

Reading Housing Authority
Applications
815 Franklin Street
Reading, PA 19602

applications@readingha.org

Date:

Phone: 610-372-3933 Fax: 610-378-1289

Affordable Housing Pre-Application

River Oak Apartments	s, Reading, Pa 19601		
3 Bedroom Apartment - \$	907/month		
Income limits apply. Gross	s family monthly income must	be three (3) times the monthly rent.	
Do you currently have a Sect ☐ Yes ☐ No	ion 8 Housing Choice Voucher?	*	
Total Number of Household 5 6	members that will be residing v	vith you*	
RHA occupancy standards are two pers prevent your application from being co		ed on this criteria. Failure to answer this question co	orrectly could
Part 1: Head of Househol	ld		
Name* First	Middle	Last	
Current Address*			
Street Address			
Address Line 2			
City	State	Zip Code	
Social Security Number*	Date of Birth*		
Telephone Number*	Mobile Phone Number	Email*	

Language Preference
I prefer to speak, read, and write in English
I prefer to speak, read, and write in Spanish
Total Family Monthly Gross Income (\$)*Enter numbers only.
How Often
☐ Weekly
Every two weeks
☐ Monthly
Sources of Income – Check all that apply for entire family
□ Social Security
□ SSI
Cash Assistance
□ Wages
Unemployment Compensation
Support (child or spousal)
☐ Pension
Workers Compensation
Investment Income (interest, CDs, stocks/bonds)
Other
Is your mailing address different from the address above?
Yes
□ No
If yes, provide mailing address:
Street Address
Address Line 2
City State Zip Code
Note: If your mailing address is different from your current address, all correspondence will be mailed to the mailing address. If your current or mailing address changes, you must notify Reading Housing Authority in writing to maintain your waiting list status.
Part 3: Certification*
□ I agree
I certify that the information provided is true and complete to the best of my knowledge and belief. I understand that I can be fined up to \$10,000
or imprisoned up to five years if I furnish false or incomplete information.

Signature

Date