



Changing lives one key at a time



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Section 8 Fax 217.753.0029 www.springfieldhousingauthorlty.org

## SECTION 8 APPLICATION CHECKLIST

The following information and/or documentation listed below as it pertains to your household is required to apply:

- **Certified birth records for ALL members of the household**
  - Hospital copies will NOT be accepted
- **Social Security cards for ALL members of the household**
- **Picture identification of ALL members 18 years of age and older**
- **Proof of assets**
  - Stocks, bonds, savings, real estate, checking, etc.
  - Documentation, as applicable, to verify assets
- **Proof of income for all members of the household including but not limited to:**
  - **Employment**
    - ✓ Employer(s) name, mailing address, phone and fax number for verification
    - ✓ Includes ALL employed members of the household
    - ✓ Five most recent and consecutive paycheck stubs
  - **Pension, Social Security, SSI, etc.**
    - ✓ Current award letter and/or documentation
  - **Child support**
    - ✓ Documentation to verify amounts received
  - **TANF/Public Aid**
    - ✓ Documentation to verify amounts received
  - **Unemployment**
    - ✓ Documentation to verify amounts received
  - **ALL INCOME MUST BE REPORTED AND VERIFIED**
- **Other documents as applicable**
  - Marriage license, divorce decree, official separation papers, custody papers, etc.

All individuals applying for Section 8 Housing Choice Voucher assistance with the Springfield Housing Authority **MUST** be interviewed by a Section 8 Specialist who will review the application for completeness, accuracy and ensure that appropriate signatures have been obtained.

All applicants must apply in person at the Springfield Housing Authority, 200 N 11<sup>th</sup> St, Springfield, Illinois on Tuesdays from 8:30 to 11:30 am and again from 1 to 4 pm

Please be advised that applications **WILL NOT** be accepted without all appropriate documentation attached. In addition, applications **WILL NOT** be accepted through the mail. All applications **MUST** be submitted in person.

## PREFERENCE POINTS

Preferences establish the order of applicants on the waiting list. Applicants will be positioned on the waiting list based upon the number of preference points for which they are qualified, date and time of application.

Applicants who qualify for the highest number of preference points will be positioned ahead of those who qualify for fewer or no preference points on the waiting list. An admissions preference does not guarantee admission. Every applicant must still meet SHA admissions screening criteria before being offered a Housing Choice Voucher.

Preferences will be granted to applicants on the waiting list who are otherwise qualified and/or who, at the time of the application processing, are verified to meet the definitions of the preference described below. Preferences will not have the purpose or effect of delaying or otherwise denying admission to the program based on the race, color, ethnic origin, gender, religion, disability, or age of any member of an applicant family. **(24 CFR 982.207)**

Please read the following statement in its entirety to ensure you are correctly claiming the preference in which you qualify. Any preference claimed will be verified during the application process.

I claim the following preference:

**Local Residency Preference:**

Applicant households with a permanent physical residence in Sangamon County, Illinois. Eligibility for Local Residency Preference must be demonstrated by having a permanent physical residence within the jurisdictional area. Physical residence shall be defined as a domicile with a mailing address, other than a post office box, for which the applicant can produce one or more of the following; a lease or a purchase agreement, utility bills showing the claimed residence address, or two pieces of first class mail addressed to a member of the applicant household at the claimed address **(24 CFR 982.207)** (25 points).

**VERIFICATION OF LOCAL RESIDENCE PREFERENCE:**

- A lease or purchase agreement
- Utility bills showing the claimed residence address
- Two (2) pieces of first class mail addressed to a member of the applicant household at the claimed address

**Local Employment Preference:**

Applicant households in which a member of the household (head, spouse or sole member) is currently employed in Sangamon County for twelve (12) months or longer. Eligibility for Local Employment Preference must be demonstrated by third party employment verification. Applicants where the head and spouse, or sole members is age 62 or older, or is a person with disabilities will also be awarded this preference (**24 CFR 982.207**) (30 points).

**VERIFICATION OF LOCAL EMPLOYMENT PREFERENCE:**

Completion of a Third Party Employment Verification and receipt of said verification directly from the employer indicated on the form

I do **NOT** qualify for either of the above listed preferences.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Warning! Title 18 US Code Section 1001 states that a person is guilty of a felony for knowingly and willingly making a false or fraudulent statement to any department or agency of the United States. If this form contains false or incomplete information, you may be required to repay all overpaid rental assistance you received, fined up to \$10,000, imprisoned for up to 5 years, and/or prohibited from receiving future assistance.**