HOUSING AUTHORITY OF THE TOWN OF ENFIELD

1 Pearson Way, Enfield, CT 06082 (860) 745-7493 Fax (860) 741-8439 TDD/TTY 800-545-1833 Ext. 849 www.enfieldha.org



DEMOGRAPHICS SURVEY

Under Section 8-37ee-313, paragraph b, of the Connecticut General Statutes, we are required to perform a demographic survey of all housing applicants as well as residents. At this time, I would like to ask that you complete the information below and return the form to the Enfield Housing Authority office with your application. This data will be kept confidential and will only be used as required by the State of Connecticut for Fair Housing reporting.

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Address:

ce:	Caucasian	Black or African American Asian
	Hispanic or Latino	American Indian, Alaska Native, Native Hawaiian, other Pacific Islander, or Other
mily Com	nposition:	
	Adults (how many curre	ently reside in the household)
	Children (how many cur	rently reside in the household)

