Pre-Rental Application

Church Community Housing Corporation

OFFICE USE:

Date and Time Rec'd:

Name of Development: N/A Location: _____
Number of bedrooms desired: _____

Name: _____
Present street address: _____ Apt #: _____
City: _____ State: _____ Zip: _____
Home phone: _____ Work phone: _____ Alternate phone: _____
Email address: _____
Driver's License #: _____
Do you own a vehicle? Yes ____ No ____ Registration #: _____ State: _____ _____

The following information is required by HUD for all those who live in an apartment, including yourself:

Name	Sex	Relationship	Date of Birth	Place of Birth	Social Security #

Present landlord: _____ Landlord's Address: _____
Landlord's phone: _____ How long have you lived there?: _____
Present monthly rent: _____ Fuel & electronic cost per month: _____
Previous address: _____
Previous landlord: _____ Previous landlord's address: _____
Previous landlord's phone #: _____
Monthly rent: _____ Fuel & electric cost per month: _____

EMPLOYMENT DATA FOR ALL HOUSEHOLD MEMBERS

Current employer: _____
Address: _____ Phone: _____
Length of employment with this company: _____ Gross Annual Wage: _____
Current employer: _____
Address: _____ Phone: _____
Length of employment with this company: _____ Gross Annual Wage: _____

OTHER SOURCES OF INCOME FOR ALL FAMILY MEMBERS

Head of household gross monthly social security amount $_____
Spouse/Other gross monthly amount social security amount $_____
SSI/SSDI Gross monthly amount $_____
Pension amount (gross) per month $_____ Name of recipient: _____
Pension Fund Name & Address: _____
_____
Veteran's benefits: Amount per month $_____ VA File #_____
Public Assistance per month $_____
Other income (child support, TDI, unemployment or other) _____
_____
Do you receive recurring cash gifts from anyone? _____

ASSETS

Checking accounts:

Bank: _____ Balance: _____

Bank: _____ Balance: _____

Savings/Certificates of Deposit Accounts (CDs)

Bank: _____ Balance: _____

Bank: _____ Balance: _____

Stocks, Bonds, Mutual Funds, Trust Funds, Whole Life Insurance

Name of Stock: _____ Value: _____ Annual Income: _____

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Real Estate/ Mobile Homes:

Description/Address: _____

Estimated Value: $_____ Balance due on mortgage: _____

During the past 2 years, have you given away more than $1,000 or disposed of other assets for less than their fair market value? Yes_____ No _____ If yes, please explain: _____

_____

MISCELLANEOUS INFORMATION

Is any household member over 18 a full time student? _____

Were you ever the subject of any eviction complaint? YES _____ NO _____

If yes, please explain: _____

_____

The following information will be required by the federal government to monitor this owner's compliance with equal housing opportunity and fair housing laws. The law provides that an applicant may not be discriminated against on the basis of the information supplied below or whether or not the information is furnished.

Race/National Origin

___ White/not Hispanic

___ Hispanic

___ I do not wish to furnish the above information

___ Black/Not of Hispanic origin

___ Asian or Pacific Islander

___ American Indian or Alaskan native

Please note that this is a preliminary application and in no way insures occupancy, additional information may be requested to complete processing of your application. Your signature gives written consent to the management to verify information in this application. A false statement or misrepresentation on your application will affect approval of residency.

DATE: _____ SIGNATURE: _____

TransUnion | ResidentScreening

APPLICANT/TENANT CONSENT

I hereby consent to allow Church Community Housing, through its designated agent/employee, to obtain and verify my consumer reports, including but not limited to, my credit report, criminal information, and eviction information for the purpose of determining my eligibility to lease an apartment. I further understand if I lease an apartment, I consent to allow Church Community Housing and its designated agent/employee, for the duration of my lease, to review the following list of information to assess risk, for analytics, for process improvement, and other uses: my consumer reports, including but not limited to my credit report, criminal information, eviction information, my rental payment history, and occupancy history, and other information.

The facts set forth in my application for residency are true and complete. False, fraudulent or misleading information on an application may be grounds for denial of residency or subsequent eviction.

Applicant Name	Signature	Date
Co-Applicant/Guarantor Name	Signature	Date
Co-Applicant/Guarantor Name	Signature	Date

Church Community Housing Corporation

Working for decent housing for families of low and moderate income in Newport County

Consent for Release of Information

GENERAL AUTHORIZATION FOR RELEASE OF INFORMATION

Name:_____ Phone:_____
Address:_____
_____

I, the above-named individual, have authorized Church Community Housing Corporation to verify the accuracy of the information which I have provided, from the following sources (specify):

Current/Previous Landlords
Current Landlord _____ _____
Previous Landlord _____ _____
Previous Landlord _____ _____
Previous Landlord _____ _____

I hereby give you my permission to release this information to the Church Community Housing Corporation subject to the condition that it be kept confidential. I would appreciate your prompt attention in supplying this information requested on the attached page to the Church Community Housing Corporation agent within five (5) days of receipt of this request.

I understand that a photocopy of this authorization is as valid as the original.

Thank you for your assistance and cooperation in this matter.

Signed under the pains and penalties of perjury.

_____ _____
Signature Date

_____ _____
Signature Date