

Virgin Islands Housing Authority

St. Thomas

9900 Oswald Harris Court
St. Thomas, VI 00802-3100
Telephone: 340-777-8442
Fax: 340-775-0832
TDD Line: 340-777-7725
Website: www.vihousing.org



St. Croix

9299 Estate Slob
Kingshill, VI 00850
Telephone: 340-778-8442
Fax: 340-773-3054
TDD Line: 340-778-5245

PRE-APPLICATION FOR PUBLIC HOUSING

Head of Household _____ Last Four of SS# _____

Instructions: Please read carefully. Incomplete applications will not be processed.

- To be qualified for admission to public housing, an applicant must:
 - Be a family as defined in VIHA's Admission and Continued Occupancy Policy;
 - Meet the HUD requirements on citizenship or immigration status;
 - Have an Annual Income at the time of admission that does not exceed the income limits established by HUD posted in VIHA's offices;
 - Provide Social Security numbers for all family members (**applications will be considered incomplete without this information**);
 - Provide any requested verification (**applications will be considered incomplete without this documentation**);
 - Meet or exceed the Applicant Selection Criteria; and
 - Meet the screening requirements.
- Complete applications will be entered on the waiting list in the order received and sorted according to date and time of application number, admission preferences, and unit size.
- Applications will be accepted by hand delivery, email or postal mail, at any of the following addresses, postmarked within dates when PHA is accepting applications:

Virgin Islands Housing Authority 9900 Oswald Harris Court St. Thomas, VI 00802 Email: exec@vihousing.org	Virgin Islands Housing Authority 9299 Estate Slob Kingshill, VI 00850 Email: exec@vihousing.org	Louis E. Brown Apartments Carlisle Property Management 1000 Louis E. Brown Apartments Clubhouse, Frederiksted, VI 00840 (for the LEB waiting list only)
---	--	--

- Applicants with disabilities may seek assistance with completing the application at VIHA's Leasing Division at either of the addresses above.
- Be sure to include the name, Social Security number, date of birth, and all income of every family member who will live in the household.
- Be sure to provide your complete address and telephone number so we can reach you to schedule an application interview.

The Virgin Islands Housing Authority is an Equal Housing Provider.



Revised 05-15-24

Virgin Islands Housing Authority

St. Thomas

9900 Oswald Harris Court
 St. Thomas, VI 00802-3100
 Telephone: 340-777-8442
 Fax: 340-775-0832
 TDD Line: 340-777-7725
 Website: www.vihousing.org



St. Croix

9299 Estate Slob
 Kingshill, VI 00850
 Telephone: 340-778-8442
 Fax: 340-773-3054
 TDD Line: 340-778-5245

PHA use only
 Date: _____

Application Number: _____
 Time of Application: _____

ELIGIBILITY PRE-APPLICATION FOR PUBLIC HOUSING

Check the box for the program for which you are applying: (See back page for list of Communities)

- | | |
|--|--|
| <input type="checkbox"/> Public Housing – St. Thomas | <input type="checkbox"/> Public Housing – Louis E. Brown I (St. Croix) |
| <input type="checkbox"/> Public Housing – St. Croix | <input type="checkbox"/> Public Housing – Louis E. Brown II (St. Croix)
<i>(For Elderly Persons Aged 62 and Older Only)</i> |

Applicant information:

Last Name	First Name	Middle
Mailing Address	City	State ZIP
Home Phone	Cell Phone	Work Phone
Email Address		

Household Members: Start with the head of household, then list spouse/co-head, then any other adults, then minors.

	First and Last Name	Relation	Sex M/F	Age	Date of Birth	Place of Birth	Social Security Number
1		HEAD					
2							
3							
4							
5							
6							
7							
8							



Optional Information for Statistical Purposes Only (please check all that apply):

- Race of Head: African American/Black Caucasian/White Asian/Pacific Islander
 Native American/Alaskan Native Multiracial
- Ethnicity of Head: Hispanic/Latino Non-Hispanic/Non-Latino

1. Have you or anyone in your household ever used any other names? Yes No
 If yes, what name(s)? _____
2. Have you or anyone in your household ever used a Social Security number other than those listed?
 Yes No If yes, what number(s)? _____

The following are types of income that must be reported:

- Wages, tips, salary
- Social Security, SSI, SSDI
- TANF
- SNAP
- Child support
- Unemployment
- VA Benefits
- Pension or retirement
- Worker’s compensation
- Per capita payments
- Interest income from bank accounts and investments, such as stocks, bonds, or a 401k
- Income from real estate
- Contributions from family, friends, or anyone else outside of the household (this includes regular cash gifts, bills paid on behalf of anyone in the household, and purchase of products on your behalf)

Income Information: Please list the source and amount of **all current income** received by **all household members**, including your children, yourself, and any other adults in the household.

Household Member Name	Income Source	Amount	Frequency - Per		
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
			<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year



3. Have you been displaced or required to move from your place of residence due to a government declared disaster within the last 24 months? Yes No
4. Have you been displaced or required to move from your place of residence due to a government action including Non-Public Housing Over-Income (NPHOI) families? Yes No
5. Are you subject to a Master Lease Agreement between VIHA and the owner entity of a project being redeveloped under the Rental Assistance Demonstration (RAD) program other than eviction? Yes No
6. Are you currently living in a residence that is a public or private place not designed for or not ordinarily used for regular sleeping accommodations or bouncing between housing belonging to friends and/or extended family members? Yes No
7. Have you recently exited an institution (including a hospital) where you resided for 90 days or less or resided in an emergency shelter? Yes No If yes, documentation must be provided.
8. Have you been displaced or required to move from your place of residence due to domestic violence, stalking violence, dating violence, or stalking within the last 12 months? Yes No
9. Are you, your spouse or co-head employed at least 30 hours per week? Yes No
If yes, documentation must be provided.
10. Are you, your spouse, or co-head self-employed and the income earned from self-employment is greater than or equal to the amount earned by working 30 hours per week at minimum wage? Yes No
If yes, documentation must be provided.
11. Are you, your spouse, or co-head a person age 62 or older or a person with disabilities? Yes No
If yes, documentation must be provided.
12. Are any members of your household disabled? Yes No If yes, list their names below:

13. Do you or any members of your household require any of the following accommodations or unit modifications? Yes No If yes, please check all that apply:

<input type="checkbox"/> Wheelchair accessible unit	<input type="checkbox"/> Service/companion animal
<input type="checkbox"/> Sensory impaired accessible unit	<input type="checkbox"/> Live-in aide/caregiver
<input type="checkbox"/> Ground floor unit (no stairs)	<input type="checkbox"/> Other physical adaptations (i.e., grab bars)
<input type="checkbox"/> Other: _____	



14. Please list your current address:

Current physical address:	
Move-in date:	
Landlord name:	
Landlord phone number:	

15. Please list your most recent former physical addresses if less than 3 years at current address:

Former physical address:	
Move-in date:	
Move-out date:	
Landlord name:	
Landlord phone number:	

Former physical address:	
Move-in date:	
Move-out date:	
Landlord name:	
Landlord phone number:	

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

ATTENTION APPLICANT: You are responsible for maintaining current and accurate applicant information. You are required to notify the Virgin Islands Housing Authority in writing of any change in address, income, and/or household composition. **If we cannot contact you at the address listed on this application or an updated address, your name will be removed from the waiting list, and you will have to reapply.**



It is the responsibility of all clients to provide accurate and complete information to the Virgin Islands Housing Authority (VIHA). If you do not provide all required information or if you submit false information to VIHA, you may be charged with federal fraud (Title 18, Section 1001 of the U.S. Code).

I/we understand that if I/we provide false or misleading information, or if I/we fail to disclose information requested on this application, I/we may be:

- Disqualified from admission or participation;
- Evicted from my/our apartment or house;
- Required to repay all overpaid rental assistance I/we received;
- Fined up to \$10,000;
- Imprisoned for up to five years;
- Prohibited from receiving future assistance; and/or
- Subject to State and local government penalties.

I/WE CERTIFY THAT ALL INFORMATION I/WE HAVE PROVIDED IS COMPLETE AND ACCURATE.

I understand that this is not a contract and does not bind either party. The information contained in this application is true, and complete to the best of my knowledge. I have no objection to inquiries being made for the purpose of verifying the statements made herein.

Head of Household Signature

Date

List of VIHA Communities:

St. Thomas

Oswald Harris Court
Estate Bovoni
Paul M. Pearson Gardens
Lucinda Millin Homes
Bergs Home
Contant Knolls
Kirwan Terrace

St. Croix

D. Hamilton Jackson Terrace
Alphonso Gerard Complex
John F. Kennedy
Joseph E. James
Candido Guadalupe Terrace
Aureo Diaz Heights

St. Croix

Mount Pleasant
Williams Delight
Marley Homes
Wilfred Pedro

Louis E. Brown I (St. Croix)

Louis E. Brown II (St. Croix)

