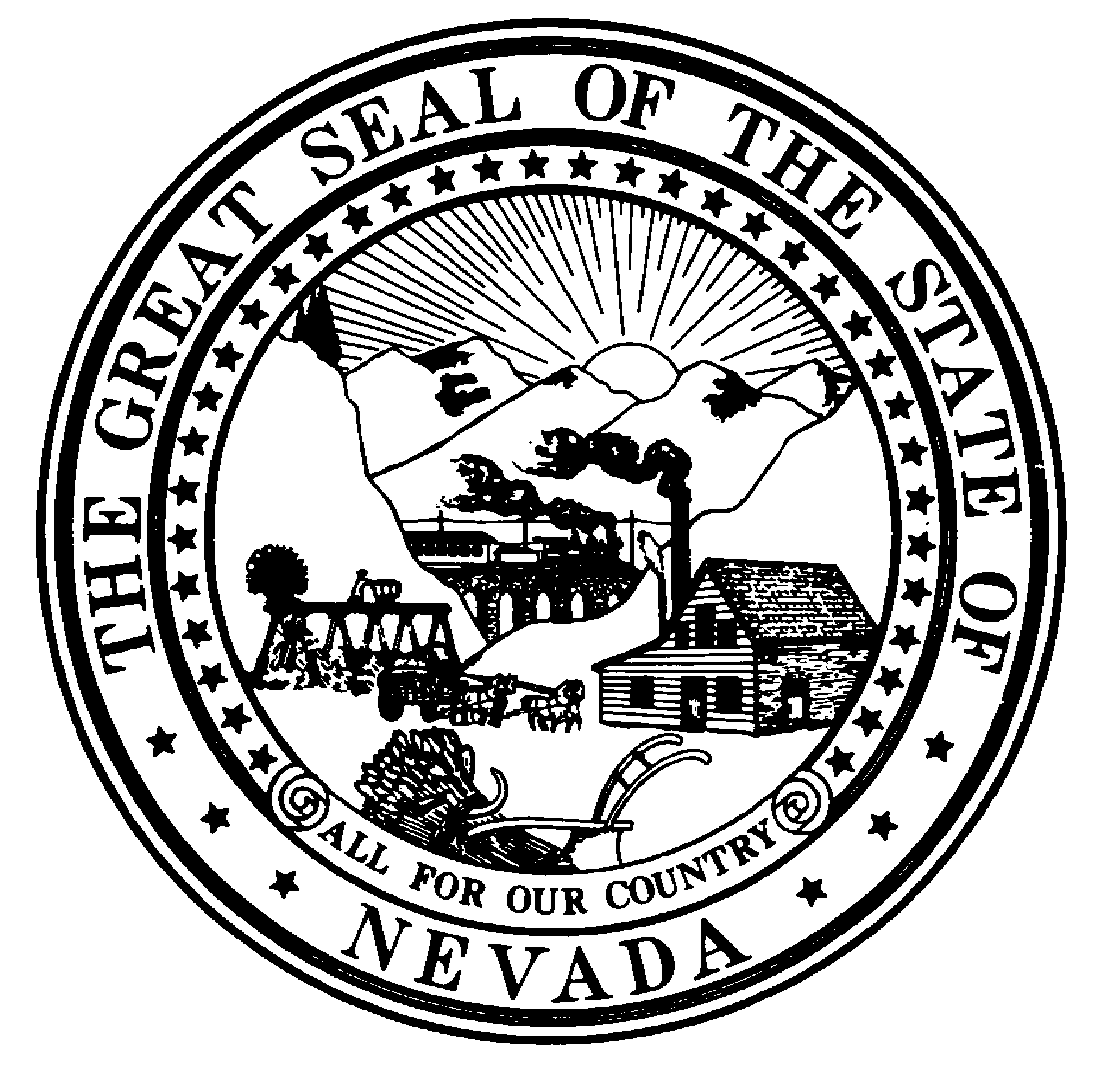
State of Nevada

Department of Business & Industry

**HOUSING DIVISION**





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**LOW-INCOME HOUSING TRUST FUND**

**WELFARE SET-ASIDE**

**CLIENT INFORMATION REPORT**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department/Agency:** | | | | **Contact Name:** | | | **Reporting Period:** | | | |
| **Name of Household** | **Type of Assistance**  **(**Rental Assistance, Mortgage Assistance, Security Deposit, Utility Assistance, Utility Deposit or Motel Voucher**)** | **Dollar Amount of Assistance** | **Monthly Gross**  **Income** | | **Race of Head of Household\***  (Refer to race codes on page 2. Place an “H” next to code if client is of Hispanic Ethnicity) | **Number of Children** | | **Size of Household** | **Is this client**  **homeless?**  (See definitions  on page 2)  **1 = Yes**  **2 = No** | **Does this client meet the definition of chronic homeless?**  **1 = Yes**  **2 = No** |
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| **Name of Household** | **Type of Assistance**  **(**Rental Assistance, Mortgage Assistance, Security Deposit, Utility Assistance, Utility Deposit or Motel Voucher**)** | **Dollar Amount of Assistance** | **Monthly Gross Income** | **Race of Head of Household\***  (Refer to race codes on page 2. Place an “H” next to code if client is of Hispanic Ethnicity) | **Number of Children** | **Size of Household** | **Is this client homeless?**  (See definition on page 2)  **1 = Yes**  **2 = No** | **Does this client meet the definition of chronic homeless?**  **1 = Yes**  **2 = No** |
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**\*Race Codes**

(1) White; (2) Black/African American; (3) Asian; (4) American Indian/Alaskan Native; (5) Native Hawaiian/Other Pacific Islander (6) American Indian/Alaskan Native/White; (7) Asian & White; (8) Black/African American & White (9) American Indian/Alaskan Native & Black/African American; (10) Balance/Other**. Place an “H” next to race code if client is of Hispanic ethnicity.**

**A Homeless Person is:**

“A person sleeping in a place not meant for human habitation or in an emergency shelter; and a person in transitional or supportive housing for homeless persons who originally came from the street or an emergency shelter.” (U.S. Department of Housing and Urban Development)

**A Chronically Homeless Person is:**

“An unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more *or* has had at least four episodes of homelessness in the past three years. A disabling condition is defined as “a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual’s ability to work or perform one or more activities of daily living.” (U.S. Department of Housing and Urban Development)