



# HOUSING AUTHORITIES CITY OF EUREKA & COUNTY OF HUMBOLDT



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## Mainstream Vouchers – Waitlist Update

The County of Humboldt Housing Authority was recently awarded 75 Mainstream Vouchers from HUD. The Mainstream voucher program is a sub-set of the Housing Choice Voucher (HCV, aka Section 8) program for eligible disabled families. It enables families with persons with disabilities to lease affordable housing of their choice.

Eligibility criteria for the Mainstream Vouchers include the following:

1. Eligible family: A family composed of one or more non-elderly persons with disabilities, which may include additional members who are not non-elderly persons with disabilities. A family where the sole member is an emancipated minor is not an eligible family.
2. Non-elderly person with disabilities: A person 18 years of age or older and less than 62 years of age, and who:
  - a. Has a disability, as defined in 42 USC 423;
  - b. Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
    - i. Is expected to be of long-continued and indefinite duration;
    - ii. Substantially impedes his or her ability to live independently; and
    - iii. Is of such a nature that the ability to live independently could be improved by more suitable housing conditions; OR
  - c. Has a developmental disability as defined in 42 USC 6001.

These vouchers will be available to provide rental assistance beginning April 2021. If you have previously submitted an application for Housing Choice Voucher assistance and have a person in your household who is between the ages of 18-61 and disabled, please complete update information below.

<input type="checkbox"/> Mainstream Eligible	Is there an adult in the household that is between 18 to 61 years old and is disabled? Yes <input type="checkbox"/> No <input type="checkbox"/> Applicants who meet the requirements listed above may be eligible for a Mainstream voucher. You must provide proof of age and disability.
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<b>To add or update family member information, complete all boxes for each household member update.</b>							
CHECK ONE:	LAST NAME	FIRST NAME	SOC. SEC. #	BIRTH DATE	RELATION TO HEAD	GENDER	DISABLED?
<input type="checkbox"/> Add <input type="checkbox"/> Remove			- - - - -	- / - / - - -		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to state	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Add <input type="checkbox"/> Remove			- - - - -	- / - / - - -		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to state	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Add <input type="checkbox"/> Remove			- - - - -	- / - / - - -		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to state	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Add <input type="checkbox"/> Remove			- - - - -	- / - / - - -		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to state	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Add <input type="checkbox"/> Remove			- - - - -	- / - / - - -		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Decline to state	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Return by:</b> _____			If you have questions email the <a href="mailto:frontdesk@eureka-humboldt-hsg.org">frontdesk@eureka-humboldt-hsg.org</a> or Call 707.443.4583				
<b>Mail or Drop off at:</b> County of Humboldt Housing Authority 735 West Everding Street Eureka, CA 95503							



The Housing Authorities are Equal Housing Opportunity Organizations

