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[0.75 inch Equal Housing Opportunity Logo]To SBA Home Page

**APPLICATION**  Housing  Project Hope  Glasses

|  |  |
| --- | --- |
| Office Use Only | Leasing Agent: |
|  Approved - Unit #  Declined Date: |
| Security Application Fee Concession:  $ $ $ |
| Lease Term Monthly Rent |

 Guardianship  Children’s Glasses

**I. Applicant / Spouse’s Application**

Applicant’s Name:

Driver License #: State:

Spouse’s Name: Driver License #: State:

Last Four SS #: XXX-XX-

DOB: \_ Last Four SS #: XXX-XX-

DOB:

Phone #: Cell #: Email:

Phone #: Cell #: Email:

**Student Status:**  Full Time  Part Time  Not Student **Student Status:**  Full Time  Part Time  Not Student

## Documents Needed: Picture ID and Social Security Card for each adult in the household

In order to substantiate your income qualification your marital status must be verified. Please note that the following information is required and will be used for income qualification only:

**Applicant’s Marital Status:**  Married  Separated  Widowed  Divorced  Never Been Married

**II. Other Household Members**

Only list children who are dependents of persons listed on this application: **Check Student Status:**

Name: Current Age: DOB:  F/T  P/T  Not

Name: Current Age: DOB:  F/T  P/T  Not

Name: Current Age: DOB:  F/T  P/T  Not

Name: Current Age: DOB:  F/T  P/T  Not

**Documents Needed: Social Security Card for each minor in the household**

Are there any other household members not listed on this or a separate application (i.e., spouse, absent spouse, roommate, or other)?

 NO  YES If yes, please explains: Does anyone in the household anticipate changes to “Student Status” within this calendar year?  NO  YES

If yes above, list name(s): Anticipated Change(s):

**III. Residency History**

List the past two years of residency history. If additional space is needed, please use the back of the application:

**Current Address: Previous Address:**

City, State, Zip: City, State, Zip:

From: To: From: To:

 Rent  Own  Other  Rent  Own  Other

Landlord’s Name: Landlord’s Name:

Landlord’s Phone #: Rent Amount: Landlord’s Phone #: Rent Amount:

**IV. Employment History**

**Applicant’s Current Employer: Spouse’s Current Employer:**

Employer’s Name: Street Address: City, State, Zip: Phone #: Fax #: Supervisor’s Name: Anticipated Gross Annual Income: If other, list source:

Employer’s Name: Street Address: City, State, Zip: Phone #: Fax #: Supervisor’s Name: Anticipated Gross Annual Income:

If other, list source:

**Documents Needed: Earned Income for ALL members of the household for the past 60 days**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **V. Other So** | **urces o** | **f Income (Does the Applicant or Spouse receive any of the fo** | | **llowing** | **incomes?)** |
| **Applicant’s Other Income:** |  |  | **Spouse’s Other Income:** |  |  |
| **Source:**  SSI/SSA: |  NO | **Gross Amount Received:**   YES $ | **Source:**  SSI/SSA: |  NO | **Gross Amount Received:**   YES $ |
| Retirement/Pension: |  NO |  YES $ | Retirement/Pension: |  NO |  YES $ |
| Unemployment: |  NO |  YES $ | Unemployment: |  NO |  YES $ |
| Recurring Contribution: |  NO |  YES $ | Recurring Contribution: |  NO |  YES $ |
| Alimony: |  NO |  YES $ | Alimony: |  NO |  YES $ |
| AFDC/TANF: |  NO |  YES $ | AFDC/TANF: |  NO |  YES $ |
| Child Support: |  NO |  YES $ | Child Support: |  NO |  YES $ |
| Have Child Support Court Order |  NO |  YES $ | Have Child Support Court Order |  NO |  YES $ |
| Military Service |  NO |  YES $ | Military Service |  NO |  YES $ |
| Other: |  NO |  YES $ | Other: |  NO |  YES $ |

**VI. Household Assets**

**Does any household member (including children) have a checking or savings account, IRA, CD, Bonds, Real Estate, or any other type of asset(s)?  NO  YES**

**If yes**, list type of asset and name of institution:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant** | **Spouse** | **Child** | **Type of Asset** | **Institution** |
| **** | **** | **** |  |  |
| **** | **** | **** |  |  |
| **** | **** | **** |  |  |
| **** | **** | **** |  |  |

## Has anyone in your household disposed of any asset(s) in the past twenty-four (24) months?

** NO  YES If yes**, explain:

**Documents Needed: 60 days of checking and savings account information with itemized transactions**

**Additional Documents Needed – if applicable**

Eviction Notice, if currently renting – 6 months payment history from landlord, Copy of Lease Statement, Utility Shutoff Notices, Payment History from CLF & P, CHA Voucher, CHA TTP (Total Tenant Payment Form), Verification of Residency, Past Due Rent Letter, Letter or Lease Agreement from a Prospective Landlord. Other documents may be requested by the case manager.

## VII. General Information

**Emergency Contact Information:**

**Applicant’s Emergency Contact: Spouse’s Emergency Contact:**

Contact Name: Street Address: City, State, Zip:

Phone #: 2nd Phone #: Relationship:

Contact Name: Street Address: City, State, Zip:

Phone #: 2nd Phone #: Relationship:

**Vehicle Information:**

**Applicant’s Vehicle: Spouse’s Vehicle:**

License Plate #: State: License Plate #: State:

Make: Type: Color: \_ Make: Type: Color:

**Other Information Needed:**

**Do you have pets?  NO  YES If yes, how many? What kind? What kind?**

**Weight: Weight:**

**Has anyone in your household been convicted of a felony?  NO  YES If yes, list name(s):**

I/We hereby authorize Community Action of Laramie County, Inc. to make investigations to confirm the contents contained in this application. Furthermore, I/we authorize investigations be extended or for subsequent investigations to be completed in connection with an update, lease renewal, recertification, extension or collections, with respect or in connection with the rental or lease of a residency for which this application was made. I/We understand that these investigations might include, but not necessarily be limited to: past rental history, banking relations and criminal background check. I/We consent to these investigations and authorize landlord, property management company, banking institution and law enforcement agency to release to the above mentioned Company without any liability therefore, any information contained in the records concerning the undersigned applicant and knowledge and agree that any misrepresentation and/or omission of fact or detrimental information contained in this report shall constitute a default under the applicant’s initial application/lease agreement and may, in the sole discretion of management, be grounds for denial of applicant’s application or eviction proceedings. We further agree that the information contained in this application may be used in such investigation(s) and above mentioned Company shall be held harmless for any action or claim by me/us in connection with the use of the information contained herein or any investigation conducted by the above mentioned Company.

Background Check Charge – Applicant has to submit the sum of $ which is a non-refundable payment, receipt of which is acknowledged by management. Such sum is not rental payment or deposit amount. In the event this application is approved or disapproved, this sum will be retained by management to cover the cost of processing application as furnished by applicant.

TITLE VII of the CIVIL RIGHTS ACT of 1966 makes discrimination based on race, color, religion, sex or national origin illegal. The Federal agency, which administers compliance with this law concerning this company, is The Department of Housing and Urban Development. EQUAL CREDIT OPPORTUNITY ACT - The Federal Equal Opportunity Act prohibits creditors from discriminating against credit applications on the basis of sex or marital status. The federal agency, which administers compliance with this company’s Equal Credit Opportunity, is The Federal Trade Commission, Washington, DC 20580.

Under penalty of perjury, I certify that the information presented in this application is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information will result in denial of my application for residency or the immediate termination of the lease agreement.

# Applicant’s Signature: \_

# Spouse’s Signature:

Date:

Date: