



Rental Assistance Guide

A Resource for People with Developmental Disabilities

JUNE 2001

FOR SAN DIEGO
AND IMPERIAL COUNTIES

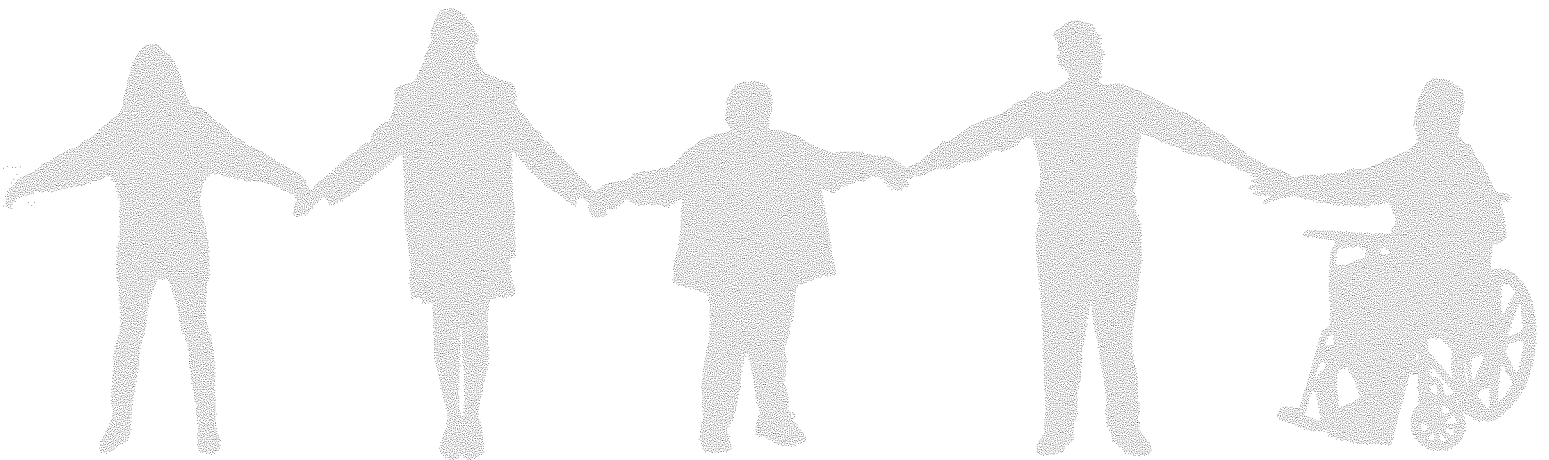
The Big Picture

Rental Assistance Programs

Rental Assistance Application Procedures

Helpful Hints

Emergency and Transitional Shelters



Rental Assistance Guide

A Resource for People with Developmental Disabilities

**FOR SAN DIEGO
AND IMPERIAL COUNTIES**

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Preface

Affordable and accessible housing is a need shared by all; however, for many it is a need not easily met. Many people have difficulty finding safe, affordable, comfortable, and accessible housing due to a lack of personal funds, or limited knowledge of housing programs, resources, and options. For persons with developmental disabilities, these hurdles may be even harder to overcome.

Community Interface Services was first able to delve into the field of housing after receiving an Incentive Funds Grant from San Diego Regional Center in 1995. Since that time, Community Interface Services has worked extensively with local housing agencies to increase access to safe and affordable housing for persons with developmental disabilities. For most low-income persons, whether developmentally disabled or not, renting an affordable home is only possible with assistance through housing agencies. This Guide focuses on rental assistance programs that help low-income households (including those with developmental disabilities) to save hundreds of dollars each month on rent, thereby providing a great opportunity to improve individuals' quality of life. The primary program of interest is Section 8 rental assistance, which is the most common and versatile form of assistance available.

Community Interface Services believes that all individuals have the right to make important decisions that affect their lives. The agency is dedicated to assisting persons with developmental disabilities to live as independently as possible and make truly informed decisions about their lives. Community Interface Services hopes that this Guide will help individuals to live independently to their fullest potential in the community.

Glossary

Community Development Block Grant—or CDBG, is an entitlement administered by HUD. Billions of dollars are given out to local communities each year. Local governments get a portion of this money determined by a formula based on the community's population and demographics. CDBG funds are to be used to improve communities by providing decent housing and a suitable living environment, and expanding economic opportunities, principally for persons with low and moderate incomes. Examples of CDBG funded projects include housing rehabilitation, new housing, accessibility modifications, improvement or construction of public facilities, and services such as health and child care.

Department of Housing and Urban Development—or HUD, is the agency of the federal government that designs, regulates, and funds housing programs throughout the country. HUD provides money to local housing agencies to support and increase affordable housing.

Emergency Shelter Grant—or ESG, another entitlement administered by HUD. ESG funds are to be used by local PHAs to provide emergency shelter facilities for homeless and displaced persons.

HOME—The HOME Investment Partnerships Programs is another source of housing funds for local and state governments. Through block grants, Congress has historically appropriated about \$1.4 billion per year to approximately 500 state and local jurisdictions. HOME grants are especially important because they are very flexible in how they can be used, and are targeted towards low-income persons. HOME funds are used for acquisition and rehab of affordable rental housing, new construction, and tenant-based rental assistance, such as Section 8.

Housing Opportunities for Persons with AIDS—or HOPWA, another smaller entitlement to provide money for housing for persons with AIDS.

Public Housing Agency—or PHA, is the branch of local government that administers housing and community development programs. A PHA may also be known as a community development commission or a housing commission, and can be at either the city or county level. For rental assistance programs, an individual deals directly with the local PHA.



Section | The Big Picture

United States Department of Housing and Urban Development

Local Housing Agencies and Government

Community Housing Partnership

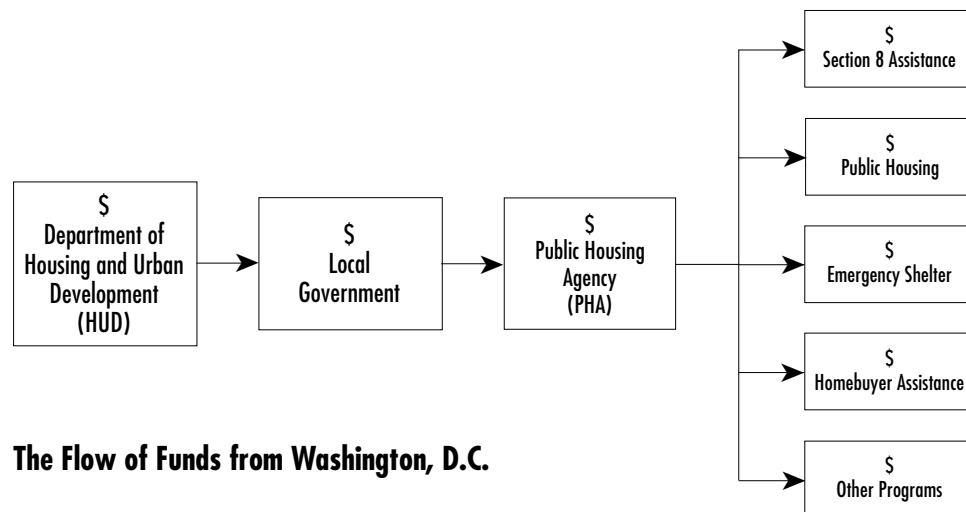


United States Department of Housing and Urban Development

The United States Department of Housing and Urban Development (HUD) is the branch of the federal government that is responsible for funding and regulating the majority of affordable housing programs in the United States. People who are attempting to receive rental assistance often believe they are “applying to HUD” or being placed on the “HUD waiting list”, but this is not quite correct and can cause some confusion. While HUD provides money for rental assistance programs and regulates how the money is to be used, it does not directly administer the actual programs—this task is left up to the local and county governments that receive the money from HUD. Individuals seeking rental assistance deal directly with their local housing agency, not with HUD. The HUD web site, www.hud.gov, provides a great, in-depth explanation of Section 8 and other rental assistance programs.

HUD provides money to the local and county governments in the form of grants or large sums of money that are designated for certain eligible housing and community development programs. There are several types of these programs—Community Development Block Grants (CDBG), HOME funds, Emergency Shelter Grants (ESG), and Housing Opportunities for People With AIDS (HOPWA).

Once the local governments receive their money from HUD, they determine how to use it, within the guidelines set by HUD. Most affordable housing and rental assistance programs, such as Section 8 and public housing, are funded through CDBG, HOME, or Section 8 funds and are run by the local public housing agency (PHA).



The Flow of Funds from Washington, D.C.

Local Housing Agencies and Government

Individuals do not apply directly to HUD for rental assistance; they apply to the PHA that serves the area in which they live. This distinction is important to keep in mind since each PHA may have slightly, or in some cases, significantly, different procedures and policies. Individuals need to be aware of and familiar with the policies of the PHA they are dealing with, and know that one PHA may have different policies than other PHAs they may have dealt with in the past or the PHA in the neighboring town.

The amount of money HUD allocates to a local government, either city or county, is determined by a formula which takes into account local population and demographics. This amount varies from year to year depending on HUD's budget and local factors. Once HUD notifies the local government how much money will be available for the next year, the local government determines how the money will be used.

The process by which the money is allocated on a local level is open for public comment and input, and usually takes place in regular city council or board of supervisors' meetings. After receiving input from the public, the city council or county supervisors designates the amount of money to go to each of the various programs. The PHA then administers the money for the programs as directed by the city council or county supervisors.

Community Housing Partnership

In 2000, Community Interface Services gave a new, separate identity to its ongoing housing project—Community Housing Partnership. Community Housing Partnership is funded through a grant from the San Diego Regional Center specifically to assist Regional Center service recipients to access affordable housing. A primary focus of Community Housing Partnership has been to work with local housing agencies to increase the availability of rental assistance for Regional Center service recipients.

Community Housing Partnership serves as the primary point of contact and information for San Diego Regional Center service recipients that are interested in learning more about Section 8 rental assistance and applying to the appropriate waiting list. Community Housing Partnership can be reached at (760) 729-4873 or toll free at (888) 308-8297, or through email at housing@cts.com. Community Housing Partnership has also established a web site specifically for housing and rental assistance at www.communityhousingpartnership.org. Click on "rental assistance" for a section devoted specifically to the Section 8 rental assistance program and how it can benefit Regional Center service recipients. Along with reading this Guide, visiting the web site is a good way to begin exploring rental assistance for persons with developmental disabilities.



Section || Rental Assistance Programs

Section 8

Public Housing and Subsidized Housing



Section 8

The major program for assisting very low-income families, elderly people, and people who have disabilities to rent decent, safe, and sanitary housing is called Section 8. Section 8 assistance comes in the form of a rental voucher, which is described in more detail below. Section 8 is what is known as “tenant-based” assistance, which means the assistance can go with the tenant if he or she moves. This is also called “portability”. It is not tied to a particular rental unit or complex. Once a person is determined eligible and receives a voucher, it can be used anywhere a landlord will accept it on any rental unit that meets the program standards. Under the Section 8 program, a tenant pays a share of the rent (generally about 30% of the household income) to the landlord; and the PHA pays the remainder of the rent directly to the landlord.

Landlords do have the option to refuse Section 8, and unfortunately many opt not to accept it. Currently, most of the San Diego area is experiencing record low vacancy rates (meaning there are not many rental units available), and in such a competitive market, there is little incentive for landlords to work with the Section 8 program. There is some extra burden on landlords in terms of paperwork from the PHA, and if they do accept Section 8, they must sign a lease with the PHA that takes precedence over their own lease. Many landlords attach a stigma to Section 8, feeling that Section 8 tenants will decrease the property value. Additionally, the PHA, to make sure that it is safe and sanitary, must inspect the rental unit annually.

On the positive side for landlords, they do have a guaranteed rent payment from the PHA. They have additional support from the PHA in dealing with tenants, especially if there are problems to resolve. And Section 8 tenants are screened by the PHA before being accepted into the program, so landlords can feel a little more confident about who they are renting to. However, given the pros and cons of the program, many landlords simply choose to refuse Section 8.

The low percentage of landlords that are willing to accept Section 8 can raise quite a dilemma for individuals who have been waiting for years and finally receive Section 8. In the case of a tenant who is already renting, he or she may find out that the current landlord will not accept the Section 8, in which case the tenant must decide between staying in the current unit and losing out on the assistance, or finding a new apartment and moving to an unfamiliar place that will accept the Section 8. In some cases, if a tenant has a good stable history with the landlord, the landlord may be willing to make an exception and take Section 8 for that particular individual. But again, it is up to the landlord to make that decision. In a particularly tight rental market, meaning the vacancy rate is very low and there are more renters than there

are available apartments, a landlord may be even less likely to accept Section 8. A landlord knows that s/he can refuse Section 8 and most likely still get the apartment rented very quickly to the next people who apply without Section 8.

The amount of assistance people receive through Section 8 varies depending on the rental rate of the apartment and household income. Generally, with a voucher a household pays about 30% of the household income in rent; this amount will vary depending on actual rent versus the Fair Market Rent (FMR), and the utility allowance.

General Procedures

To receive Section 8 rental assistance, a household must first apply, be placed on the waiting list, and then be found eligible once at the top of the waiting list. The length of time that a household must wait on the waiting list before receiving assistance varies depending on the area and the household’s level of need, but most households should expect at least a two or three year wait, in some cases up to five or more years. Section 8 is not an emergency assistance program—it is not a program to find emergency or transitional housing. There are other agencies that specialize in this type of housing, and this Guide includes a listing of some agencies that may be able to help (see Section V). However, these programs change frequently, and the local housing agency is the best place to start for current information on emergency or transitional housing.

To be eligible for rental assistance, a family or individual must qualify as very low-income—generally below 50% of the median income for the area in which the household resides. As of April 2001, 50% of the Area Median Income (AMI) for San Diego County is as follows:

Household Size	Income
1	\$19,900
2	\$22,750
3	\$25,600
4	\$28,450
5	\$30,750
6	\$33,000
7	\$35,300
8	\$37,550

Also, according to Section 214 of the Housing and Community Development Act of 1980, only United States citizens, nationals, or certain categories of eligible non-citizens may receive rental assistance. The PHA is required to review and verify income and citizenship status before providing rental assistance, and again at the annual recertification.



Each PHA has its own application procedures, which are discussed in detail in Section III. Once an individual applies, s/he is placed on the waiting list with all the other households that are waiting to receive assistance through the program. A waiting list is necessary because of the huge demand for assistance through the Section 8 program. There are only limited resources available, and never quite enough to meet the need.

Each PHA operates its own waiting list for its programs. Therefore, it is important to know which list an individual is applying for, and keep in mind that getting on one list does not mean the individual is on all lists, or even on the “right” list. The right list is the list for the PHA that covers the area where an individual lives and/or works. If an individual lives and works in two separate areas, s/he can sign up on the two separate lists. The number of people on the various waiting lists ranges from about 18,000 for the City of San Diego to several hundred for the City of Encinitas.

Due to the large number of people requesting assistance, the individuals on the list may be ranked according to certain “preferences” or “priorities” the PHA uses to attempt to ensure that those most in need of assistance receive it before those less in need. Preferences vary from one housing agency to another, and can change from year to year. Some examples of preferences include:

1. Living or working in the jurisdiction.
2. Veteran status.
3. Currently working or in a job training program.
4. Paying more than 50% of income in rent.
5. Displaced by domestic violence, hate crimes, inaccessibility, disaster, or government action.
6. Living in substandard housing or homeless.

Recently, some PHAs have introduced a new category and given this group highest priority. Households earning less than 30% of the Area Median Income may now be served before any other households. This is to ensure that the poorest of the poor, the households with the most desperate need, receive assistance as soon as possible. Those who qualify for a preference receive assistance before those without a preference, and those with a preference and an earlier application date receive assistance before those with the same preference and a later application date.

When the PHA receives an application, the household is placed on the waiting list according to the preferences indicated on the application. The PHA determines a

household's preferences based on the information provided on the application for assistance. Therefore, it is critical that the application be filled out correctly and completely.

Once a household is placed on the waiting list, there generally is no further action required unless the household situation changes. Changes in household income, household size, and most importantly, address, must be reported to the PHA. This is important because these changes may effect the household's preferences, and therefore, the position on the waiting list. A change of address is especially important because the PHA will need a current address to notify a household when it reaches the top of the waiting list. As the waiting period can be several years, it is not unusual for a household to change addresses while on the waiting list, forget to notify the PHA of a current address, and end up missing out on assistance because the PHA cannot contact the household when it finally reaches the top of the waiting list. There are always hundreds or thousands of other people waiting for assistance, so the PHA cannot take the time to hunt for a household that does not respond to a notification.

PHAs may also periodically conduct "purges" or updates to their waiting list. This process helps the PHA reduce the size of the waiting list and make the list more manageable. A notice is sent to all households on the waiting list asking them to update or verify the information they provided on their original application, and return the notice to the PHA within a specified time period (usually about two weeks). Those that do not respond may be "dropped" from the waiting list, so it is imperative to respond.

When an individual or household reaches the top of the waiting list, the PHA sends a letter asking him or her to come into the office to verify eligibility. At this time, the PHA will make an official determination of eligibility. The eligibility process involves verifying income, expenses, citizenship status, and any preferences or priorities indicated on the original application. Only individuals or households with income below the program limits are eligible for assistance. A household or individual's income may not exceed 50% of the area median income. For an individual in San Diego County, this means he or she can earn no more than \$19,900 annually, or about \$1,658 per month. If an individual's situation has changed since the original application and s/he is no longer eligible for a preference, the PHA may determine the individual to be ineligible for assistance at this time and place him/her back on the waiting list.

If an individual is eligible for assistance, s/he will be scheduled for another session with the PHA staff during which the paperwork and procedures of the program will be explained, along with the individual's rights and responsibilities under the program.



Vouchers

Section 8 assistance comes in the form of a voucher which entitles the recipient to have a portion of his or her rent paid through the PHA. The individual uses the voucher to rent an apartment from a landlord that will accept rent payments from the PHA through the Section 8 program. The voucher is not cash assistance directly to the voucher holder. Rather, the PHA pays a portion of the rent each month directly to the landlord, while the voucher holder pays the remainder.

Aftercare

The Aftercare program is a form of Section 8 assistance set aside specifically for persons with mental, physical, or developmental disabilities. Persons with a disability may have a better chance of receiving rental assistance through the Aftercare program rather than the regular Section 8 waiting list. Since an individual must have a disability to receive an Aftercare certificate, the waiting list is considerably shorter, usually around one year as opposed to three—five years for most other waiting lists. To qualify for Aftercare, eligible persons must:

1. Have very low incomes.
2. Be certified as having a mental, physical, or developmental disability.
3. Be participating in a planned, ongoing program of rehabilitation, education, or support services related to the disability.

Not all PHAs have an Aftercare program. In Imperial County, the Imperial Valley Housing Agency administers Aftercare. In San Diego County, the San Diego Housing Commission administers Aftercare, but individuals do not need to live or work in San Diego City to receive Aftercare. Unfortunately, for the past several years, the San Diego Aftercare waiting list has been closed, meaning there are no new applications being accepted. The San Diego Housing Commission does anticipate opening up the Aftercare waiting list sometime in the future.

To apply for Aftercare, an individual must first contact the proper certifying agency: County Mental Health for mental disabilities, the Access Center for physical disabilities, and Regional Center for developmental disabilities. The agency certifies the disability, and sends the appropriate paperwork to the PHA. The individual then is placed on the Aftercare waiting list and is notified when s/he reaches the top of the waiting list.

Cooperative Waiting List

In San Diego County, all of the San Diego PHAs have joined together to form a cooperative waiting list agreement whereby individuals can transfer from one waiting

list to another with out starting all over on the new list and losing an earlier application date. This can be a tremendous benefit for individuals applying for Section 8 assistance, especially for those individuals who may move from one area to another frequently. Before this agreement, an individual could be on one waiting list for several years, move to another city in San Diego, and then have to start all over on the list for the new area, thereby losing the previous several years of waiting list time.

Since the agreement has been in effect, in most cases an individual no longer needs to start over after moving. For example, let's say a hypothetical individual, Joe, lived in Carlsbad and applied to the Carlsbad waiting list in June 1998. In June 2001, Joe moves to the City of San Diego. Rather than starting over on the City of San Diego waiting list with a June 2001 application date, Joe can transfer his Carlsbad application date of June 1998 to the City of San Diego waiting list, thereby not resetting the clock and losing the previous three years he had already been on the Carlsbad waiting list.

In order to take advantage of the cooperative waiting list, an individual simply needs to write a letter to the original PHA notifying them of the move and requesting a transfer to the new PHA waiting list. The original PHA then makes arrangements with the new PHA to transfer the original application date. The individual will still need to complete the application paperwork with the new PHA, as these forms differ from one PHA to the other, but the individual will be able to preserve the original application date.

This cooperative agreement is unique to San Diego, and is only in effect between the PHAs in San Diego County: Carlsbad, Encinitas, Oceanside, San Diego City, San Diego County, and National City. If an individual applied to a San Diego waiting list and then moved to another county, such as Los Angeles, s/he would not be able to transfer the application date and would need to start over with the new PHA.

Finding a Section 8 Rental

Once a household finally receives a Section 8 voucher, the next big hurdle is actually finding a unit to rent that accepts the Section 8 voucher. As mentioned previously, this is not always very easy. Landlords do not have to accept Section 8, and in a very competitive rental market, many simply choose not to. As a result, many persons who receive a Section 8 voucher are unable to find an acceptable unit to rent with the voucher.

When an individual first receives the Section 8 voucher, he or she typically has a total of 120 days, or about four months, to find an acceptable place to rent. This may



seem like plenty of time, but with the extremely low vacancy rates that are prevalent in Southern California, there may actually be very few available apartments to look at during that time, and even fewer that accept Section 8. The PHAs realize this, and want to help people be able to find a unit to rent with the Section 8 voucher.

Therefore, many PHAs have been willing to extend the initial four month period up to six or even eight months to give people a greater chance at finding an acceptable rental. This extension may need to be requested as a “reasonable accommodation”. An extension may be especially needed for persons with developmental disabilities who may have more specific needs that narrow the rental possibilities even further. It is important for an individual to let the PHA know well ahead of time if he or she is having a great deal of difficulty finding a rental and may need an extension. Once a deadline expires, it is generally too late to request an extension. Also, an individual should keep track of the rental units he or she has checked out during the search, as this will help to document the situation for the PHA.

Most PHA staff are aware of the landlords and apartment complexes in their area that are currently accepting Section 8, so the PHA is the best source to start the search for a Section 8 rental. Many PHAs even publish lists of current Section 8 rentals in their area, and these lists are available at the PHA office for the Section 8 voucher recipients. In fact, the San Diego Housing Commission distributes an extensive, frequently-updated list of San Diego City Section 8 rentals at its office and various community center locations, and even makes the list available on its web site (www.sdhc.net).

Portability

Section 8 assistance is “portable”, which means the recipient can take it with him or her when moving, even to another state or across the country. Once an individual receives a Section 8 voucher, it stays with that individual as long as the program standards and eligibility requirements are met. Some PHAs require that an individual use the assistance in that PHA’s jurisdiction for one year before “porting out”. If a Section 8 recipient wishes to move to another area, s/he must notify the PHA which currently provides the Section 8 assistance, so that the PHA can coordinate the porting to the new PHA.

Program Standards

Once individuals receive assistance, they must continue to meet the standards of the program in order to continue receiving assistance. One important standard is the income criteria. If income increases, such as through a raise or another job, an individual may no longer be eligible for assistance.

An individual or household receiving assistance must also continue to fulfill its responsibilities under the program. Again, these may vary somewhat from one PHA to another, and will be explained in depth by PHA staff during intake, but generally there are five major responsibilities for program participants:

1. Payment of their portion of the rent in a timely manner.
2. Reporting any changes in income or household size.
3. Maintaining the property in decent, safe, and sanitary condition.
4. Giving 30 days written notice of intent to move.
5. Complying with all lease requirements.

There are several common reasons why individuals or families may be dropped from rental assistance programs. One common reason is failure to maintain the household in a safe and decent fashion. Under the Section 8 program, a residence is inspected annually. If there are damages beyond normal wear and tear and necessary repairs are not made within a reasonable length of time, assistance may be terminated.

Another common problem is having unauthorized persons living in the household. If a person moves into the household as a permanent resident, s/he must be added to the lease and his/her income will be added to the household income. In some cases, this may put the household income above the program limits and therefore the household may lose assistance. Conversely, if a household resident moves out, this change must also be reported to the PHA.

Fair Market Rent and Utility Allowance

When an individual receives a Section 8 voucher, s/he needs to find a rental unit where the voucher can be used. In order to do this, an individual will need to be aware of the fair market rent (FMR) and the utility allowance. The FMR is an amount determined by HUD for each county based on the average rents in that county, and serves as the payment standard that the housing agency can approve for a rental unit. This means that, for example, if an individual receives a one-bedroom voucher, s/he must find a rental unit that can be rented for the FMR or less. The FMRs are updated at least annually to keep pace with the local rental market. In San Diego, the FMRs as of June 2001 are:

Studio	\$ 689
1 bedroom	787
2 bedroom	985
3 bedroom	1,371
4 bedroom	1,617



A voucher holder does have the option of renting an apartment that costs more than the FMR, but the voucher holder must pay the additional rent without assistance from the PHA. However, the household may not pay more than 40% of the household income for rent, so there is still a limit to the rent that can be charged.

The utility allowance is an estimate of the tenant's expected utility costs for a particular unit, based on the cost of utilities in the area, the type of utilities in a particular unit (gas stove, electric heat, etc.), and what utilities are included in the rent of the unit. Therefore, the utility allowance will vary depending on the housing agency and the particular unit. The utility allowance is calculated by the housing agency and is used to determine the tenant's share of the rent. When the tenant pays utilities, the utility allowance will be calculated and his/her share of the rent will be less than when the owner pays the utilities.

Live-in Attendants

If an individual requires a live-in attendant in order to live safely in the community (such as a supported living situation), the PHA may authorize a two-bedroom unit instead of a one-bedroom unit, and the attendant's income should not be counted for eligibility. For example, if an individual with SSI income of \$740 has a live-in attendant (household of two), the PHA can authorize a two-bedroom unit and the individual will only pay 30% of his/her income (not the total household income), or approximately \$222 for rent.

Since authorizing a two bedroom certificate involves a greater cost for the PHA, each PHA may have its own guidelines, but generally will require some form of proof or documentation (such as a doctor's letter) verifying that the attendant is indeed necessary for the individual's health and/or safety. If an individual requires a live-in attendant, s/he should check with the local PHA to determine exactly what the guidelines are.

Shared Living Arrangements

Generally, "Shared Living" refers to one or more unrelated adults living together, such as two unrelated SSI recipients living together simply for the purpose of reducing living expenses by sharing rent and utility costs. Some PHAs may be more supportive of this practice than others. Typically, if several unrelated adults live together, the PHA will consider them as one household and combine all the incomes, which may put the household over the income limits for the program. Or the PHA may reduce the number of bedrooms, meaning a household of three unrelated individuals may only receive a two-bedroom certificate.

A PHA that is especially supportive of shared housing may consider each unrelated individual to be a “family of one”, meaning that all the incomes would not be combined and each individual has a right to a separate bedroom. So, the individual would still pay 30% of his/her income, and the PHA would pay the rest of that individual’s share of the total rent. Again, the policies on shared housing are different for each PHA; individuals should contact their local PHAs to find out exactly what current policies are. One good thing about the current low vacancy rate is that it encourages housing agencies to be more creative and flexible with finding unique ways to get people into housing.

For the purposes of applying for assistance, an individual who currently is in a shared housing arrangement should determine if s/he wishes to stay in that arrangement or would prefer to move out if assistance is received. If housing is being shared only for the purpose of reducing expenses and the individual would like to move out with the assistance, the individual should not count the other roommate’s income on the application, even though they are currently living together. If the individual wishes to live alone, then only the individual’s income and information should be included on the application.

Public Housing and Subsidized Housing

Another form of rental assistance is called public housing or subsidized housing. Public housing and subsidized housing are generally apartments that were built, renovated, or purchased using HUD funding with the stipulation that all or a percentage of the apartments be affordable for low-income households. Like Section 8, there is typically a waiting list for these programs, but the lists may be considerably shorter than for the Section 8 program. Also like Section 8, a tenant in public or subsidized housing generally pays 30% of his/her income in rent. However, unlike Section 8 which is tenant-based assistance, public and subsidized housing is “project-based” assistance, meaning the assistance is tied to the particular project—if a tenant moves, s/he cannot “take” the assistance with them.

Public housing apartments are usually owned and operated by the PHA, while subsidized housing is usually privately owned. For public housing, an individual should apply through the PHA; some PHAs will automatically place applicants for Section 8 on the public housing waiting list as well. For subsidized housing, an individual should apply directly at the apartment complex. Not all PHAs have public or subsidized housing in their jurisdiction. An individual should check with his/her local PHA for information on current public and subsidized housing opportunities.



Section **|||** Rental Assistance Application Procedures

San Diego County

Imperial County



San Diego County

Within San Diego County, there are a total of nine PHAs:

- City of Carlsbad Housing Agency (includes La Costa)
- Housing Department of the County of San Diego (includes Chula Vista, Coronado, Del Mar, El Cajon, Escondido, Imperial Beach, La Mesa, Lemon Grove, Poway, San Marcos, Santee, Solana Beach, Vista, and the unincorporated areas of the county)
- City of Escondido Housing Department
- City of Encinitas Housing Department (includes Leucadia, Cardiff, and Olivehain)
- City of Oceanside Housing Department
- San Diego Housing Commission
- City of Santee, Department of Housing and Redevelopment
- National City Housing Agency
- City of Vista Housing Department

However, not all of these nine PHAs administer their own Section 8 rental assistance programs. The PHAs that administer Section 8, or similar programs, are:

- City of Carlsbad Housing Agency
- City of Encinitas Housing Department
- City of Oceanside Housing Department
- San Diego Housing Commission (administers Aftercare as well as regular Section 8 program)
- Housing Department of the County of San Diego
- National City Housing Agency
- City of Vista Housing Department

The remaining two PHAs, in Santee and Escondido, contract with the county to administer the Section 8 program for their jurisdictions. The county also covers the remaining cities and towns that do not have their own PHA, as well as the unincorporated areas of the county. This section will provide specific information on application procedures and policies for the seven PHAs that do administer Section 8 or similar programs. While the information in this section is accurate at the time of publication, procedures may change from time to time. An individual should always follow the application instructions given by the PHA.

Aftercare

Note: As of June 2001, the Aftercare program operated by SDHC is temporarily not accepting any new applications.

San Diego Housing Commission
1625 Newton Avenue
San Diego, CA 92113-1038
(619) 578-7668
Contact person: Nancy Tooson

To apply for Aftercare assistance:

1. Obtain an "Aftercare Certification of Disability and Supportive Services" form from a certifying agency. See Appendix A for a sample of this form. The certifying agencies are:

Developmental Disabilities—San Diego Regional Center
Physical Disabilities—The Access Center
Mental Disabilities—County Mental Health

2. Read the instructions that accompany the form and complete only Part II.
3. Return this form by mail or in person to the individual's service coordinator or case manager at the certifying agency.
4. The certifying agency will complete the remainder of the form (certifying disability) and return it to the Housing Commission.
5. The individual is placed on the Aftercare waiting list and notified when s/he reaches the top of the list.

Note:

Aftercare applicants must meet the usual Section 8 eligibility criteria, and must be involved in an ongoing program of supportive services related to the disability and focused on increasing or maintaining independent housing in the community.

The final decision as to whether or not supportive services meet the eligibility criteria rests with the Housing Commission.



Carlsbad (includes La Costa)

City of Carlsbad Housing Authority
2965 Roosevelt Street, Suite B
Carlsbad, CA 92008
(760) 434-2810

To apply for Section 8 assistance:

1. Call (760) 434-2934 Monday through Friday between 8:00 a.m. and 5:00 p.m.
2. Listen to the instructions on the recording. At the end of the recording, clearly state name and mailing address and request a "Pre-Application" form for Section 8. See Appendix B for a sample of this form. The date this message is left will be recorded as the application date.
3. Within three weeks, the applicant should receive the form in the mail. Read the instructions that come with this form carefully, and fill out the form completely and accurately.
4. Return the form by mail or in person to the City of Carlsbad Housing Authority.
5. Once an individual reaches the top of the waiting list, s/he will be sent a more in-depth application to complete and return.

To report changes while on the waiting list:

1. Complete a "Request to Update Application" form. See Appendix C for a sample of this form. The update form may be picked up at the Carlsbad Housing Authority office or requested by phone.
2. Mail the completed form to:

Waiting List—Carlsbad Housing Authority
2965 Roosevelt Street, Suite B
Carlsbad, CA 92008-2389

Encinitas (includes Leucadia, Cardiff, and Olivenhain)

City of Encinitas Housing Department
505 S. Vulcan Avenue
Encinitas, CA 92024
(760) 633-2723

To apply for Section 8 assistance:

1. Call (760) 633-2723 Monday through Friday between 9:00 a.m. and 5:00 p.m. to request a "Pre-Application" form. Provide name and address for the form to be mailed to.
2. Read the instructions that come with this form carefully, and fill out the form completely and accurately. See Appendix D for sample of this form.
3. Return the form by mail to the address listed above. The date the form is received by the city of Encinitas Housing Department will be recorded as the application date, not the date it is mailed to the applicant.



National City

Community Development Commission
140 E. 12th Street, Suite B
National City, CA 91950-3312
(619) 336-4250

To apply for Section 8 assistance:

1. Call (619) 336-4250, Monday through Friday between 8:00 a.m. and 5:00 p.m. to request an "Application" form. Provide name and address for the form to be mailed to.
2. Read the instructions that come with this form carefully, and fill out the form completely and accurately. See Appendix E for sample of this form.
3. Return the application form to the address listed above.

Oceanside

City of Oceanside Housing Department
321 N. Nevada Street
Oceanside, CA 92054
(760) 966-4585

To apply for Section 8 assistance:

1. Obtain a "Pre-Application" form from the Oceanside Housing Department, Monday through Friday between 8:00 a.m. and 4:30 p.m. This form may also be requested by mail, or by phone by calling (760) 966-4585; provide a name and address for the form to be mailed to.
2. Read the instructions that come with this form carefully, and fill out the form completely and accurately. See Appendix F for a sample of this form.
3. Return the form to the Oceanside Housing Department. The date the pre-application is returned will be recorded as the application date, not the date it is picked up or mailed to the applicant.

To report changes while on waiting list:

1. Complete a "Waiting List Changes" form. See Appendix G for a sample of this form. The form may be picked up at the Oceanside Housing Department during regular office hours or requested by phone.
2. Return the form by mail or in person to the Oceanside Housing Department at the address listed above.



San Diego City

San Diego Housing Commission
P.O. Box 620279
San Diego, CA 92162-0279
(619) 231-9400

To apply for Section 8 assistance:

1. To request a "Waiting List Pre-Application" form write to Wait List at the San Diego Housing Commission address listed above. Include Social Security number, name, and address.

or

Complete an "Application Request/Change of Address" form and return it the address listed above. This form may be obtained by calling or writing to the San Diego Housing Commission. See Appendix H for a sample of this form.

2. The "Waiting List Pre-Application" form should arrive in about two weeks. Read the instructions that come with the form carefully, and fill out the form completely and accurately. See Appendix I for a sample of this form.

3. Return the application by mail using the envelope provided.

4. Within two months of applying, the applicant should receive a confirmation from the San Diego Housing Commission indicating the date of application, priority number assigned, and a list of ranking factors. If any of the information is incorrect, the Housing Commission should be notified in writing within two weeks.

To report changes while on the waiting list:

1. Changes must be reported in writing within two weeks, either by letter or by completing an "Application Request/Change of Address" form. See Appendix H for a sample of this form. An update form may be obtained by calling or writing the San Diego Housing Commission.

2. Address all correspondence to "Waiting List" and mail to the address listed above.

Note:

The Housing Commission will also place Section 8 applicants on the waiting list for their public housing programs.

San Diego County (includes Chula Vista, Coronado, Del Mar, El Cajon, Escondido, Imperial Beach, La Mesa, Lemon Grove, Poway, San Marcos, Santee, Solana Beach, Vista, and the unincorporated areas of the county)

Housing Authority of the County of San Diego
3989 Ruffin Road
San Diego, CA 92123-1890
(858) 478-5478

To apply for Section 8 assistance:

1. Call (858) 694-4890 or toll-free (877-478-5478 Monday through Friday between 8:00 a.m. and 5:00 p.m. and ask to apply for Section 8. Provide Social Security number, name, and address for application to be mailed to. The date of this request is recorded as the application date.
3. Within two weeks, the applicant should receive the application form. Read the instructions that come with this form carefully, and fill out the form completely and accurately. See Appendix J for a sample of this form.
4. Return the form by mail using the large envelope provided. Do not fold the application form.

Note:

Applicants for Section 8 are also placed on the waiting list for the public housing operated by the county if this preference is indicated on the application form.

The county owns and operates approximately 121 public housing rental units in Chula Vista.



Vista

City of Vista Housing Department
City Hall
600 Eucalyptus Avenue
Vista, CA 92085

While the County of San Diego administers the Section 8 program for the City of Vista, Vista operates a very similar program called Tenant Based Rental Assistance. This program has a waiting list administered by the City of Vista. Tenants pay about 30% of monthly income for rent.

To apply for Tenant Based Rental Assistance:

1. Call (760) 639-6193 Monday through Friday between 9:00 a.m. and 5:00 p.m. to request "Pre-Application" form. Provide name and address for the form to be mailed to.
2. Read the instructions that come with this form carefully, and fill out the form completely and accurately. See Appendix K for sample of this form.
3. Return the form by mail to:
Housing Department
City of Vista
P.O. Box 1988
Vista, CA 92085

The date the form is received by the city of Vista Housing Department will be recorded as the application date, not the date it is picked up or mailed to the applicant.

Note:

Unlike Section 8, only persons living and/or working in the City of Vista can use Vista Tenant Based Rental Assistance.

Imperial County

Within Imperial County there are two PHAs, which both operate Section 8 programs:

- Imperial Valley Housing Agency (includes El Centro, Brawley, Imperial City, Holtville, Calipatria, and Westmorland)
- Calexico Housing Agency

To apply for Aftercare assistance:

1. Contact a certifying agency. The certifying agencies are:
 - Developmental Disabilities—San Diego Regional Center
 - Physical Disabilities—The Access Center
 - Mental Disabilities—County Mental Health
2. The certifying agency will complete the paperwork and forward it to the Housing Agency.
3. The individual will be placed on the Aftercare waiting list and notified when s/he reaches the top of the list.

Imperial Valley (includes El Centro, Brawley, Imperial City, Holtville, Calipatria, and Westmorland)

Imperial Valley Housing Agency
1401 D Street
Brawley, CA 92227
(760) 351-7000

Branch Office (serving El Centro)
1690 W. Adams Avenue
El Centro, CA 92243
(760) 337-7500

At the time of publication the Imperial Valley waiting list is closed, but the Housing Agency is still accepting applications for the Aftercare waiting list.

Calexico

Calexico Housing Agency
1006 E. 5th Street
Calexico, CA 92231
(760) 357-3013

The Calexico Housing Authority only accepts applications for the waiting list once a year, usually in March or April. Notice of the application acceptance period is posted at the Calexico PHA office and in the local newspapers.



Section **IV** Helpful Hints

Tips for Section 8 Applicants

Credit Information



Tips for Section 8 Applicants

The following are some helpful hints for individuals with developmental disabilities applying for Section 8 rental assistance. There is no “magic word” to get rental assistance, but by following some of these common sense tips, the process will go more smoothly and the chances of receiving assistance will be increased.

- Work closely with support staff persons—getting a subsidy can be a complex process for anyone, and an extra person can help make sure that nothing gets missed. Let staff persons know when something arrives in the mail or a phone call is received from the housing agency, so they can help determine what to do next.
- When an individual starts to apply for a subsidy, s/he should start a file in which to keep all the papers. Applicants may receive a lot of paperwork and it is important to keep it all together in a safe place. A safe place could be a file folder in a file cabinet, a multi-pocket folder, a drawer or with other important papers—just a reliable system so that papers are easily located.
- The applicant should keep a sheet of paper in the file on which to record all contact with the PHA. Examples of things to keep track of are:
 - What correspondence is received and sent; and when it was sent or received. A date stamp may be helpful in keeping track of these dates; or the postmarked envelopes with a date stamp may be attached to the back of any correspondence.
 - Any conversations with a representative of the PHA, and what the outcome was (any instructions or follow up).
 - If possible, make copies of all paperwork sent to the PHA. Papers can get misplaced or lost in the mail and it is a good idea to have a backup copy.
- The applicant should always reply when the PHA tries to contact him/her. If the PHA calls or sends a letter and does not receive a response, the individual may lose his/her place on the waiting list.
- The applicant should notify the PHA of any change of address as soon as possible. The wait may be several years so it is important that the PHA always have a current address in order to inform the applicant when s/he reaches the top of the list. There are thousands of people waiting for subsidies, so if the PHA cannot locate the applicant, the subsidy will go to the next person on the list.
- The applicant may wish to check his/her status on the list every six months or so to verify that they haven’t accidentally been dropped and are moving up the list. Most PHAs can do this either over the phone or in writing.

Credit Information

Most prospective landlords will run a credit report on the applicant to help determine whether or not that person would be a reliable renter. It is important, then, that a person applying for a rental unit be aware of exactly what information is contained in his or her credit file, and that it is accurate. A copy of a personal credit report may be obtained by writing to either of the three major credit bureaus with the inclusion of an \$8.00 fee. See Appendix L for more information.

If a credit report reflects unusual activity, the individual may be a victim of fraud. Appendix M has contact information for fraud victims, and also signs for recognizing if fraud has been committed.



Section V Emergency and Transitional Shelters

Emergency Shelters

Transitional Shelters



Throughout San Diego and Imperial Counties, shelters for homeless individuals and families range from a bed for the night to service-enriched transitional housing programs.

Serving the needs of the diverse homeless population, these emergency shelters and transitional housing resources are organized in this section as follows:

- emergency shelter listings begin on page 48
- transitional shelter listings begin on page 55

Further information concerning emergency shelters and transitional housing may also be obtained by contacting the Public Housing Agency for the appropriate area or the following agencies:

In San Diego County

The Regional Task Force on the Homeless (858) 694-8722
3989 Ruffin Road
San Diego, CA 92123

The Info Line (619) 230-0997

In Imperial County

The Imperial Valley Housing Authority (760) 351-7000
1401 D Street
Brawley, CA 92227

Catholic Charities (760) 353-6822

Emergency Shelters

American Red Cross

North Coastal Service Center
2936 Oceanside Boulevard
Oceanside, CA 92054

(760) 757-5403

North Inland Service Center
311 E. Valley Parkway
Escondido, CA 92025

(760) 745-3221

East County Service Center
1283 E. Main Street, Suite 101B
El Cajon, CA 92021

(619) 440-7813

Imperial Valley Service Center
781 Broadway

(760) 352-4541

El Centro, CA 92243

South Bay Center

(619) 422-5226

311 Del Mar Avenue
Chula Vista, CA 91910

Immediate disaster relief, shelter, and financial assistance. Also offers instruction in First Aid and C.P.R.

The Bridge

(619) 521-3939

San Diego Youth and Community Services
3151 Redwood Street
San Diego, CA 92104

Provides shelter for runaway teens.

Brother Benno's Foundation

(760) 722-3476

Good Samaritan Shelter
902 Seagaze Drive
Oceanside, CA 92054

Emergency shelter for adult men. Must be willing and able to work. Stay limit: 3 day emergency shelter.

Center for Community Solutions

(619) 233-8984

4508 Mission Bay Drive
San Diego, CA 92109

Hotline (858) 272-1767

Provides counseling services and legal clinic.



Community Research Foundation

Halcyon Crisis Center (619) 579-8685
1664 E. Broadway
El Cajon, CA 92021

Isis Center (619) 575-4687
892 27th Street
San Diego, CA 92154

Jary Barreto Crisis Center (619) 232-4357
2865 Logan Avenue
San Diego, CA 92113

New Vistas (619) 239-4663
734 10th Avenue
San Diego, CA 92101

Turning Point Crisis Center (760) 439-2800
1738 S. Tremont Street
Oceanside, CA 92054

Vista Balboa (619) 233-4399
545 Laurel Street
San Diego, CA 92101

Short term crisis residential treatment facility for adult men and/or women who are severely mentally ill. Stay limit: 14 days.

County Mental Health Services Shelter Beds

P.O. Box 85524
San Diego, CA

Central (619) 692-8760
South Bay (619) 595-4400
East County (619) 441-6550
North Coastal (760) 967-4475
North Inland (760) 741-4461

Outpatient services for adults who are mentally ill.

Crisis House

1034 N. Magnolia
El Cajon, CA 92020

(619) 444-9926

Emergency motel vouchers for 1–2 weeks, as funding permits. Referrals to shelters.

Department of Social Services (DSS)

1355 3rd Avenue (619) 427-9660
Chula Vista, CA 91911

220 S. 1st Street (619) 579-4355
El Cajon, CA 92019

463 N. Midway Drive (760) 739-6060
Escondido, CA 92027

7065 Broadway (619) 464-5114
Lemon Grove, CA 91945

1315 Union Plaza Court (760) 754-5757
Oceanside, CA 92054

1130 10th Avenue (619) 236-2550
San Diego, CA 92101

1255 Imperial Avenue (619) 338-2555
San Diego, CA 92101

4588 Market Street (619) 236-7501
San Diego, CA 92102

5201 Ruffin Road, Suite K (858) 565-5598
San Diego, CA 92123

Assists in obtaining food, clothing, shelter, and counseling for individuals in critical need. Also provides welfare, food stamps, and general relief for eligible individuals in San Diego County.

East County Emergency Shelter (619) 447-2428

290 S. Magnolia
El Cajon, CA 92020

Provides shelter, food, laundry, and housing referral.

Episcopal Community Services (619) 260-8100

Emergency Assistance Shelter
P.O. Box 33168
San Diego, CA 92163-3168

Emergency shelter for adult men. Stay limit: 30 days.



Eye Counseling and Crisis Services

(760) 747-6281

Hidden Valley House
200 N. Ash Street
Escondido, CA 92017

Emergency shelter for families with children. Targeted for victims of domestic violence. No male children over 10 years old. Stay limit: not specified.

Interfaith Shelter Network's Rotational Shelter Program

(619) 702-5399

(Program has nine geographic locations)
1880 3rd Avenue, Suite 12
San Diego, CA 92101

Guests and shelter rotate to different congregation every two weeks. Emergency shelter for singles, families, and/or couples. Must be referred and receive case management from a participating case management agency. Guests leave shelters at 7:00 a.m. and return at 5:00 to 6:00 p.m.

Labor's Community Service Agency

(619) 299-0290

2615 Camino Del Rio South
San Diego, CA 92108

Services include job placement and referral to retraining programs, affordable housing information and referral, emergency assistance, home security rehabilitation, and worksite health and safety.

Libre! Services for Women and Children

(760) 942-5645

P.O. Box 234294
Encinitas, CA 92023

Hotline (760) 633-1111

Emergency shelter for families with children or single women who are victims of domestic violence. Stay limit: 90 days.

Neighborhood House

(760) 357-6875

506 E. 4th Street
Calexico, CA 92231

Emergency shelter for women and children. Stay limit: not reported.

North Coastal Service Center

(760) 721-2117

125 S. Tremont Avenue, Suite A
Oceanside, CA 92054

Emergency assistance, food package distribution, prescriptions, bus tokens and gas are provided on a limited basis as funds allow.
Hours: 10:00 to 11:45 a.m. and 1:00 to 3:45 p.m.

North County Interfaith Council

(760) 489-6380

Men's Shelter
Women's Shelter
430 N. Rose
Escondido, CA 92027

Men's Shelter—First availability to students in cook training program, then walk-ins.

Walk-ins: 30 day maximum stays. Cooks in training: 10 weeks average stay. Single men, employable, and alcohol and drug free.

Women's Shelter—Emergency shelter for mentally ill women who have been screened by CMH. Stay limit: 30 days.

Emergency assistance, food package distribution, prescriptions, and referral to shelter. Bus tokens and gas are provided on a limited basis as funds allow.

Hours: 10:00 to 11:45 a.m. and 1:00 to 3:45 p.m.

Oceanside Police Department

(760) 966-4906

1617 Mission Avenue
Oceanside, CA 92054

Offers one-night shelter for eligible applicants. Must come in and a referral to a shelter will be made; must have a picture I.D., no family or friends to stay with, and no outstanding warrants.

Project Safehouse

(619) 267-8023

Emergency shelter for families with children who are victims of domestic abuse. Stay limit: 30 days.

Rachel Grosvenor Emergency Shelter for Women and Children

(619) 687-3720

San Diego Rescue Mission
939 S. 16th Street
San Diego, CA 92113

Emergency shelter for families with children who are victims of domestic violence.

Stay limit: 5 days.

Rachel Grosvenor Emergency Shelter for Men

(619) 234-2109

San Diego Rescue Mission
1150 J Street
San Diego, CA 92101

First come first served basis, opens at 9:00 a.m. Stay limit: 5 days.

**Rachel's Night Shelter****(619) 696-0873**

Catholic Charities
759 8th Avenue
San Diego, CA 92101

Single women only. Must be clean and sober. Stay limit: determined by each participant's self help efforts. After two weeks, women must begin work with staff on short and long term goals.

St. Clare's Home**(760) 741-0122**

Emergency Shelter
2091 E. Valley Parkway
Escondido, CA 92027

Emergency shelter for women with children. Stay limit: 1 year.

St. Vincent de Paul Village**(619) 233-8500**

1501 Imperial Avenue
San Diego, CA 92101

Shelter for single adults. Must be referred and receive case management from participating social service agency. I.D. required. Stay limit: 1-120 days.

Salvation Army

648 3rd Avenue, Suite G
Chula Vista, CA 91911

(619) 422-9295

1011 E. Main Street
El Cajon, CA 92021

(619) 440-3579

1301 Las Villas Way
Escondido, CA 92026

(760) 745-8616

3935 Lake Boulevard
Oceanside, CA 92056

(760) 631-8212

825 Seventh Avenue
San Diego, CA 92101

Headquarters (619) 239-8027
Donation Pickup (619) 239-2301

Provides short term casework counseling and emergency assistance including food, clothing, lodging, and transportation.

Salvation Army**Administration (619) 239-8027**

San Diego Family Emergency Lodge
726 F Street
San Diego, CA 92101

Emergency shelter for women or families with children. Stay limit: 1 day.

San Diego Youth Involvement, Inc.

(619) 238-1946

Southeast Emergency Quarters
For Battered Women with Children
2491 Island Avenue
San Diego, CA 92102

Southeast Emergency Quarters—Emergency shelter for families with children. Stay limit: 14 day maximum.

United Way Info Line

North County Coastal (760) 943-0997

North County Inland (760) 740-0997

San Diego (619) 230-0997

Toll free from other areas (800) 227-0997

This service has helpful information on more than 3000 services provided throughout San Diego County.

Volunteers of America

(619) 447-2428

Carlton G. Luhman Center
290 S. Magnolia Avenue
El Cajon, CA 92021

For the Family—Emergency shelter for men and women 18 and over, families, and couples. Must have picture ID. Minors must be accompanied by guardian. Stay limits: single—3 days; families—14 days, extended up to 28 days with special circumstances.

For the Severely Mentally Ill—Emergency shelter for adults. Stay limit: up to 3 days; must have a referral.

Womanhaven Center for Family Solutions

(760) 353-6922

395 Broadway, Suite #5
El Centro, CA 92243

Emergency shelter for battered women and children. Stay limit: not reported.

Women's Resource Center

24 hour hotline (760) 757-3500

1963 Apple Street
Oceanside, CA 92054

Emergency shelter for battered women and children. Nominal fee based on ability to pay. Must be over age 18 or have guardian approval. Provides counseling and supportive services for families experiencing domestic violence and for victims of sexual assault. Information and referral services are also available. Stay limit: 30 days.

**YWCA****(619) 234-2164**

Casa de Paz Battered Women's Services
1012 C Street
San Diego, CA 92101

Emergency shelter for battered women and children. Donation: \$1/women; \$.50/child; no one turned away due to insufficient funds. Stay limit: 30 days.

Transitional Shelters

Transitional shelters provide a bridge between the emergency shelter and permanent housing. Programs emphasize the preparation of homeless persons or families for independent living and self-sufficiency. Clients are generally allowed to stay for a period of two months or more.

Some programs are specifically tailored to the special needs of a particular homeless population; others serve clients who may not necessarily be homeless. Emphasis is placed on the treatment of the specific problems of the population served. Some programs charge fees for services provided to clients.

Bacdo Latino AIDS Organization**(619) 563 3901**

2513 Union Street
San Diego, CA 92101

Transitional shelter for adults who have AIDS and symptomatic HIV disease. Stay limit: not reported.

Alpha Project for the Homeless**(760) 630-9922**

Casa Raphael
993 Postal Way
Vista, CA 92083

Transitional shelter for adult men. Focus is on recovery from alcohol or drug abuse. Stay limit: minimum 7–12 months.

Areta Crowell Center**(619) 233-7757**

531 16th Street
San Diego, CA 92101

Outpatient psychiatric clinic.

Casa Nueva Vida for Families

(619) 420-3620

South Bay Community Services
315 4th Avenue, Suite E
Chula Vista, CA 91910

Transitional shelter for families. No alcohol or drugs. Stay limit: up to 60 days.

Catholic Charities, Rachel Women's Center

(619) 696-0873

759 8th Avenue
San Diego, CA 92101

Transitional shelter for adult women 21 or older. Emotionally stable, motivated, and capable of employment. Stay limit: 6 to 8 months.

Community Housing of North County

(760) 432-6878

1820 S. Escondido Boulevard, Suite 101
Escondido, CA 92025

Transitional shelter for families with children. Applicants must be referred and case managed by a local agency. Must meet minimum income criteria and be working on individualized plans to achieve stability within a six month period. Stay limit: 6 months.

Community Resource Center

(760) 753-8300

Transitional Housing
P.O. Box 234294
Encinitas, CA 92023

Transitional shelter for women with children who are victims of domestic violence. Stay limit: 6–18 months.

CRASH

(619) 233-8054

Golden Hill House
2410 E Street
San Diego, CA 92101

Provides alcohol and drug treatment recovery services. Stay limit: 9–12 months.

CRASH

(619) 233-8054

Short Term City Heights
4161 Marlboro
San Diego, CA 92105

Provides alcohol and/or drug treatment recovery services. Stay limit: 60–90 days.

**CRASH****(619) 233-8054**

Short Term Two
4890 67th Street
San Diego, CA 92108

Provides alcohol and drug treatment recovery services. Stay limit: 3 months.

Episcopal Community Services**(619) 232-0964**

HELP for Men
HELP for Women
1545 2nd Avenue
San Diego, CA 92101

Housing for mentally ill adults.

Eye Counseling and Crisis Services**(760) 439-6702**

Family Recovery Center
Transitional House
1100 Sportfisher Drive
Oceanside, CA 92054

Family Recovery Center—Alcohol and drug treatment and recovery services. Stay limit: 12 months.

Transitional House—Transitional shelter for women and children. Stay limit: 12 months.

Fellowship Center**(760) 745-8478**

737 E. Grand Avenue
Escondido, CA 92025

Transitional shelter for men. All clients receiving alcohol and drug treatment and recovery services. Stay limit: 12 months.

Fraternity House, Inc.**(760) 736-0292**

20702 Elfin Forest Road
Escondido, CA 92029

State-licensed, residential care facility for the chronically ill. Provides homeless men and women disabled with AIDS, with permanent housing, meals, 24 hour supervision, and hospice care.

Heartland House**(619) 287-5460**

5855 Streamview Drive
San Diego, CA 92105

Transitional shelter for adult men. All clients receive alcohol and drug treatment and recovery services. Stay limit: 12 months.

House of Metamorphosis

(619) 236-9492

2970 Market Street
San Diego, CA 92102

Long term residential alcohol and drug treatment center. Stay limit: 12 months.

Interfaith Shelter Network's Wings

(619) 563-9878

Administration (619) 702-5399

Ecumenical Council of San Diego County
Transitional Housing Program—El Nido
P.O. Box 3628
San Diego, CA 92163

Transitional shelter for families with children who have been victims of domestic violence. Must be screened and work with a case manager. Must have income and at least six months sobriety if substance abuse has been a problem. Stay limit: 12 months.

La Posada Guadalupe

(760) 929-2322

Catholic Charities
2472 Impala Drive
Carlsbad, CA 92008

Transitional shelter for drug and alcohol free adult males—especially farm workers and day laborers. Stay limit: 60–90 days.

Metropolitan Area Advisory Committee (MAAC) Project

(619) 262-4002

Casa de Milagros
1127 S. 38th Street
San Diego, CA 92113

Transitional shelter for adult women. Clients receive alcohol and drug treatment and recovery services. Stay limit: 12 months.

Metropolitan Area Advisory Committee (MAAC) Project

(619) 426-4801

Nosotros
73 N. 2nd Avenue, Building B
Chula Vista, CA 91910

Transitional shelter for adult men. Clients receive alcohol and drug treatment and recovery services. Stay limit: 12 months.

**North County Interfaith Council****(760) 489-6380**

Genesis
Mens' Shelter
Tikkum Home
430 N. Rose
Escondido, CA 92027-2402

Genesis—Transitional shelter for families with children. Must be motivated to work actively to achieve stability within one year. Must remain drug and alcohol free and participate in job training, counseling, and case management program. Stay limit: 12 months.

Mens' Shelter—Transitional shelter for adult men, targeting veterans. Stay limit: 1 month.

Tikkum Home—For adult women, targeting severe mental illness. Stay limit: 1 month.

North County Serenity House**(760) 741-5098**

Serenity House
Sober Living Houses
123 S. Elm Street
Escondido, CA 92025-4534

Serenity House—Transitional shelter for adult women. Clients receive alcohol and drug treatment and recovery services. Stay limit: 12 months.

Sober Living Houses—Transitional shelter for families with children and adult women. Clients receive alcohol and drug treatment and recovery services. Stay limit: 12 months.

Pathfinders**(619) 239-7370**

2980 Cedar Street
San Diego, CA 92102-1515

Transitional shelter for adult men. Clients receive alcohol and drug treatment and recovery services. Stay limit: 9 months.

Rachel Grosvenor Home for Women and Children Step Program **(619) 687-3720**

San Diego Rescue Mission
939 S. 16th Street
San Diego, CA 92113

ID required. Sixty day restriction upon acceptance. Initial interview required. Must be willing to make a one-year commitment. Stay limit: 18 months.

San Diego Chinese Center

(619) 234-4447

428 Third Avenue
San Diego, CA 92101

Bilingual social services include translation and interpretation, information and referral, transportation for medical needs, health, welfare, employment, housing, immigration, and family relations for the Chinese community.

San Diego Rescue Mission

(619) 234-2109

1150 J Street
San Diego, CA 92113

Transitional shelter for single men only. ID required. Stay limit: 18 months.

Safe House Program

(858) 459-7627

Pacific Beach Safe Harbor Inc.
P.O. Box 90886
San Diego, CA 92169-2886

Transitional shelter for single men only. Stay limit: 18 months.

St. Vincent de Paul Village

(619) 233-8500

1501 Imperial Avenue
San Diego, CA 92101

St. Vincent de Paul operates many transitional housing programs targeting various populations. Call for details.

Salvation Army Adult Rehab Center

(619) 239-4037

1335 Broadway
San Diego, CA 92101

Transitional shelter for adult men who are recovering from alcohol and/or drug abuse and have been detoxified and are sober for at least one month. Stay limit: 6 months.

South Bay Community Services

(619) 498-0555

Casa de Transicion
Casa Nueva Vida, Shelter for Families
315 4th Avenue
Chula Vista, CA 91910

Teen Center: (619) 691-8106

Casa de Transicion—Transitional shelter for the general homeless population. Families must first stay at Casa Nueva Vida, then are referred to Casa de Transicion. Stay limit: 24 months.

Casa Nueva Vida, Shelter for Families—Transitional shelter for families with children. Stay limit: 2 months.

**Stepping Stone****(619) 584-4010**

Recovery Home
446 26th Street
San Diego, CA 92102

Transitional shelter for adult men and/or women (primarily gay and lesbian). All clients in the program are receiving alcohol and/or drug treatment and recovery services. Stay limit: 6 months.

Tradition One**(619) 264-0141**

4104 Delta
San Diego, CA 92113

Drug and alcohol recovery home for men, including those with dual diagnosis (drug and/or alcohol recovery and mental illness). Stay Limit: up to 1 year.

Tradition One**(619) 266-0529**

3895 Newton Avenue
San Diego, CA 92113

Drug and alcohol recovery home for women. Stay Limit: up to 1 year.

United States Mission**(619) 238-0965**

Men's Shelter
Women's Shelter
2611 G Street
San Diego, CA 92102-3008

Residents staying longer than one night must participate in public solicitation program. Transitional shelter for adults. Stay limit: unlimited.

United Way Info Line

North County Coastal (760) 943-0997
North County Inland (760) 740-0997
San Diego (619) 230-0997
Toll free from other areas (800) 227-0997

This service has helpful information on more than 3000 services provided throughout San Diego County.

Vietnam Veterans of San Diego**(619) 497-0142**

4141 Pacific Highway
San Diego, CA 92110

Rehabilitation services for veterans who are homeless. Call for information.

Volunteers of America Alcohol and Drug Rehabilitation (619) 232-5171

Sobriety House for Men and Women
1111 Island Avenue
San Diego, CA 92101

All clients are receive alcohol and drug treatment recovery services. Stay limit: 6 months.

Volunteers of America (619) 232-7754

Amigos Sobrios
741 11th Avenue
San Diego, CA 92101

Men's residential recovery home. Designed for male Latinos. Stay limit: 6 months.

Way Back (619) 235-0592

2516 A Street
San Diego, CA 92102

Men's residential recovery home. Stay limit: 6 months.

Women's Resource Center (760) 757-3500

1963 Apple Street
Oceanside, CA 92054

Transitional shelter for families. Stay limit: 6 months to 1 year with exceptions.

YWCA Women in Transition (WIT) Program (619) 239-0355 ext. 30

1012 C Street
San Diego, CA 92103

Transitional shelter for women without children. Stay limit: 2 years.

WEB SITE ADDRESSES

<http://www.redcross.org>

American Red Cross web site providing information on programs and services locally, nationally, and worldwide.

Appendices

Appendix A

Aftercare Certification of Disability and Supportive Services Form

AFTERCARE PROGRAM CERTIFICATION OF DISABILITY AND SUPPORTIVE SERVICES CITY OF SAN DIEGO HOUSING COMMISSION (SDHC)

I. ELIGIBILITY

The housing assistance program for the disabled (Aftercare Program) administered by the San Diego Housing Commission (SDHC) provides rental assistance to very low-income persons who are certified to be physically, developmentally, or mentally disabled. This certification, given by recognized supportive service agencies, must include participation by the disabled person in a planned and ongoing program(s) of rehabilitation, education, or other supportive services that is (are) directly related to the disability described below. The qualifying supportive services rendered by the service agency or affiliated provider must be of such a nature that would allow a person to live independently within the community.

II. APPLICANT RELEASE OF INFORMATION AUTHORIZATION

I hereby authorize the release of information concerning my disability to the SDHC Aftercare Program for which I am applying. I understand that the information provided on this certification is required for approval of my application and continued eligibility for housing assistance payment subsidies under the Aftercare Program and kept confidential by the above mentioned agency

Signature of Applicant Date

(Printed Name of Applicant)

Social Security Number

Address

City State Zip

Telephone Number Message #

III. HUMAN SERVICE AGENCY CERTIFICATION

I Certify that _____ is eligible for the Aftercare
(Name of Applicant)

Program based on meeting the criteria of the program definitions (page 3) and this individual is:
(check appropriate box)

Physically Disabled Developmentally Disabled

Mentally Disabled

Description of applicant's disability: (In lay terms please) _____

I also certify that the applicant is or will be participating in the following planned, ongoing program(s) of rehabilitation, education, or other supportive services that is (are) directly related to the disability.

Description of applicant's supportive services: (Please indicate services and frequency)

Name of other agencies providing supportive services: _____

Name of Case Worker(s) (Other than person certifying)	Telephone Number(s) of Caseworker(s)
_____	_____
_____	_____

The housing needs of the applicant would be best served if he/she:

Live Alone Shares Housing Has a Live-In Attendant

Obtains Physically Accessible Housing

If a live-in attendant is required or a larger size unit is needed than would ordinarily be justified for the number of persons in the applicant household, please explain:

**Explain Shares Housing here:

I hereby certify that the foregoing information is true and correct to the best of my knowledge.

By: _____ For: _____
(Signature) (Name of Agency or Dept.)

(Printed Name) (Address)

(Title) (City) (Zip)

(Date) (Telephone Number)

Appendix B

Carlsbad Housing Agency Pre-Application

CARLSBAD HOUSING AUTHORITY PRE-APPLICATION

Head of Household: _____ App. No.: _____
(Please print) Last First Middle Initial

Mailing address: _____ Telephone No.: _____
Street & Apt. Number City State Zip

Resident address if different from above: _____
Street & Apt. Number City State Zip Code

I am: U.S. Citizen/National Noncitizen over age 62 Noncitizen, lawful status Noncitizen, unlawful status

Members of my household are: U.S. Citizen/National Noncitizen over age 62
 Noncitizen, lawful status Noncitizen, unlawful status

I consider myself: White African American American Indian Hispanic Asian/Pacific Islander Other
(Optional statistical data)

1. Total gross monthly income of all household members 18 years of age or older: \$ _____

2. Current monthly rent: \$ _____ 3. Number of bedrooms in current residence: _____
If sharing, portion of rent you pay: \$ _____ If sharing, no. of bedrooms your family occupies: _____

4. Are you being displaced/required to move due to domestic violence, hate crimes, to avoid reprisals, inaccessibility of unit, disaster, governmental or private action (does not include eviction for cause)? Yes No

5. Are you living in substandard housing (violates health and safety codes or overcrowded)? Yes No

6. Are you currently homeless? Yes No

7. Are you a U. S. Veteran? Yes No 8. Are you disabled or handicapped? Yes No
Is your spouse a U.S. Veteran? Yes No Is your spouse disabled/handicapped? Yes No

9. Do you or your spouse work in the city of Carlsbad? Yes No If yes, give zip code of place of employment: _____

10. Do you live in a Carlsbad Mobile Home Park? Yes No

11. Have you or any family member ever lived in subsidized housing? Yes No

12. Have you or any family member ever engaged in drug related criminal or violent criminal activity? Yes No

13. Have you or any family member ever been evicted due to drug related or violent criminal activity? Yes No

14. Do you or any family member owe money to any Housing Agency? Yes No

15. Does anyone outside of your household pay for any of your bills or give you money? Yes No

Comments for any "Yes" answers: _____

Check all current sources of income for you and any household member 18 years of age or older:

Wages; Social Security; Veterans Benefits; Pension/Retirement; S.S.I.; Welfare;
 Unemployment; Child Support/Alimony; Asset Income; Other _____

FAMILY COMPOSITION

PERSONS WHO WILL LIVE WITH YOU INCLUDING YOUR UNBORN CHILD	RELATIONSHIP TO APPLICANT	MONTHLY INCOME	DATE OF BIRTH	AGE	SEX	SOCIAL SECURITY #
1.	APPLICANT					
2.						
3.						
4.						
5.						
6.						

(For additional members of your household, attach separate sheet listing same information as above.)


I certify that all statements on this pre-application are true and correct.

Signature of Head of Household _____ Date _____ Signature of other Adult _____ Date _____

Important: This application must be returned within 10 days, or your name will not be placed on the waiting list. It is your responsibility to notify the Housing Authority in writing if you have a change in address, income or if your family composition changes. Failure to reply to any correspondence, requests for updated information or appointments will result in your application being deleted from the waiting list.

Appendix C

Carlsbad Request to Update Application



City of Carlsbad

Housing & Redevelopment Department

REQUEST TO UPDATE WAITING LIST APPLICATION

HEAD OF HOUSEHOLD: _____ SOC. SEC. NO: _____

PHYSICAL ADDRESS : _____
 Street & Apt. No. _____ City _____ State _____ Zip _____

MAILING ADDRESS (if different): _____
 Street & Apt. No. _____ City _____ State _____ Zip _____

TELEPHONE NO: _____ WORK NO: _____ MSG. NO: _____

HOUSEHOLD COMPOSITION: (List all persons who will be living in the assisted unit.)

NAME	SOCIAL SECURITY NUMBER	RELATIONSHIP	SEX	AGE	BIRTH DATE
1.					
2.					
3.					
4.					
5.					
6.					

HOUSEHOLD INCOME: (Report ALL income.)

FAMILY MEMBER	SOURCE/TYPE OF INCOME	MONTHLY INCOME (Gross Amount)
1.		
2.		
3.		
4.		

Total Gross Monthly income of all Household members: \$ _____

CURRENT HOUSEHOLD STATUS: Please check "YES" or "NO" for each of the following situations.

1. Do you, your spouse or co-head work in the City of Carlsbad? YES [] NO []

2. Are you or your spouse disabled or handicapped? YES [] NO []

3. Are you, your current spouse, or deceased spouse a U. S. **Veteran**? YES [] NO []

4. Are you being involuntarily displaced (required to move) due to governmental action? YES [] NO []
 If yes, explain _____

5. Are you currently homeless in the City of Carlsbad? (Lacking a fixed regular night time residence, sleeping in a place not designed as regular sleeping accommodations, or living in a shelter) YES [] NO []

I certify under penalty of perjury that the information provided on this update to my application for Rental Assistance is true and correct to the best of my knowledge. I understand false statements or information are grounds for rejection of my application and/or denial of rental assistance.

SIGNATURE OF APPLICANT

DATE

FOR OFFICE USE ONLY: H:/LIBRARY/HOUSING/FORMS/APPLIC-UPDATE (1/99)

BEDROOM SIZE: _____ L/W in C'bad: [] Elderly: [] O/S Displ. Govrn Action: []

APPLIC. DATE: ____/____/____ Veteran: [] Family: []

REVIEWER: _____ Disabled: [] 30% of Median: []

2965 Roosevelt St. Ste. B • Carlsbad CA 92008-2389 • (760) 434-2810 • FAX (760) 720-2037

Appendix D

Encinitas Housing Agency Pre-Application

Housing Authority of the City of Encinitas

505 S. Vulcan Ave.
Encinitas, CA 92024 (760) 633-2723

PRE-APPLICATION

(Please Print)

Head of

Household:

LAST

FIRST

MIDDLE INITIAL

Residence

Address:

Street & Apt. Number

City

State Zip

Telephone () -

Mailing

Address:

(If different than residence)

Street & Apt. Number

City

State

Zip

HOUSEHOLD COMPOSITION

PERSONS WHO WILL LIVE WITH YOU (INCLUDING AN UNBORN CHILD)	RELATIONSHIP TO APPLICANT	MONTHLY INCOME	DATE OF BIRTH	AGE	SEX	SOCIAL SECURITY NUMBER
1. (Your Name Here)	APPLICANT	\$				
2.		\$				
3.		\$				
4.		\$				
5.		\$				
6.		\$				

(For additional members of your household, attach separate sheet listing same information as above)

Current monthly rent: \$. If sharing, portion of rent you pay: \$

Number of bedrooms in current residence? . If sharing, number of bedrooms your family occupies? .

TOTAL GROSS monthly income of ALL household members 18 years of age or older: \$

MONTHLY HOUSEHOLD INCOME

Indicate amounts on any sources of income for household members 18 years of age or older:

SOURCE	MONTHLY	SOURCE	MONTHLY	SOURCE	MONTHLY
Wages	\$	Social Security	\$	Veteran's Benefits	\$
Welfare	\$	S.S.I	\$	Pension/Retirement	\$
Unemployment	\$	Asset Income	\$	Child Support/Alimony	\$
Other	\$				

CITIZEN STATUS/ETHNICITY

I am:	<input type="checkbox"/> U.S citizen/national	<input type="checkbox"/> Noncitizen over age 62	<input type="checkbox"/> Noncitizen, lawful status	<input type="checkbox"/> Noncitizen, unlawful status		
Members of my household are:	<input type="checkbox"/> U.S citizen/national	<input type="checkbox"/> Noncitizen over age 62	<input type="checkbox"/> Noncitizen, lawful status	<input type="checkbox"/> Noncitizen, unlawful status		
(Optional) I consider myself:	<input type="checkbox"/> White	<input type="checkbox"/> African American	<input type="checkbox"/> American Indian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Other

HOUSEHOLD INFORMATION		
Please respond to the following questions:		
1. Are you being displaced or required to move due to governmental action?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you currently homeless?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Are you or any other adult head of household disabled or handicapped?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Are you or any other adult head of household 62 years of age or older?		
5. Do you or another adult head of household work? <i>If yes, how many hours per week?</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Do you or another adult head of household work in the City of Encinitas? <i>If yes, give place of employment:</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Do you or another adult head of household attend school or job training ? <i>If yes, how many hours per week/units?</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Have you or any other family member ever lived in subsidized housing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Have you or any family member ever engaged in drug related, criminal, or violent criminal activity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Have you or any family member ever been evicted due to drug related or violent criminal activity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Do you or any family member owe money to any Housing Agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Is there a fulltime student over 18 years of age in your household?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. Does anyone outside of your household pay for any of your bills or give you money?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Provide an explanation for any "yes" answers to questions 8-13:

I certify that all statements on this pre-application are true and correct.

 Signature of Head of Household Date Signature of Other Adult Date

Important: This application must be completed and returned or your name will not be placed on the waiting list. It is your responsibility to notify the Housing Authority in writing if you have a change in address, income, or if your family composition changes. Failure to reply to any correspondence, requests for updated information, or appointments will result in your application being deleted from the waiting list.

Appendix E

National City Community Development Commission Application

Chairman
George H. Waters

Members
Mitch Beauchamp
Nick Inzunza
Ron Morrison
Fred Soto

Executive Director
Paul Desrochers

Preserving History...  ...Shaping the Future

Community Development Commission of National City APPLICATION FORM

NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

List all persons who would live with you if you receive Section 8 assistance. Use legal names only. Write "N/A" if information does not apply or "UNK" if unknown.

NAME	RELATIONSHIP TO HEAD	SEX	DATE OF BIRTH	PLACE OF BIRTH	SOCIAL SECURITY NUMBER
1.	SELF				
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Does anyone live with you now who are not listed above? Yes _____ No _____ If yes, explain why this person will not be living with you if you receive Section 8 assistance. _____

LIST ALL MONTHLY INCOME FOR ALL PERSONS LISTED ABOVE:

	Amount	Who Receives
Social Security	\$ _____	_____
SSI	\$ _____	_____
AFDC/Welfare	\$ _____	_____
Employment (Gross Amt)	\$ _____	_____
Other Employment	\$ _____	_____
Retirement	\$ _____	_____
Unemployment	\$ _____	_____
School Grants	\$ _____	_____
Disability	\$ _____	_____
Other Income	\$ _____	_____

www.ci.national-city.ca.us

140 E. 12th Street, Suite B • National City, California 91950-3312 • (619) 336-4250 • fax (619) 336-4286

Are you currently homeless? Yes _____ No _____

How much do you pay each month for rent? \$ _____

How much do you pay for utilities? (gas, electric, water, sewer, and trash) \$ _____

Do you or your spouse work in National City? Yes _____ No _____

If yes, give name, address and phone number of your employer _____

Is the head of the household or spouse elderly (62 years or over)? Yes _____ No _____

Is the head of the household or spouse disabled? Yes _____ No _____

Are you or your spouse a U.S. Veteran? Yes _____ No _____

NOTE: The following information is being requested to comply with equal opportunity requirements and to assure that no discrimination occurs. Your answer will not affect (either positively or negatively) your selection for the program.

Is the head of your household: (Check one)

_____ White (Caucasian) _____ Asian _____ Pacific Islander _____ Black

_____ American Indian _____ Hispanic _____ Other

Do you claim any of the following local preferences?

_____ Veteran _____ Live or work in National City _____ Head of household or spouse is elderly .

_____ Head of household or spouse is disabled _____ Family with dependent children

_____ Displaced by local government action of the CDC or City of National City

NOTICE:

Title 18, Section 1001 of the United States Code states that a person who knowingly and willingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony.

Section 214 of the Housing and Community Development Act of 1980, as amended, prohibits HUD from making financial assistance available to persons other than U.S. citizens, nationals, or certain categories of eligible non-citizens in HUD's Section 8 housing assistance payment program. Each applicant will be required to provide documentation as to his or her citizenship status.

I/WE CERTIFY THAT THE INFORMATION GIVEN ON THIS APPLICATION IS TRUE, CORRECT AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE, AND THAT, I/WE WILL INFORM YOU OF ANY CHANGES, SHOULD THEY OCCUR. I/WE UNDERSTAND THAT FALSE INFORMATION OR FALSE STATEMENTS ARE PUNISHABLE UNDER FEDERAL LAW AND ARE GROUNDS FOR DENIAL OF HOUSING ASSISTANCE.

Signature (Head of household)

Signature (Other adult)

Date: _____
07/01/01

Date: _____

Appendix F

Oceanside Housing Department Pre-Application

SECTION 8 PRE-APPLICATION FORM
THIS FORM MUST BE COMPLETED IN FULL FOR PLACEMENT ON THE WAITING LIST

Full Name: _____
Last First Middle

Address: _____
City / Zip

Mailing Address: _____
City / Zip

Phone #: _____ Message Phone #: _____

List names of all persons who will be living with you including yourself:

Name	Relationship self	Soc. Sec. #	Birthdate	Age
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I consider myself White Black Native American Hispanic
 Asian/Pacific Islander Other _____

Check all sources of income that any person (s) in household receives and the gross monthly amounts.:

Type of Income	Amount/Month	Type of Income	Amount / Month
Welfare (CalWORKS) _____	\$ _____	Employment _____	\$ _____
Social Security _____	\$ _____	SSI _____	\$ _____
Unemployment _____	\$ _____	Disability _____	\$ _____
Pension _____	\$ _____	Child Support _____	\$ _____
Veterans Benefits _____	\$ _____	Other _____	\$ _____

If employed, are you employed in Oceanside? _____
 Are you or your spouse handicapped or disabled? _____ If yes, do you require special access or accommodation? _____
 Are you, your present spouse, or deceased spouse a veteran? _____
 If claiming a veteran preference, what is your discharge status. _____
 What is your current rent amount each month? \$ _____
 If you pay utilities, amount paid each month? _____
 Are you "homeless"? _____ Will you soon be "homeless"? _____
 Explain: _____
 Are you a victim of domestic violence? _____ Explain: _____

I/We certify that the information on this form is true and complete to the best of my/our knowledge and belief. I/We understand that false statements or information are punishable under federal law.

Signature _____ Date _____
 Signature _____ Date _____

FOR OFFICE USE ONLY:
 DIS _____ ELD _____ FAM _____ ETHN _____ RES _____ BDRM SZ _____
 DATE: _____ TIME: _____ INITIALS _____

Last Name

First Name

Date of Application

Appendix G

Oceanside Housing Department Waiting List Changes Form

WAITING LIST CHANGES

HEAD OF HOUSEHOLD NAME: _____

SOCIAL SECURITY NUMBER: _____

(PLEASE COMPLETE ONLY THE AREAS THAT HAVE CHANGED)

NEW ADDRESS:

STREET: _____

CITY/STATE/ZIP _____

MAILING: _____

CITY/STATE/ZIP _____

NEW PHONE: _____

ANNUAL INCOME: \$ _____

NUMBER OF FAMILY MEMBERS: _____

LIST THE NAMES OF ALL PERSONS THAT YOU ARE ADDING TO OR DELETING FROM THE APPLICATION:

NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH
_____	_____	_____
_____	_____	_____

ARE YOU OR YOUR PRESENT SPOUSE A VETERAN? _____

SIGNATURE: _____

DATE: _____

THANK YOU.

Appendix H

San Diego Housing Commission Application Request/Change of Address Form



Good Neighbors

San Diego
Housing Commission

- PO Box 620279
- San Diego, California 92162-0279
- 619/702 3096

APPLICATION REQUEST FORM (Mark this box if applying for Rental Assistance and complete top portion of form only.)

CHANGE OF ADDRESS/DATA CHANGES/STATUS REQUEST (Mark this box if you're on the Waiting List, and making changes or requesting status information.)

(Print all information clearly)

DATE: _____

DAY PHONE NUMBER: _____

NAME: _____
LAST (Print) FIRST MIDDLE INITIAL

Do you have a Social Security Number? YES NO (For New Applicants: If you have no **SOCIAL SECURITY#** you will be assigned a Housing Commission I.D.#)

SOCIAL SECURITY NUMBER or HOUSING COMMISSION I.D.#: _____

MAILING ADDRESS: _____
NUMBER STREET APT. NO.
CITY STATE ZIP CODE

RESIDENCE ZIP CODE (If different than above): _____

If only requesting confirmation for your status on the waiting list, please mark here:

Please complete the following to update your application:

VETERAN: Yes No ELDERLY OR DISABLED: Yes No TERMINALLY ILL DISABLED: Yes No

HOMELESS: Yes No LOOKING FOR WORK: Yes No WORKING 20+ HOURS PER WEEK: Yes No

PARTICIPANT OF JOB TRAINING OR ACADEMIC PROGRAM: Yes No

SINGLE HEAD OF HOUSEHOLD WITH DISABLED FAMILY MEMBER: Yes No

CHANGE/S IN HOUSEHOLD COMPOSITION: # ADULTS: ____ # MINORS: ____

If you believe you need a different bedroom size than listed on your confirmation letter, please describe why: _____

Other information: _____

WL_APPCHGSFORM.ENG\dlc\3/2/98

22. Have you or any member of your household ever been arrested/convicted for : 1) drug-related activity or 2) violent criminal activity that has as one of its elements the use, attempted use, or threatened use of physical force against a person or property of another? Yes No If yes, please specify if arrested or convicted. Give dates, charges, and city and state.

DATE	CHARGE	CITY	STATE

SAMPLE

Appendix J

San Diego County Housing Assistance Waiting List Application

Rental Assistance Waiting List Application

The Housing Authority is using computer technology to read this application. To avoid delays in processing your application it is very important to print your letters and numbers as shown in the examples given below. Enter only one letter or number per box and do not let it touch the sides of the box. PLEASE USE A BLACK PEN ONLY.

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	Please fully darken bubbles as shown: ●	0	1	2	3	4	5	6	7	8	9
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

1. APPLICANT:

A. First Name: (Please print clearly; follow lettering guide above) _____ **M.I.** _____ **D. If you are employed:** Does not apply

Last Name: _____ **Avg. number of work hrs per week:** _____ **Employer's zip code:** _____

Your Social Security Number: None **Date of Birth:** _____ **Month / Year:** _____

B. Please select the one you consider yourself to be (select one): 1. American Indian 2. African American 3. Asian/Pacific Islander 4. White **C. Please select the one you consider yourself to be (select one):** 1. Hispanic 2. Non-Hispanic

E. Are you enrolled in school or job training? No Yes, Full-Time Yes, Part-Time

F. How many weeks did you work and/or attend school (or job training) in the past year: _____

2. CO-APPLICANT (ADULT): Does not apply

A. First Name: (Please print clearly; follow lettering guide above) _____ **M.I.** _____ **D. If co-applicant is employed:** Does not apply

Last Name: _____ **Avg. number of work hrs per week:** _____ **Employer's zip code:** _____

Co-Applicant Social Security Number: None **Date of Birth:** _____ **Month / Date / Year:** _____

B. Please select the one you consider co-applicant to be (select one): 1. American Indian 2. African American 3. Asian/Pacific Islander 4. White **C. Please select the one you consider co-applicant to be (select one):** 1. Hispanic 2. Non-Hispanic

E. Is co-applicant enrolled in school or job training? No Yes, Full-Time Yes, Part-Time

F. How many weeks did co-applicant work and/or attend school (or job training) in the past year: _____

3. MAILING ADDRESS:

A. Street Number: _____ **B. Street Name:** _____ **C. St, Dr, Etc.** _____

D. Apartment No./Space # _____

E. City: _____ **State:** _____ **Zip:** _____ **F. Residence Zip:** _____ (if different than mailing zip code): _____

G. Telephone Number (incl. area code): () - _____ **Alternate Telephone number used for leaving messages:** () - _____ **H. Telephone Number (incl. area code):** () - _____

I. Fax Number (incl. area code): () - _____

J. Electronic Mail (e-mail) Address: _____

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4. HOUSEHOLD INFORMATION (INCLUDING YOURSELF):

A. Total number of members in your household:	B. Total number of Males:	C. Number of Males 17 or younger:	D. Total number of Females:	E. Number of Females 17 or younger:
--	----------------------------------	--	------------------------------------	--

5. HOUSEHOLD INCOME AND EXPENSES:

A. Total Gross Monthly Income (All household members 18 or older): \$, .00	D. Please mark all income sources that apply to your household:
B. Current monthly rent obligation: \$, .00	
C. Total monthly utility expenses (Gas Electricity, Water, Sewer & Trash): \$, .00	

1. Employment 7. Unemployment (UIB)
 2. Welfare (TANF, GR) 8. State Disability (SDI/DIB)
 3. Child Support 9. VA Benefit
 4. Social Security (SSA) 10. Asset Income (Interest, Dividends, etc.)
 5. SSI 11. Other Income (Include regular contributions)
 6. Pension / Retirement

6. RENTAL ASSISTANCE PROGRAMS OF INTEREST:

Please select all programs that you are interested in. At least one item must be selected. (see program information sheet for description):

- | | |
|---|--|
| <input type="checkbox"/> A. Section 8 Certificate/Voucher | <input type="checkbox"/> E. State Rental Program |
| <input type="checkbox"/> B. Public Housing | <input type="checkbox"/> F. Firebird Manor |
| <input type="checkbox"/> C. Project-Based Certificate | <input type="checkbox"/> G. University Canyon |
| <input type="checkbox"/> D. Moderate Rehabilitation | |

H. Other programs: (see program information sheet for description)

- | | | | |
|----------------------------|----------------------------|----------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 4 | <input type="checkbox"/> 7 | <input type="checkbox"/> 10 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 | <input type="checkbox"/> 11 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 | <input type="checkbox"/> 12 |

7. RANKING PREFERENCE QUESTIONS:

Please fully darken the circle for each of the questions below that applies to you. This information, in addition to the information provided in questions 1 through 6, will be used to determine your ranking preference for the waiting list.

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|
- A. Are you or co-applicant handicapped or disabled (includes SSI recipients)?
 - B. If you or co-applicant are handicapped or disabled, do you require special access or accommodation?
 - C. Are you or co-applicant a U.S. Veteran with other than dishonorable discharge?
 - D. Are you or co-applicant a U.S. Citizen or a legal immigrant to this country?
 - E. Are you living in a unit that is overcrowded, dilapidated, unlivable or inaccessible?
 - F. Are you being forced to move due to government action or a disaster recognized by the Federal Government?
 - G. Are you currently homeless?
 - H. Are you currently a victim of domestic violence?
 - I. Are you being forced to move because of hate crimes?
 - J. Do you own a mobilehome?
 - K. Are you renting a mobilehome?
 - L. Have you or any member of your household ever been arrested for drug or violent criminal activity?
 - M. Are you now or have you ever engaged in drug or violent criminal activity?
 - N. Is a wheelchair required for any household member?
 - O. Are you currently looking for work?
 - P. Are you a single head of household with a disabled family member?
 - Q. Are you legally blind? (Optional)
 - R. Are you hearing impaired? (Optional)
 - S. Have you or any household member been diagnosed with a terminal illness? (Optional)
 - T. Have you or any household member ever lived in subsidized housing?
 - U. Do you or any household member owe money to any Housing Agency?
 - V. Do you receive at least 50% of your income from agricultural sources as a domestic farm laborer?

8. I certify that the information on this form is true and complete to the best of my knowledge and belief. I understand that false statements or information is punishable under federal law.

Signature _____	Month / Date / Year / /
Signature of co-applicant or other adult _____	Date / /

If you have any questions, call (619) 694-4890
 For Telecommunication devices for the deaf (TDD) call (619) 694-4884
 This form may be returned in the enclosed envelope or mailed to:

San Diego County Housing Authority • 3989 Ruffin Road • San Diego, CA.92123



Appendix K

Vista Home Tenant Based Rental Assistance Pre-Application

CITY OF VISTA COMMUNITY DEVELOPMENT COMMISSION
HOME TENANT BASED RENTAL ASSISTANCE PRE-APPLICATION

All questions must be answered

Head of Household: _____ Phone _____
(Print) Last Name First Name Middle Initial

Mailing Address: _____
Street Address Apt. # City State Zip

Residence Address if different from above: _____
Street Apt. # City State Zip

1. Total gross monthly income of all of your household members: \$ _____
2. Check all current sources of income for all of your household members and include amount received:

<input type="checkbox"/> Wages \$ _____	<input type="checkbox"/> Unemployment \$ _____
<input type="checkbox"/> Social Security /SSI \$ _____	<input type="checkbox"/> Child support/alimony \$ _____
<input type="checkbox"/> Welfare \$ _____	<input type="checkbox"/> Asset income/interest \$ _____
<input type="checkbox"/> Veterans benefits/pension/retirement \$ _____	
<input type="checkbox"/> Other - Source _____	\$ _____

3. Does anyone living outside your household pay any of your bills or give you money? yes no

4. Is anyone in the household employed: yes no
 If yes:

Name	Pay Rate per hour	Hours worked per week	Work in Vista? Yes or No	Employer Name & Address

5. Is a person in your household over age 18 a full-time student? yes no
 If yes, the student's name is _____
 The school attended is _____

6. Current monthly rent you pay: _____

7. Number of bedrooms in your current residence: _____
 The total number of people living in your current residence is: _____
 If you share your residence with another household, what is your relationship to the others (parents, sister, brother, other relative, unrelated roommate, etc.) _____

8. Do you live in a mobile home park? yes no

9. Are you currently homeless? yes no If yes, explain: _____

10. Is anyone in your household disabled or handicapped? yes no If yes, name: _____

11. Are you required to move for any reason other than eviction for cause? yes no
 If yes, explain _____

12. Are you living in substandard housing? (health and safety code violations?) yes no
 (overcrowded?) yes no

13. Have you or any household member ever lived in subsidized housing? yes no

14. Do you or any household members owe money to any housing agency? yes no

15. Have you or any household member ever:
 - engaged in drug related or violent criminal activity? yes no
 - been evicted due to drug related or violent criminal activity? yes no

ADDITIONAL COMMENTS FOR "YES" RESPONSES: _____

FAMILY COMPOSITION

PERSONS WHO WILL LIVE IN THE HOUSEHOLD (INCLUDING ANY UNBORN CHILDREN)	RELATIONSHIP TO HEAD OF HOUSEHOLD	GROSS MONTHLY INCOME	BIRTH DATE	AGE	SEX Male or Female	SOCIAL SECURITY NUMBER
1	Applicant /Head of Household					
2						
3						
4						
5						
6						
7						
8						

To list additional members of your household, attach a separate sheet listing same information as above

Optional statistical information: I consider myself: White African American American Indian
 Hispanic Asian/Pacific Islander Other

I certify that all statements on this pre-application are true and correct.

Signature (Head of Household)

Date

End of Pre-Application

Below information is for Housing Department Use Only

CATEGORY: Family Elderly/Handicapped/Disabled
 FEDERAL PREFERENCE yes no
 MEETS INCOME LIMITS: yes no
 LIVE/WORK IN VISTA yes no
 BEDROOMS 0 1 2 3 4 5 6

Date/Time Stamp

Reviewed by: _____ Date: _____

Appendix L

How to Obtain Your Credit Report

The three major credit reporting agencies are listed below, and can be contacted directly to request a copy of your credit report.

Trans Union
Consumer Relations Disclosure Center
P.O. Box 390
Springfield, PA 19064-0390
(800) 888-4213
www.tuc.com

Experian Consumer Relations
P.O. Box 949
Allen, TX 75013
(800) 682-7654
www.experian.com

Equifax Consumer Relations
P.O. Box 105783
Atlanta, GA 30348
(800) 685-1111
www.equifax.com

If you are ordering your credit report by mail, your request should include the following:

- First, middle, and last name (including Jr., Sr., III)
- Current address
- Previous address if within the last two years
- Social security number
- Date of birth
- Employer
- Telephone number
- Signature
- Applicable processing fee (standard fee is \$8.00)

Appendix M

Fraud Victim Assistance

The following agencies can be contacted directly if you suspect you have been a victim of fraud.

Trans Union Fraud Victim Assistance
P.O. Box 6790
Fullerton, CA 92634
(800) 680-7289

Experian Consumer Fraud Assistance
P.O. Box 1017
Allen, TX 75002
(800) 301-7195

Equifax Fraud Assistance
P.O. Box 740256
Atlanta, GA 30374
(800) 525-6285

The following was adapted from the Trans Union Guide, *Consumer Credit and Fraud Prevention*.

Steps for Fraud Victims

1. Identify and immediately notify all issuers of credit.
2. Immediately report the incident to the police, especially if it involves stolen identification. You should insist on receiving a complaint number.
3. Contact Trans Union, Experian, and Equifax.
4. You will know you are a fraud victim if:
 - a. A creditor or law enforcement agency refers you to the Fraud department.
 - b. You receive incoming calls or letters stating that you have been approved or denied credit that you did not apply for.
 - c. You no longer receive a credit card statement.
 - d. Not all of your mail is being delivered.
 - e. Your credit card statement includes unusual purchases.
 - f. A collection agency tells you that they are collecting for a defaulted account established with your identity, but you never opened the account.

You can avoid being a victim by:

1. Not carrying extra credit cards.
2. Carrying your Social Security card only when necessary.
3. Not carrying your birth certificate or passport.
4. Installing a locking mailbox.
5. Obtain receipts for all credit card purchases.
6. Never leaving a purse or wallet unattended.
7. Destroying all checks, voided or paid, before disposal.
8. Reconciling your checking account and credit card statements.
9. Closing inactive credit accounts (you can do this by contacting the credit grantor and requesting they close the account).
10. Not printing your Social Security number on your checks. This is not necessary!

You can restore your credit by:

1. Contacting all creditors involved and filing a report.
2. Contacting all three credit-reporting agencies.
3. Adding a fraud statement to the consumer statement section of your credit report.

