## **HOUSEHOLD DEMOGRAPHICS**

(06/24)

You have applied for, or currently reside in, a rental housing unit located in a development financed, in part, by a HUD or State of North Dakota Housing Program. The collection of certain resident data will be furnished to the U.S. Department of Housing & Urban Development. Each household must be offered the opportunity to disclose their race, ethnicity, and disability status. Parents/guardians are asked to disclose on behalf of all children in the household who are under the age of 18. There is no penalty for those households who do not wish to provide the requested information. However, all adult members (18 years or older) must sign/date at the bottom of this form as proof that the option to disclose was made available. \* Refer to the attached page for definitions of race, ethnicity and disability.

| Property Name  |            |           |               |             |                                   | Unit Number |                       |             |                       |                     |             |  |
|--|------------|-----------|---------------|-------------|-----------------------------------|-------------|-----------------------|-------------|-----------------------|---------------------|-------------|--|
| Household  | l Name     |           |               |             |                                   |             |                       | ·           |                       |                     |             |  |
|  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| HOUSEHOLD COMPOSITION  |            |           |               |             | Relationship to Head-of-Household |             |                       |             |                       |                     |             |  |
| Member<br>Number   | First Name | Last Name | Date of Birth | h           | Head                              | Spouse      | Adult Co-<br>Resident |             | Foster<br>Child/Adult | Live-in<br>Caretake |             |  |
| 1  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 2  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 3  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 4  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 5  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 6  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| 7  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| RACIAL CATEGORIES* Enter applicable code (see attached page)                               |            |           |               |             | mber<br>1                         | Member 2    | Member 3              | Member<br>4 | Member<br>5           | Member<br>6         | Member 7    |  |
| White - 1  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Black or African American – 2  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| American Indian or Alaska Native – 3   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Asian – 4 (a-g)  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Native Hawaiian/Other Pacific Islander – 5 (a-d)   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Choose Not to Disclose   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| ETHNIC CATEGORIES* Check all that apply for each household member                          |            |           |               | Member<br>1 |                                   | Member 2    | Member 3              | Member<br>4 | Member<br>5           | Member<br>6         | Member<br>7 |  |
| Hispanic or Latino   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Not Hispanic or Latino   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| Choose Not to Disclose   |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| DISABILITY STATUS* Check all that apply for each household member                          |            |           |               | Member<br>1 |                                   | Member 2    | Member 3              | Member<br>4 | Member<br>5           | Member<br>6         | Member 7    |  |
| Are any household members disabled according to the Fair Housing Act? If "Yes," check box. |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
| No or Choose Not to Disclose a Disability  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |
|  |            |           |               |             |                                   |             |                       |             |                       |                     |             |  |

Reasonable Accommodation: If a third party is required to assist with the completion of this document, add their signature and date, printed name, relationship and phone number to the bottom of this page.

| Head of Household Signature  | Date |
|------------------------------|------|
| Household Member 2 Signature | Date |
| Household Member 3 Signature | Date |
| Household Member 4 Signature | Date |

\* The following racial and ethnic definitions are modeled after the OMB-approved form, (HUD-52697), used by the U.S. Department of Housing and Urban Development (HUD):

## Household members can select one or more of the following applicable racial definitions:

- 1 White A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- 2 **Black or African American** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or African American."
- 3 American Indian or Alaska Native A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- 4 **Asian** A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent:

4a – Asian India4e - Korean4b – Chinese4f - Vietnamese4c – Filipino4g – Other Asian

4d – Japanese

5 – **Native Hawaiian/Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guan Samoa, or other Pacific Islands.

5a – Native Hawaiian 5c - Samoan

5b - Guamanian or Chamorro 5d - Other Pacific Islander

Note: Multiple racial categories may be indicated as such: 31 – American Indian/Alaska Native & White, 14b – White & Asian (Chinese), etc.

## Household members can select one of the following applicable ethnic definitions:

**Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."

**Not Hispanic or Latino** – A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless f race.

The following definition of "disabled" comes directly from the Fair Housing Act:

## Per the Fair Housing Act, the definition of disabled is:

- A physical or mental impairment which substantially limits one or more major life activities; a record of such an impairment; or being regarded as having such an impairment. For a definition of "physical or mental impairment" and other terms used in this definition, please see 24 CFR 100.201, available at:
- https://www.ecfr.gov/current/title-24/subtitle-B/chapter-I/part-100/subpart-D/section-100.201
- "Handicap" does not include current, illegal use of or addiction to a controlled substance.
- An individual shall not be considered to have a handicap solely because that individual is a transvestite.