

# Head of Household

## Demographic Information

**Instructions:** This form is to be completed by the head of household only after occupancy has been approved for the Inclusionary Zoning Program in the City of Minneapolis.

Your approval for occupancy will not be affected if you choose not to respond. The owner will submit this information to the City of Minneapolis for assessment of households being served by its financing programs. Your cooperation is much appreciated.

<b>Housing Information (This section is to be completed by the owner/agent)</b>	
Property Name:	
Building Address	
Unit Number:	

<b>Head of Household Information</b>	
Name:	
Date of Birth (month/day/year)	
Race (select all that apply)	<input type="checkbox"/> African American; African; Black; and/or of African descent or the African diaspora <input type="checkbox"/> American Indian; Native American; Alaska Native; Native Hawaiian; and/or indigenous to North America <input type="checkbox"/> Asian/Pacific American; Asian/Pacific Islander (API); and/or of API descent or the API diaspora <input type="checkbox"/> Latinx; Hispanic; and/or indigenous to Central or South America <input type="checkbox"/> Middle Eastern/North African (MENA); and/or MENA descent or the MENA diaspora <input type="checkbox"/> Of European descent; and/or White <input type="checkbox"/> Other/not listed <input type="checkbox"/> I choose not to respond