

Habitational Operations Supplemental

Does the applicant operate a housing authority?			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
If yes, is it separate entity with its own Board?			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Please provide the following:			
Budget	Financial Report	Operational Policies and Procedures	
By building:	Number of stories: Year of construction: Year of renovation:		
Describe social services offered:	Job training:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
	Homework clubs:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
	Daycare: (requires supplemental application)	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
	Senior services:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
	Other:		
Does the applicant have established rules and regulation for the tenants?			Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Describe new tenant selection process:			
Describe ongoing capital improvements:			
Describe the law enforcement presence:			
Provide a list of all types of habitation provided:			
Average occupancy levels:			