LORAIN METROPOLITAN HOUSING AUTHORITY 1600 Kansas Ave Lorain Ohio 44052

LMHA

Signature of Head of Household

(440) 288-1600 TDD/TTY (800) 750-0750 WWW.LMHA.ORG

EQUAL HOUSING OPPORTUNITY

Harr Plaza and International Plaza Pre-Application

The Pre-Application must be completed and sent to the P.O. Box listed below. Only one pre-application accepted per household. Only one pre-application per envelope.

Name:					-		
Social Security	y Number:		DOB:				
Address:					-		
	City		State				
Email:					-		
Cell Phone:	Can you accept text messages: Yes				No		
Home Phone:							
Please list all additional shee	household members you et if needed.	wish to put on your	application	. Use the back of	this form	or attach ar	
NAME		DATE OF BIRTH	GENDER	RELATIONSHIP HOUSEHOLD	P TO HEAD OF		
				self			
Please select "	yes" or "no" for each pro	gram you wish to a	ply for:				
These buildin households.	gs are 1 or 2 bedroom uni	ts designated for eld	erly, near-el	derly, and disabled	YES	NO	
Harr Plaza 15	5 Chestnut Street, Elyria,						
International	Plaza – 1825 Homewood	Drive, Lorain, Ohio)				
Is the head of	household, spouse, or co-	head disabled? Y	es N	lo			
	a household member's o			•			
I certify that the or misrepresent	ne above information is a station may result in loss of the age of 18 and therefore	ccurate and comple of eligibility to parti	te. I unders cipate in any	tand that submission y LMHA Housing	on of false Program.	informatior I certify tha	

Pre-Applications will ONLY be accepted via US Mail sent to: LMHA PH-WL, PO BOX 1010, Lorain, OH 44055.

Date