

Housing Authority of the County of San Diego (HACSD)

MyHousing – Submit a New Application

How to Submit a new Application

Navigate to MyHousing WebApp

- a. Get to URL (sdhcd.myhousing.com) for the MyHousing Portal through the HACSD Website.
- b. This is the main page to submit new applications.
- c. Click on 'Start Here'.

♠ My Housing		ſext Size →
	Apply For Housing Here	
	Choose Your Language	
	English Español	
	Housing Authority of the County of San Diego (HACSD)	
	Online Waiting List Application	
ІМРО	RTANT NOTICE:	
• 1	Please inform HACSD if you require a specific accommodation to fully utilize the agency's services.	
• (Only ONE application will be accepted per household. Duplicate applications will not be accepted.	
Helpf	iul Information:	
• •	Before you begin the application process, please have available the social security -numbers, names and dates of birth of all family members. You will also need all income information regardless of source of income, for all family members. Please ensure that all information is entered accurately. The details provided on the application directly affect the selection process. New applicants will receive a confirmation number when an application is received. Have paper and pen ready to write down your confirmation number.	
Maint	taining Your Statue on the Walting Liet Start Here	
	Need Help? County of San Diego Housing and Community Development Services Already Applied?	
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Go through the workflow

The system will take you through a workflow. There are eight main steps in the workflow. All fields in red are required. Below are the eight listed steps.

- 1. Head of Household Demographics
 - a. Social Security Number (SSN) is optional.
 - b. Email Address is required confirmation will be sent to this email once the application is submitted.

🕈 My Housing		B			Text Size 🗸
1 Your Information Your Family Your	Address Your Income	5 Summary	6 Your Lists	7 Additional Questions	B
	Tell Us About The H (You'll add your far	Head Of Housek	nold		
	First Name	First Name			
	Middle Name	Middle Name			
	Last Name	Last Name			
	Select One	Gender ()			
	Social Security Number	Social Security Number 🕠			
	Birth Date	Birth Date ()			
	Select One	Current Citizenship Status			
	White Black/African American American Indian/Alaska Native Asian	Race(s) (hold the ctrl button apply)	and click to select all t	that	
	Select One	Ethnicity			
	Select One	Are you a U.S. Veteran?			
	Select One	Are you disabled?			
	Phone Number	Phone Number 🕧			
	Email Address	Email Address			
	Confirm Email Address	Confirm Your Email Address			
					More Below ±
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2. Family Members

- a. Currently set up to add up to 9 family members (in addition to the head of household).
- b. User will see similar set of questions for each family member as they had for the head of household.

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Your Information	Your Family	Jour Address Your It		5 Summary	6 Your Lists	7 Additional Questions	Bornel
		Tall He	Alson	t Vern Fereiler			
		Provide information for the	individuals	t YOUF Faithing who will live with you in you	ir household.		
	How many family memb will be on this application	pers (NOT including your on?	self)	0	1	2	
				3	4	5	
				l have mo	re family members		
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O	2	3 4		5	6		
	Your Family	PAULINA IN		Janning		Additional Quantum	
		Tell Us About Provide information for the	ut You individuals	r Family Mem	nbers pur household.		
		Family Member 1	of 1 - Conti	nue without entering any n	nore.		
		First Name		First Name			
		Middle Name		Middle Name			
		Last Name		Last Name			
		Select One	~	Gender ()			
		Select One	~	Relationship to Head Of	f Household.		
		Social Security Number		Social Security Number			
		Rith Date		Rinth Date			
		bith Date		bit in Date			
		Select One	•	Family member's curren	it citizenship status		
		White Black/African American American Indian/Alaska Asian	Native 👻	Race(s) (hold the ctrl bu apply)	tton and click to select a	ll that	
		Select One	~	Ethnicity			
		Select One	*	Family member is a U.S.	. Veteran		
		Select One	~	Family member is disab	led. (j)		
Pack			Need	Help?			More Be
							Next

3. Applicant Address

- a. Enter information as asked.
- b. If homeless and no address, instructions in the 'Need Help?' link at the bottom of the page provide instructions on how to add addresses of the nearest shelter where they received assistance.

🕈 My Housing		٠			Text Size 🗸
Your Information Your Family	3 Your Address Your Income	5 Summary	6 Your Lists	7 Additional Questions	
	Tell Us About	t Your Address			
	Street Address	Street Address			
	Address Line 2	Address Line 2			
	Suite/Apt	Suite/Apt			
	City	City			
	California 🗸 🗸	✓ State			
	Zip Code	Zip Code			
< Back	Ne	ed Help?			Next >
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Address Help Info

The address of the Head of Household where all relevant documentation will be received must be listed. You must provide an address where you can receive mail. This address will be used to contact you with important waitlist information and updates. If you are homeless and do not currently have a mailing address, you **cannot** enter 'homeless' in the address field. Please use the address of the nearest shelter where you receive assistance.

- c. When clicking next, an address validation screen will appear.
- d. User can select corrected address or keep what they entered.

My Housing							Text Size 🗸
Your Information	Your Family		4 Your Income			7 Additional Questions	8 Done!
		Те	ll Us About \	our Address	5		
			Select an	Address			
		The address you've entered: 3909 Ruffin Road San Diego. CA 91911 Edit address Use the above address Here's your corrected addre 3989 Ruffin Rd	255:			_	
		San Diego, CA 92123-1815 Use this corrected address	1				
		81911		◆ Lip code			
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4. Income

a. Click on Add Income at enter information



- b. Select who the income is for in the drop down.
- c. Fill out the rest of the information.
 - i. Only option for Type of Income is 'Income'.
 - ii. Options for how often are: Weekly, Bi-Weekly, Monthly, 2x-Monthly, Quarterly, Annually, Semi-Annually.

🕈 My Housing				- 🕄				Text Size 🗸
Your Information	Your Family	Your Address	4 Your Income		5 Summary	6 Your Lists	7 Additional Questions	B
		Tell	Us About Y	OUI come fro	Family's Inco	ome		
	1				×	Remove This Income		
		Т	est Twooneone	~	✓ Whose income is	it?		
		Ir	ncome	~	✓ Type of Income?			
		7-	-11		✔ Who do you recei	ve it from?		
		\$	1,000.00		✓ How much do you	ı receive?		
		B	li-weekly	~	✔ How often do you	receive it?		
			•	Add I	ncome			
< Back				Need H	elp?			Next >
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- 5. Summary and Certification
 - a. User can review what they entered.
 - b. Can click on the section under Family Info, Address Info, or Income Info to go to that step in the Application Workflow.
 - c. User can also click on the 🖿 on the Family Info line to add a family member.
 - d. User must check the box located at the bottom before they can move to the next screen.

My Housing	Your Family	iour Address Your income	5 Summary	6 Your Lists	7 Additional Questions	Text Size
		What Y	′ou've Told Us…			
	Family Info	Click on	an item to make changes			
	Test Twooneone (Hea	d of Household)				
	Birth Date: 12/01/2000	Races: White	Disabled: No	Veteran: No		
	Address Info					
	Residence Address: 3989 Ruffin Rd San	Diego, CA 92123-1815				
	Income Info					
	7-11 For: Test Twooneone	Amount: \$1,000.00	Frequency: Bi-weekly	Type: Income		
	-					
		I verify that the informati	ion provided in this application	n is correct.		
< Back			Need Help?			Next >
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Addre	ss Info					

WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODE STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AND SHALL BE FINED NOT MORE THAN \$10,000 OR IMPRISONED FOR NOT MORE THAN FIVE YEARS OR BOTH. I understand that any misrepresentation of information or failure to disclose information requested in this application may disqualify me from consideration for admission or participation and may be grounds for eviction or termination of assistance. I understand that it is my responsibility to keep my contact information current with the Housing Authority of the County of San Diego. I do hereby certify that the above information is true, accurate, and complete to the best of my knowledge.

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- 6. Waitlist Selection
 - a. Applicant can select from any available open waitlists.
 - b. Waitlist will turn from green to blue when selected, and you will see a blue checkmark as well.

🕈 My Housing			Ę	<u>b</u>			Text Size 🗸			
Your Information	Your Family	Your Address	Your Income	Summary	6 Your Lists	7 Additional Questions	8 Donet			
			Choose Yo (To apply to a particular li	our List(s) st, click on the list below.)						
	Breezewood Project-Based Vouchers (Escondido)									
Estrella Project-Based Voucher (San Marcos)										
	Housing Ch	<u>oice Voucher (a</u>	lso known as Se	ection 8)						
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7. Preferences

- a. Applicant must select either Yes or No
 - i. Note: they are in red for required.
- b. Applicant will not be able to select next until a selection is made for each Preference.

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O			⊘			7	
Your Information	Your Family	Your Address	Your Income	Summary	Your Lists	Additional Questions	Donet
		ļ	Answer A Few N	Nore Question	าร		
			Please answer th	hese questions			
1	Yes	No	Do you live or work i HACSD jurisdiction is City, Encinitas, Carlsb	in HACSD Jurisdiction? s any area of San Diego Cou pad, and Oceanside.	unty EXCEPT for Cities o	of San Diego, National	
2	Yes	No	Are you or your spou	use/co-head of household 6	52 years of age or older	?	
3	Yes	No	ls any member of the	e household a person with (disabilities?		
4	Yes	No	Are you a family with	n dependent children?			
5	Yes	No	Are you a veteran or	a surviving spouse of a vet	eran?		
6	Yes	No	Have you or your spo past 6 months?	ouse/co-head of household	l worked at least 20 ho	urs per week for the	
7	Yes	No	Are you currently ho	meless?			
0							
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- c. Once selected, preference will turn green, and user can see the option selected.
 - i. No: Red
 - ii. Yes: Green
- d. Selecting Next at end of Step 7 will submit the application.

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Tour mornation	tour ranny	TOUR ADDISS	tour income	Summary	TOUT LISTS	Additional Questions	Donar
		A	nswer A Few N	More Question	าร		
			Please answer t	hese questions			
1	Yes	No	Co you live or work HACSD jurisdiction i City, Encinitas, Carlsi	in HACSD Jurisdiction? is any area of San Diego Co bad, and Oceanside.	unty EXCEPT for Cities of S	an Diego, National	
2	Yes	No	✓ Are you or your spo	use/co-head of household (52 years of age or older?		
3	Yes	No	 Is any member of th 	e household a person with	disabilities?		
4	Yes	No	✓ Are you a family wit	h dependent children?			
5	Yes	No	✓ Are you a veteran o	r a surviving spouse of a vet	eran?		
6	Yes	No	Have you or your sp past 6 months?	ouse/co-head of household	d worked at least 20 hours	per week for the	
7	Yes	No	 Are you currently ho 	omeless?			
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- 8. Confirmation of Submission Screen
 - a. For security reasons the screen will close after **2 minutes.**
 - b. An email will autmatically go out to the email entered in Step 1 of the workflow.
 - c. The email will contain Applicant name, Confirmation Number, Submission date, and the waitlists the applicant selected.
 - d. The application will be available on Elite the next day.
 - e. The user can create an account on MyHousing to access the Application on the next day.

A My Housing				b			Text Size 🗸
Your Information	Your Family	Your Address	Your Income	Summary	Your Lists	Additional Questions	8 Donel
		You	r session will expire in a	pproximately two min	utes		
		Congratu	llations you have c	ompleted your ap	plication.		
	Applicant Test Two	Name: oneone	Confirm HCD128362	ation #: 2700081621	Submis 12/27/20	sion Date: 24 11:06 AM	
	You have applied to the fi	ollowing waitlist:					
	Housing Choice \	/oucher (also known as Se	ection 8)				
		If you would like to keep	a copy of this confirm	ation for your records,	select the options below	:	
	1	Print	Save	Email	Close	•	
	You can only submit ONE	application to the Housir	ng Authority of the Count	y of San Diego (HACSD).	Duplicate forms will not	be accepted.	
	You will receive periodic r you have reached the top	notifications from us. Failu of our waiting list you wi	re to respond to any requil Il be notified by mail.	uest could result in your	name being removed fror	n the waiting list. When	
			You're	all set!			

What happens on multiple submissions

a. If the user attempts to create an account on the same day, they will receive a message stating 'Your registration isn't yet available.'

A My Housing		₽		Ø ~	Text Size 🗸
	Let's set up your account Setting up an online account with MyHousing is quick and easy. Just enter a few details to get started, and help us find you in our system. To start, please select your Registration Type below.				
	APPLICANT				
	You are on at least one waiting list for housing assistance.				
	1	2			
	Account LookUp	Create Account			
	• Your registration isn't yet available.				
	First Name	Test			
	Last Name	New			
	(i) Date Of Birth	07/01/1980			
	Ple				
	 Social Security Number 				
	O (i) Social Security Number or Alternate				
	Identification Number				
	\bigcirc (i) Alien Registration Number				
			Continue		

b. If the user attempts to submit another application on the same day and the information entered in Step 1 matches the previously entered application, they will receive the message below.



- c. If the user attempts to submit another application that is already in Elite and the information in Step 1 matches the existing application, the user will be routed to a page to create an account.
- d. The user can follow this workflow to create the account to access their existing application.

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	Let's set up your account Setting up an online account with MyHousing is quick and easy. Just enter a few details to get started, and help us find you in our system. To start, please select your Registration Type below.					
		APPLICANT You are on at least one waiting list for housing assistance.				
	You have been redirected to register for an account because you have previously applied. Please enter the necessary information to access your application to update it.					
	Registration					
	First Initial	First Initial				
	Last Name	Last Name				
	Date Of Birth					
	I Social Security Number					
	O () Social Security Number or Alternate					
	Identification Number					
			Continue			
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