

Rental Application

Applicant: Name:									
Current Address:									
City, State, Zip Code:			E	Email ad	dress:				
Date of Birth:	Society	cial Security	#						
Home Phone:	Wo	Work Phone:			Bedroor	Bedroom Size Requested:			
Marital Status: single	married	divorced		separate	d widow				
Co-Applicant: Name:									
Current Address:									
City, State, Zip Code:									
Home Phone:	Social Sec	ecurity # Date of Birth:							
Marital Status: single married		divorced		separate	d widow				
1. List the Head of House family member to the Name		r members w Birth Date	ho wil	l be livi	ng in the unit. Gives Social Security	<u>S</u>	Rela	<u>nt</u>	of each
	Head of Household	Bute				2	applies	<u>s</u>	_
	Head of Household					NO	FT FT	PT PT	_
						NO	FT	PT	-
						NO	FT	PT	
						NO	FT	PT	_
						NO NO	FT FT	PT PT	-
2. Do you expect a change in If yes, please explain: STUDENT STATUS: Are all of the residents full ti If yes: is the household comp	me students?	() Yes () N	Vo	he next	12 months? ☐ Yes		No		J
Neither of who is dependent		() Yes							

() Yes () No



If yes: is Applicant & CO-Applicant married and file a joint tax Return? () Yes () No

If yes: is head of household in federal or state job training program? () Yes () No

If yes: does the household receive AFDC or TANF?

INCOME INFORMATION

Please answer each of the following questions. For each "yes," provide details in the charts below. Does any member of your household: 3. Expect a leave of absence from work due to lay off []Yes []No \$_____ medical, maternity, or military leave. 8. Have an entitlement to receive alimony that is not 12. Now receive or expect to receive regular contributions from organizations or individuals not living in the unit....... []Yes []No \$______ 13. Receive income/dividends from assets including checking, savings, certificates of deposit, stocks, bonds, rental property []Yes []No \$_____ If yes, please explain: **Employment: Applicant:** Circle all applicable: Employed full time Employed part time self – employed Non-employed Unemployed Current Employer_____ Position____ Date Hired______
Address____ Supervisor____ Phone_____

Current Wages: \$_____ per: hour week month year (circle one) Do you expect to earn substantial overtime? () Yes () No If so, how much? _____ **Co-Applicant:** Circle all applicable: Employed full time Employed part time self – employed Non-employed Unemployed Current Employer_____ Position____ Date Hired_____
Address____ Supervisor____ Phone_____
Current Wages: \$_____ per: hour week month year (circle one)



Do you expect to earn substantial overtime? () Yes () No If so, how much?

ASSET INFORMATION

Please answer each of the following questions.		
Do any household members have any of the following?	If yes, indi	cate the value.
Checking Account[]Yes []N	No \$
Savings Account		
Certificates of Deposit		
Government Benefits Card[]Yes []N	No \$
Mobile Payment Services (Venmo/PayPal/Chime/Cash App) []Yes []N	No \$
Stocks/Bonds/Mutual Funds]Yes []N	No \$
Trust Accounts]Yes []N	No \$
Whole or Universal Life Insurance (not Term)[]Yes []N	No \$
Personal Property held as an investment []Yes []N	No \$
Real Estate]Yes []N	No \$
Annuities]Yes []N	No \$
Cryptocurrency / Bitcoin]Yes []N	No \$
GoFundMe / Crowdsourcing]Yes []N	No \$
Any Assets not listed above]Yes []N	No \$
Have you disposed of any assets in the		
previous 24 months for less than fair market value? []Yes []N	No

List all information for any asset noted above (including Checking, Savings, IRAs, Keogh accounts, and Certificates of Deposit) of all household members.

BANK NAME or INSTITUTION	TYPE OF ACCOUNT	ACCOUNT NUMBER	BALANCE

PREVIOUS RENTAL HISTORY	
	Do you: □Rent □Own □Other
	Telephone No
	How Long Have You Lived There?
	Reason for Leaving.
Name and address of your Former Landlord:	
	Telephone No
	How Long Did You Live There?
	Reason for Leaving.



OTHER INFORMATION:

Driver	's License #:	State:	Expires:	
Vehicl	e Model:	Year:	License Plate #:	
ADDI'	TIONAL QUESTIONS:			
1.		I member filed for Bankruptcy?		[] Yes [] No
2.			nancy?	
3.			derally Funded Housing for a lease	[] []
	violation including drug us	e or a crime?		[] Yes [] No
4.	If yes, explain:		elony or Misdemeanor?	
5.	Are you or any household i	member subject to lifetime sex of	offender registration	[] Yes [] No
6.	Are you or any household i	member enlisted in the U.S. Mil	itary or a veteran	[] Yes [] No
7.	Are you or any household i	member currently receiving hou	sing assistance from HUD or a PHA	[] Yes [] No
8.	If yes, explain:		g needs?	[] Yes [] No
9.	If yes, explain:	that work for Community Housi		[] Yes [] No
10.	Will you be bringing a pet's	?		[] Yes [] No
	gency Contact:			
Neares				
	Name	Pho	one Rel	ationship
	KETING INFORMATION:			
residen consum capacit; which l This fer contain A depo the cov authori; investig below, approva a real e	cy at this community entails certainer report as defined in the Fair Cy, character, general reputation, placknowledge is the cost of procee is non-refundable. I agree that the definition will est of \$ is material sof the lease and as a damaze Community Housing Partners gations typically include (but are the applicant gives permission to all of this application. The understate transaction.	ain income restrictions and that resigned in income restrictions and that resigned in the residual Reporting Act, 15 U.S.C. 188 personal characteristics, or mode of the personal definition to execution of a Lease of the personal between the penalty of personal definition in the personal personal definition of the personal defini	atements contained herein are true. I have dency is subject to qualification. I hereby a (d) seeking information on the credit living. I tender in addition to any securitologyment verification, character reference Agreement that I will execute a tenant courty. To veed, said deposit will be held as (partiallit will be \$ By execute a strong or the strong as they may deem appropriate and understands the results of such be allosure that the licensee, Community House Complete to willfully falsify a material fact	by authorize Landlord to procure a worthiness, credit standing, credit sty deposit, the amount of \$
matter	within the jurisdiction of a fed	eral agency.		·
Resider Resider with the or incor	nt's initial certification and at each nt understands that (s) he must gi is paragraph is a condition of Res	th annual recertification. This inform ve truthful and complete income an sident's occupancy of the Unit. If O information, Owner may evict Resident	swer all questions about income and stud mation is essential for determining Resid d student status information at all times. where discovers, at any time the Lease Tellent from the Unit.	ent's eligibility to occupy the Unit. Resident understands that compliance
Annli	aant.		Data	
			Date:	
Daggier	od bye	Data Dagiya	od. Time.	



COMMUNITY HOUSING PARTNERS



We are an equal housing opportunity provider. We do not discriminate on the basis of race, color, sex, national origin, religion, disability or familial status (having children under age 18), or any other legally protected characteristic. We do not interfere, threaten, or coerce person in the exercise of their fair housing rights. We do not retaliate against persons who have asserted their rights or person who have assisted

someone in asserting their rights.