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DEMOGRAPHIC DATA

Required by Indiana Housing Finance Authority
for Indiana Properties only

RETURN TO: _____

DATE: _____ APT. #: _____

DEVELOPMENT NAME: _____

TEL.#: _____

APPLICANT/RESIDENT: _____

FAX #: _____

The following information is requested, by the Indiana Housing Finance Authority, in order to help monitor and observe those impacted by and/or benefiting from the housing tax credit program. You are not required to furnish this information, but you are encouraged to do so. The owner or property manager may not discriminate on the basis of this information nor on whether or not you choose to furnish it. However, if you choose not to furnish it, the owner or property manager will note race and sex on the basis of visual observation and/or surname. If you do not wish to furnish the information, please check the appropriate box below.

HEAD/APPLICANT NAME: _____

Sex: Female Male

Race: _____ American Indian or Alaskan Native
 _____ Asian or Pacific Islander
 _____ Hispanic
 _____ White, not of Hispanic origin
 _____ Black, not of Hispanic origin
 _____ Other (specify) _____
 _____ I do not wish to furnish this information.

CO-APPLICANT NAME: _____

Sex: Female Male

Race: _____ American Indian or Alaskan Native
 _____ Asian or Pacific Islander
 _____ Hispanic
 _____ White, not of Hispanic origin
 _____ Black, not of Hispanic origin
 _____ Other (specify) _____
 _____ I do not wish to furnish this information.

Signature of Applicant/Resident

Signature of Co-Applicant/Resident

Signature of Property Manager/Owner

OFFICE USE ONLY:



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

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