



# Prime Haven – Nederland

Rural Development Application

Submit Application



**PRELIMINARY APPLICATION**

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

**Phone: 303-441-1542**  
**TDD: 800-659-2656**  
**Fax: 720-564-2283**

FOR OFFICE USE ONLY:  
NAME:

## HEAD OF HOUSEHOLD INFORMATION:

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

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

Do you require any special accommodations? Yes No  
If yes, please describe here: \_\_\_\_\_

**Race:** Please check below. Please check below. 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 Services 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.

- White
- African American
- Asian/Pacific Islander
- Hispanic
- American Indian
- Other

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

REC'D:

## 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 |                    |     |     |               |                     |
| 5 |                    |     |     |               |                     |
| 6 |                    |     |     |               |                     |

TIME:

## FAMILY INCOME AND STATUS INFORMATION:

Monthly gross income: \$ \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Other Income Sources (Employment, TANF, SSI, etc.): \_\_\_\_\_

BDRMS:

