

# GEDCO

## Govans Ecumenical Development Corporation

*Building Caring and Compassionate Communities*

### Harford House

Single Room Occupancy Residence

*For men only*

1517 E. North Avenue

Baltimore, MD 21213

410-752-4415 phone

410-752-4416 fax

### Micah House

Single Room Occupancy Residence

*For women and men*

5207 York Road

Baltimore, MD 21212

410-464-0935 phone

410-464-0936 fax

Applying to:  Harford House  Micah House  Both

## RENTAL APPLICATION

### 1. General Information

Name \_\_\_\_\_  Male  Female

Mailing Address \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ or \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you a veteran?  Yes  No How did you hear about our program? \_\_\_\_\_

### 2. Income

*Fill in all the blanks that apply to you.*

Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Employment income before taxes: \$ \_\_\_\_\_ /hr; \_\_\_\_\_ hours each week, or \$ \_\_\_\_\_ yearly salary.

Unemployment Insurance: \$ \_\_\_\_\_ every two weeks.

Government Assistance: \$ \_\_\_\_\_ each month. Check which type(s):  TDAP  SSI  SSDI

TANF  Social Security Retirement  VA  Other (specify) \_\_\_\_\_

How long have you been receiving assistance? \_\_\_\_\_ Eligible until \_\_\_\_\_

List any other income \_\_\_\_\_

List any assets such as property, vehicles, bank accounts, bonds \_\_\_\_\_

List any unusual medical expenses \_\_\_\_\_

**3. Section 8**

Have you ever applied for Section 8 Housing Assistance? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Application # \_\_\_\_\_

Have you ever rented Public Housing in Baltimore?  Yes  No Section 8?  Yes  No

Do you owe money to the Housing Authority?  Yes  No If yes, how much? \$ \_\_\_\_\_

**4. Rental/Housing Information**

Where are you currently staying at night? (friend, room, shelter, etc.) \_\_\_\_\_

Who was your last landlord/landlady? (Include relative if you paid rent) \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Rent: \$ \_\_\_\_\_ per month. Dates lived there: \_\_\_\_\_ to \_\_\_\_\_

Did you have a lease in your own name?  Yes  No if no, name on lease: \_\_\_\_\_

If landlord/landlady is a relative, state how you are related: \_\_\_\_\_

Why did you move? \_\_\_\_\_

Previous landlord/landlady (If less than three years ago):

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Rent: \$ \_\_\_\_\_ per month. Dates lived there: \_\_\_\_\_ to \_\_\_\_\_

Did you have a lease in your own name?  Yes  No if no, name on lease: \_\_\_\_\_

If landlord/landlady is a relative, state how you are related: \_\_\_\_\_

Why did you move? \_\_\_\_\_

List any other addresses you lived at since January 1998:

Address \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

Why did you move? \_\_\_\_\_

Address \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

Why did you move? \_\_\_\_\_

Address \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

Why did you move? \_\_\_\_\_

Address \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

Why did you move? \_\_\_\_\_

During the past five years, has your lease been terminated, have you broken your lease or been evicted?

Yes  No *If yes, explain:* \_\_\_\_\_

\_\_\_\_\_

## 5. Living Situation

Have you ever lived in a situation where you shared a bathroom and/or kitchen other than with your family?

Yes  No *If yes, describe in detail any problems you had in that situation:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any special housing arrangements you may need: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When would you be ready to move into Harford House or Micah House? \_\_\_\_\_

When will you be able to pay your security deposit and first month's rent? \_\_\_\_\_

*There is usually a waiting list to enter Harford House or Micah House. Please stay in touch with us, especially if your contact phone number changes, so that we can let you know when space is available.*

**6. References**

List at least two local references who are not related to you. Please include at least one social worker, shelter or meal program staff person, counselor, case worker, or other professional who has known you for a minimum of six months.

Name \_\_\_\_\_ Phone(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ How long has this person known you? \_\_\_\_\_

Name \_\_\_\_\_ Phone(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ How long has this person known you? \_\_\_\_\_

Name \_\_\_\_\_ Phone(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_ How long has this person known you? \_\_\_\_\_

**Truthfulness Statement**

To the best of my knowledge, I have filled out this application as truthfully, correctly, and completely as possible. I understand that this information will be used to determine my eligibility for a rental unit at Harford House or Micah House, and if it is false, incorrect, or incomplete my application may be rejected or my tenancy terminated.

I agree to allow Harford House or Micah House management or their designated agent to verify the information on the application by obtaining a credit report, interviewing my references and representatives of other agencies, conducting a criminal background investigation, verifying my income and asset information, and obtaining my rental history and other information as needed.

Once the application process is completed and if I am approved to move in, I understand I will sign a one-year lease agreement that converts to a month-to-month lease agreement after that first year.

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Harford House and Micah House rent units to adults who are homeless without regard to their race, color, religion, national origin, family status, age, sexual orientation, or disability.*

Office use only: **Date received:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_