\_\_\_

3) Family Income Information: Please list the source and amount of all income expected for the coming 12 months for all family members, including yourself. Include all earnings and benefits received from AFDC/TANF, VA, Social Security, SSI, SSID, Unemployment, Worker's Compensation, Child Support, etc. Example: Wages, \$150/week, SSI, \$421/month



Family Member Name	Income Source	Amount \$	Frequency Per Week Month Year

4) Do you have a checking or savings account or own any Certificates of Deposit, stocks, bonds, etc.? Yes No If yes, describe the type of asset please: \_\_\_\_\_

\_\_\_\_\_

What is the market value of all assets? \_\_\_\_\_

5) Do you own any real estate? Yes No If yes, what is the address? \_\_\_\_\_

\_\_\_\_\_

6) Have you sold any real estate in the past two years? Yes No If yes, what was the address? \_\_\_\_\_

\_\_\_\_\_

7) Current Landlord's name and phone # \_\_\_\_\_

Date Family moved to this location \_\_\_\_\_

8) Most recent former Address, Street, Apt # \_\_\_\_\_

Most recent former City, State, Zip \_\_\_\_\_

Most recent former Area Code and Phone # \_\_\_\_\_

9) Most recent prior Landlords name and phone # \_\_\_\_\_

Date Family moved to this location \_\_\_\_\_

**SCREENING QUESTIONS:** A "yes" answer will not necessarily disqualify you for admission.

10) Have you ever been evicted from housing? Yes No If yes, why? \_\_\_\_\_

\_\_\_\_\_

11) Have you ever lived in public housing before: Yes No If yes, where? \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_ Name of Lessee: \_\_\_\_\_

Do you owe any money to the housing authority? Yes No

12) Have you or any member of the applicant household ever been arrested or convicted of a crime other than a traffic violation? Yes No If yes, please explain the nature of the problem and who was involved: \_\_\_\_\_

\_\_\_\_\_

13) Is anyone in your household currently on parole or probation? Yes No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**WHA will be contacting all former landlords for the period three years from the date of application.**

I/We certify that the statements on the application are true to the best of my/our knowledge and believe and understand that they will be verified. I/we authorize the release of information to the Whitefish Housing Authority by my/our employer(s), the Department of Public assistance, the Social Security Administration, and/or other business or government agencies. I/we understand that any false statement made on this application will cause me/us to be disqualified for admission.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date

**Warning:** 18 U.S.C. 1001 provides, among other things that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious or fraudulent statement or entry in any matter within the jurisdiction of a department or agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

If you believe that you have been discriminated against, you may call the Fair Housing and Equal Opportunity National Toll-free Hotline at 1-800-424-8590.



**DECLARATION OF SECTION 214 STATUS**

**Notice to applicants and tenants:** In order to be eligible to receive the housing assistance sought, each applicant for, or recipient of, housing assistance must be lawfully within the U.S. Please read the Declaration statement carefully and sign and return to the Housing Authority's Admissions Office. Please feel free to consult with an immigration lawyer or other immigration expert of your choosing.

I, \_\_\_\_\_ certify, under penalty of perjury that, to the best of my knowledge, I am lawfully within the United States because (please mark the appropriate line):

\_\_\_\_\_ I am a citizen by birth, a naturalized citizen or a national of the United States; or

\_\_\_\_\_ I have eligible immigration status and I am 62 years of age or older. Attach evidence of proof of age; or

\_\_\_\_\_ I have eligible immigration status as checked below (see reverse side of this form for explanations). Attach INS documents evidencing eligible immigration status and signed verification consent form.

\_\_\_\_\_ Immigrant status under 101(a)(15) or 101(a)(20) of the Immigration and Nationality Act (INA) ; or

\_\_\_\_\_ Permanent residence under #249 of INA ; or

\_\_\_\_\_ Refugee, asylum, or conditional entry status under #207, 208, or 203 of the INA ; or

\_\_\_\_\_ Parole status under #212(d)(f) of the INA ; or

\_\_\_\_\_ Threat to life or freedom under #243(h) of the INA ; or

\_\_\_\_\_ Amnesty under #254 of the INA.

\_\_\_\_\_  
Signature of Family Member

\_\_\_\_\_  
Date

\_\_\_\_\_ Check box on left if signature is of adult residing in the unit who is responsible for child named on statement above.

HA: Enter INS/SAVE Primary Verification #: \_\_\_\_\_ Date: \_\_\_\_\_



# Authorization for the Release of Information/ Privacy Act Notice

to the U.S. Department of Housing and Urban Development (HUD)  
and the Housing Agency/Authority (HA)

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing  
OMB CONTROL NUMBER: 2501-0014

PHA requesting release of information; (Cross out space if none) (Full address, name of contact person, and date)	IHA requesting release of information; (Cross out space if none) (Full address, name of contact person, and date)
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**Authority:** Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by Section 903 of the Housing and Community Development Act of 1992 and Section 3003 of the Omnibus Budget Reconciliation Act of 1993. This law is found at 42 U.S.C. 3544.

This law requires that you sign a consent form authorizing: (1) HUD and the Housing Agency/Authority (HA) to request verification of salary and wages from current or previous employers; (2) HUD and the HA to request wage and unemployment compensation claim information from the state agency responsible for keeping that information; (3) HUD to request certain tax return information from the U.S. Social Security Administration and the U.S. Internal Revenue Service. The law also requires independent verification of income information. Therefore, HUD or the HA may request information from financial institutions to verify your eligibility and level of benefits.

**Purpose:** In signing this consent form, you are authorizing HUD and the above-named HA to request income information from the sources listed on the form. HUD and the HA need this information to verify your household's income, in order to ensure that you are eligible for assisted housing benefits and that these benefits are set at the correct level. HUD and the HA may participate in computer matching programs with these sources in order to verify your eligibility and level of benefits.

**Uses of Information to be Obtained:** HUD is required to protect the income information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. HUD may disclose information (other than tax return information) for certain routine uses, such as to other government agencies for law enforcement purposes, to Federal agencies for employment suitability purposes and to Has for the purpose of determining housing assistance. The HA is also required to protect the income information it obtains in accordance with any applicable State privacy law. HUD and HA employees may be subject to penalties for unauthorized disclosures or improper uses of the income information that is obtained based on the consent form.

**Private owners may not request or receive information authorized by this form.**

**Who Must Sign the Consent Form:** Each member of your household who is 18 years of age or older must sign the consent form. Additional signatures must be obtained from new adult members joining the household or whenever members of the household become 18 years of age.

Persons who apply for or receive assistance under the following programs are required to sign this consent form:

- PHA-owned rental public housing
- Turnkey III Homeownership Opportunities
- Mutual Help Homeownership Opportunity
- Section 23 and 19(c) leased housing
- Section 23 Housing Assistance Payments
- HA-owned rental Indian housing
- Section 8 Rental Certificate
- Section 8 Rental Voucher
- Section 8 Moderate Rehabilitation

**Failure to Sign Consent Form:** Your failure to sign the consent form may result in the denial of eligibility or termination of assisted housing benefits, or both. Denial of eligibility or termination of benefits is subject to the HA's grievance procedures and Section 8 informal hearing procedures.

**Sources of Information To Be Obtained**

State Wage Information Collection Agencies. (This consent is limited to wages and unemployment compensation I have received during period(s) within the last 5 years when I have received assisted housing benefits.)

U.S. Social Security Administration (HUD only) (This consent is limited to the wage and self-employment information and payments of retirement income as referenced at Section 6103(l)(7)(A) of the Internal Revenue Code.)

U.S. Internal Revenue Service (HUD only) (This consent is limited to unearned income [i.e., interest and dividends].)

Information may also be obtained directly from: (a) current and former employers concerning salary and wages and (b) financial institutions concerning unearned income (i.e., interest and dividends). I understand that income information obtained from these sources will be used to verify information that I provide in determining eligibility for assisted housing programs and the level of benefits. Therefore, this consent form only authorizes release directly from employers and financial institutions of information regarding any period(s) within the last 5 years when I have received assisted housing benefits.

**Original is retained by the requesting organization. ref. Handbooks 7420.7, 7420.8, & 7465.1 form HUD-9886 (7/94)**

**Consent: I consent to allow HUD or the HA to request and obtain income information from the sources listed on this form for the purpose of verifying my eligibility and level of benefits under HUD’s assisted housing programs. I understand that HAs that receive income information under this consent form cannot use it to deny, reduce or terminate assistance without first independently verifying what the amount was, whether I actually had access to the funds and when the funds were received. In addition, I must be given an opportunity to contest those determinations.**

This consent form expires 15 months after signed.

Signatures:

_____	_____	_____	_____
Head of Household	Date	Other Family Member over age 18	Date
_____	_____	_____	_____
Social Security Number (if any) of Head of Household		Other Family Member over age 18	Date
_____	_____	_____	_____
Spouse	Date	Other Family Member over age 18	Date
_____	_____	_____	_____
Other Family Member over age 18	Date	Other Family Member over age 18	Date
_____	_____	_____	_____
Other Family Member over age 18	Date	Other Family Member over age 18	Date

**Privacy Act Notice.** Authority: The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities. Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government’s financial interest, and to verify the accuracy of the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Penalty: You must provide all of the information requested by the HA, including all Social Security Numbers you, and all other household members age six years and older, have and use. Giving the Social Security Numbers of all household members six years of age and older is mandatory, and not providing the Social Security Numbers will affect your eligibility. Failure to provide any of the requested information may result in a delay or rejection of your eligibility approval.

**Penalties for Misusing this Consent:**

HUD, the HA and any owner (or any employee of HUD, the HA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form.

Use of the information collected based on the form HUD 9886 is restricted to the purposes cited on the form HUD 9886. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000.

Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the HA or the owner responsible for the unauthorized disclosure or improper use.

**Original is retained by the requesting organization. ref. Handbooks 7420.7, 7420.8, & 7465.1 form HUD-9886 (7/94)**