



MINISTRY OF HOUSING AND URBAN DEVELOPMENT

44-46 South Quay, Port of Spain. Tel: 623-HOME (4663)

HOME/ STATE LAND APPLICATION FORM

Section A - MAIN APPLICANT PERSONAL INFORMATION

ID Card No. (MUST be entered)		Driver's Permit		Passport number	
Surname		First Name		Other	
Date of Birth (MUST be entered) _____ yyyy mm dd		Sex M <input type="checkbox"/> F <input type="checkbox"/>	TT Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	TT Resident? Yes <input type="checkbox"/> No <input type="checkbox"/>	Country of Birth
Address		Telephone Numbers		Marital Status	
No & Street		Home		Single <input type="checkbox"/>	Separated <input type="checkbox"/>
Village		Work		Married <input type="checkbox"/>	Common Law <input type="checkbox"/>
Town		Cell		Divorced <input type="checkbox"/>	Widowed <input type="checkbox"/>
Employer's Name & Address					
Gross Monthly Income			Does your Gross Monthly Income Include:		
			Pension <input type="checkbox"/>	Social Welfare <input type="checkbox"/>	Disability <input type="checkbox"/> Other <input type="checkbox"/>
Do you own or are you a part owner of any property? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If Yes, Please specify location of property:					
Are you Squatting? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please check the following: State Lands <input type="checkbox"/> Private Lands <input type="checkbox"/>					
If Yes, Please specify since when: Location:					
Do you fall within any of these categories?					
Physically challenged or differently abled			A member of the protective services		
Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please Describe:			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please Specify Division:		

Section B - CO-APPLICANT PERSONAL INFORMATION (OPTIONAL)

ID Card No. (MUST be entered)		Driver's Permit		Passport number	
Surname		First Name		Other	
Date of Birth (MUST be entered) _____ yyyy mm dd		Sex M <input type="checkbox"/> F <input type="checkbox"/>	TT Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>	TT Resident? Yes <input type="checkbox"/> No <input type="checkbox"/>	Country of Birth
Address		Telephone Numbers		Marital Status	
No & Street		Home		Single <input type="checkbox"/>	Separated <input type="checkbox"/>
Village		Work		Married <input type="checkbox"/>	Common Law <input type="checkbox"/>
Town		Cell		Divorced <input type="checkbox"/>	Widowed <input type="checkbox"/>
Employer's Name & Address					
Gross Monthly Income			Does your Gross Monthly Income Include:		
			Pension <input type="checkbox"/>	Social Welfare <input type="checkbox"/>	Disability <input type="checkbox"/> Other <input type="checkbox"/>
Do you own or are you a part owner of any property? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If Yes, Please specify location of property:					
Are you Squatting? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please check the following: State Lands <input type="checkbox"/> Private Lands <input type="checkbox"/>					
If Yes, Please specify since when: Location:					
Do you fall within any of these categories?					
Physically challenged or differently abled			A member of the protective services		
Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please Describe:			Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Please Specify Division:		

Section C - DEPENDANTS INFORMATION

How many people including yourself will be living in the unit, if you are successful?

The following persons are considered dependants: A child/children 18 years and under, Parents 65 years and over who will be living in the home, child/children over 18 years and physically or mentally dependant on the applicant(s)

Please specify below the names of each dependant that will be living with you	Date of Birth (YYYY-MM-DD)

Section D - APPLICATION TYPE

What are you applying for? **New Home /Land Purchase** **Rental Accommodation**

Please Note: RENTAL ACCOMMODATION applications only apply to Apartment Units.

Section E - PREFERENCE INFORMATION

Land Purchase Applications complete Location No. ONLY.
Rental Applications complete Location No. and the Apartment Type
New Home Applications complete Location No. , House Type and House Size

See the Map below for Location numbers

Location No.	House Type	House Size	Apartment Type (Rental Accommodation)
1st Preference:	<input type="checkbox"/> Single Family Unit <input type="checkbox"/> Duplex <input type="checkbox"/> Town-House	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom <input type="checkbox"/> Studio Apartment - 1 bedroom
2nd Preference:	<input type="checkbox"/> Single Family Unit <input type="checkbox"/> Duplex <input type="checkbox"/> Town-House	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom <input type="checkbox"/> Studio Apartment - 1 bedroom
3rd Preference:	<input type="checkbox"/> Single Family Unit <input type="checkbox"/> Duplex <input type="checkbox"/> Town-House	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom	<input type="checkbox"/> 2 bedroom <input type="checkbox"/> 3 bedroom <input type="checkbox"/> Studio Apartment - 1 bedroom

- Location numbers**
- | | | | | |
|------------------------|-----------------------|----------------------------------|---------------------------|-------------------------|
| 1 Diego Martin | 2 Port ofSpain | 3 San Juan/Laventille | 4 Tunapuna/Piarco | 5 Arima |
| 6 Sangre Grande | 7 Chaguanas | 8 Couva/Tabaquite/Talparo | 9 Rio Claro/Mayaro | 10 San Fernando |
| 11 Princes Town | 12 Penal/Debe | 13 Point Fortin | 14 Siparia | 15 Land Purchase |

I/We..... certify that the information given in this form is true to the best of my/our knowledge and belief. If there is any thing in the information given above which is not true o or which I/we do not believe to be true I am/we are aware that the Ministry of Housing and Urban Development is entitled to refuse my/our application.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____