PARTICIPANT NAME:	**HMIS#:**

REFERRING AGENCY:	

AGENCY CONTACT NAME:	**PHONE:**

PROPERTY MANAGER INFORMATION

I, _____ agree to enter to a rental agreement with the following applicant
(Name of Landlord or Property Management Company)

_____.
(Applicant's Full Name)

LEASE INFORMATION

Type of Housing: ☐ Shared Housing ☐ Single Room ☐ Apartment/Unit ☐ House   **Total Bedrooms:** _____

The property is located at: _____ _____
(Street Address)   *(Unit #/Apt #)*

_____ _____
(City)   *(Zip Code)*

Furnishings: ☐ Furnished   ☐ Unfurnished

Rent Includes: ☐ Electricity   ☐ Water   ☐ Gas   ☐ Trash   ☐ Other:_____

Amenities: ☐ Stove   ☐ Refrigerator   ☐ Parking   ☐ ADA Compliant   ☐ Other:_____

Monthly Rent: $_____   **Security Deposit: $_____**   **Move-In Date: _____/_____/_____**
(Month)   *(Day)*   *(Year)*

Lease: ☐ Month-to-Month   ☐ 12-Month   ☐ Other_____

PAYMENT INFORMATION

Please make checks payable to: _____
(Checks to be made only to the Property Owners or Authorized Management Company)

Landlord/ Property Management Name: _____

Address: _____

Telephone Number: (_____)_____   **E-mail Address:** _____

I, certify that I am the landlord/property manager of the unit and all the information that I have provided on this form is true and correct. I certify the property does not have a current foreclosure or a pending real estate sale.

Landlord/ Property Manager Signature: _____   **Date:** _____

OFFICE USE: ☐ **Lease Agreement on file** ☐ **W-9 on file**