



Thank you for your interest in Housing Authority of the City of Greenville's Public Housing Program. We maintain a waiting list for our housing programs according to Federal Housing laws. Our online pre-application is an easy, step-by-step way to get your name on the waiting list if your pre-application is drawn in the lottery. **The lottery drawing will be held on Thursday, October 16, 2025, at 10:00 a.m.**

You must complete the entire pre-application for the application to be valid.

When you begin completing the pre-application, you should list the name, date of birth, social security number, and source of income for each household.

If you have any questions, you may contact us:

Mailing Address: **Greenville Housing Authority
1103 Broad Street
Greenville, NC 27834**

Phone: **(252) 329-4032**

TDD: **(252) 329-4009**



Pre-Application for Public Housing Assistance

	Last Name, First, Middle Init.	Address	City, State, Zip	Telephone
Head of Household				

Social Security Number of Head of Household _____

Date of Birth of Head of Household _____

Gross Monthly Income of Head of Household _____

Total number of people that will be living in the apartment (include yourself): _____

How many are under the age of 18? _____

Disabled Applicant/Spouse: ☐ Yes ☐ No Handicapped Applicant/Spouse: ☐ Yes ☐ No

If any member will need an apartment with accessibility accommodation features, please provide their name and state the need: _____

Have you ever participated in Federally subsidized housing program? ☐ Yes ☐ No

If yes, what is the name of the housing program? _____

Do you or another adult listed on this application owe any amount to any Housing Authority at this time? ☐ Yes ☐ No (If Yes, provide the housing authority name and explain)

Has any family member been convicted of a criminal offense (other than a minor traffic violation)?
☐ Yes ☐ No (If Yes, provide the member's or members' name and explain)

Does anyone not in your household regularly pay your bills or give you money?

☐ Yes ☐ No (If yes, explain) _____

Has any member of your household used any name or social security number other than that shown on this application form? ☐ Yes ☐ No (If yes, explain below):

List Head of household and all members

Last Name, First Name Middle Initial	Relation ship	Sex M F	Date of Birth	Social Security Number	Source of Income and Monthly Gross Income Amount

I DO HEREBY CERTIFY THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE, TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT DELIBERATE MISREPRESENTATION OF MY CIRCUMSTANCES WILL RESULT IN MY BEING REJECTED FOR ADMISSION TO A SUBSIDIZED HOUSING UNIT. I UNDERSTAND IT IS MY RESPONSIBILITY TO NOTIFY THE HOUSING AUTHORITY IN WRITING OF ANY CHANGES IN MY HOUSEHOLD COMPOSITION, INCOME, ADDRESS, OR PHONE NUMBER. FAILURE TO INFORM THE HOUSING AUTHORITY MAY RESULT IN MY NAME BEING REMOVED FROM THE WAITING LIST. I HAVE NO OBJECTIONS TO INQUIRIES BEING MADE FOR THE PURPOSE OF VERIFYING THE STATEMENTS MADE HEREIN. I HAVE READ THE WARNING ABOVE

Head of Household Signature

Date

Spouse/Co Head of Household Signature

Date

Public Housing Authority Representative

Date