



HELP TO HOME INC — RENTAL APPLICATION



Please Note: BEFORE completing this Application, you are required to have employment AND have enough money saved to pay for your first month rent AND Security Deposit of the same amount. If you require assistance for this funding, then you should consider FIRST seeking funding through community social agencies such as Turning Points or The Salvation Army. Please submit with this application a list of all your expenses and debts including amount of payments and due dates. You must also read and sign and date the following forms:

1. Rental Application (This Form)
2. Unit Resident Program Pledge
3. Client Rules & Regulations
4. Authorization for Verification of Information for Lease
5. Authorization for Release of Personal Information

First & Last Name 1: _____
 Other / Maiden Names: _____
 SS #1: _____
 Driver's Lic #1: _____ State: _____
 DOB #1: _____
 Cell PH #1: _____
 Email #1: _____

First & Last Name 2: _____
 Other / Maiden names: _____
 SS #2: _____
 Driver's Lic #2: _____ State: _____
 DOB #2: _____
 Cell PH #2: _____
 Email #2: _____

CURRENT ADDRESS INFORMATION

Address: _____ Apt: _____ City: _____ St: _____ Zip: _____
 Landlord's Name: _____ Landlord's phone#: _____
 Present Lease Started: _____ Rent Amount: _____ Shelter__ Program__ Regular lease __
 Reason for moving: _____

PREVIOUS ADDRESS INFORMATION

Address: _____ Apt: _____ City: _____ St: _____ Zip: _____
 Landlord's Name: _____ Landlord's phone#: _____
 Leased: From date: _____ To date: _____ Rent Amount: _____ Shelter__ Program__ Regular lease __
 Reason for moving: _____

OCCUPANTS

How many individuals (including Applicant) will occupy the Unit? Number is _____

Name: _____ Relation: _____ Age: _____
 Name: _____ Relation: _____ Age: _____
 Name: _____ Relation: _____ Age: _____
 Name: _____ Relation: _____ Age: _____

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CURRENT EMPLOYMENT

Employer: _____ Phone #: _____ Ext.# _____
Address: _____ Supervisor or person to contact: _____
How Long on Job: _____ Salary/Wage (take home) \$ _____ Wk ___ 1/2 Mo ___ Mo ___ Yr ___

PREVIOUS EMPLOYMENT

Employer: _____ Phone #: _____ Ext.# _____
Address: _____ Supervisor or person to contact: _____
How Long on Job: _____ Salary/Wage (take home) \$ _____ Wk ___ 1/2 Mo ___ Mo ___ Yr ___

FINANCIAL

Bank #1 Name & Address: _____ Checking Y/N ___ Savings Y/N ___
Bank #2 Name & Address: _____ Checking Y/N ___ Savings Y/N ___
Funds you have now: Bank #1 _____ Bank #2 _____ Cash _____ Total _____
What is the source of funding for 1st Month's Rent _____ Security Deposit _____
What other income in addition to employment? _____ Amount \$ _____ How often? _____

VEHICLES

Vehicle #1: Year _____ Make _____ Model _____ Tag# _____
Vehicle #2: Year _____ Make _____ Model _____ Tag# _____
Car Payment Amount: Vehicle #1: \$ _____ Vehicle #2: \$ _____
Insurance Company Name: _____
Car Insurance Payment Amount: \$ _____ (Specify insurance paid monthly / bi-annually)

LEGAL

Have you ever been evicted or served a Writ of Possession (giving 24 hour notice of eviction) by a Deputy Sheriff? Yes ___ No ___ If Yes, when _____.
Have you ever been arrested? Yes ___ No ___ If Yes, for what? _____
Have you ever been convicted? Yes ___ No ___ If Yes, for what? _____

BACKGROUND

Who referred you to Help To Home, Inc. _____
Are you part of a reunification program? If yes, who's your case manager and contact number?
_____ Contact #: _____
Why do you want to be in the Help To Home, Inc. program? _____

(Continues 3rd page)

The undersigned acknowledges that if the information provided by me (us) is found to be misleading or false, my acceptance for this rental, lease or purchase, whether determination is made before or after my date of occupancy, may be affected.

I/we understand that by submitting this form with my/our name(s) below I/we have effectively signed this rental application.

First and Last Name #1 _____ **Date** _____

First and Last Name #2 _____ **Date** _____

Received by H2H _____ **Date** _____

NOTE: USE THE NEXT PAGE OF THIS FORM TO COMPLETE ANY ANSWERS AS NEEDED

When this form is complete, save it to your device, then email it to HelptoHomeInc@gmail.com

THIS SPACE BELOW OPEN FOR CONTINUATION OF ANY ANSWERS TO THE ABOVE QUESTIONS:
