



GEORGETOWN HOUSING AUTHORITY

APPLICATION RENEWAL FORM

I, (print name) _____

SSN # _____

Date of Birth _____

understand that every three (3) months I must notify the Georgetown Housing Authority that I am still interested in housing at (mark each program you have applied for):

Stonehaven Apts.

Shady Oaks Apts.

Section 8

_____. I understand that I MUST have a current application for a housing program to renew my interest
Initial in that program and that if I do not have an application for the program, that my name will NOT be added to the waiting list for that program.

_____. I understand that I must still notify the Housing Authority every three (3) months of my
Initial interest to remain on the waiting list and if I do not notify the Housing Authority every three (3) months, my application can be terminated.

_____. I understand that by signing this notice I am requesting to be placed/remain on the waiting list for the
Initial above marked programs.

Applicant Signature

Date

Office use only:	
_____	_____
Received by:	Date