HOMES OF HOPE APPLICATION CHECK LIST

Name(s):

Date Received:

Phone Number:

____ Drivers licenses or State Issued ID

- ____ Social Security Cards
- ____ Application- completely filled out, Release and Consent Form must be signed.
- ___Payment (\$30 per person)

____ Proof of Income**ALL proof of income MUST be no more than 3 months old! **

____ Paychecks: 2 months, must be consecutive (if paid weekly– 8 paycheck stubs; if bi-weekly – 4 paycheck stubs)

____ Prospective tenant signature on Employment Verification Form

- ____ Employment Verification
 - ____*If unsuccessful: Third Party Employment Verification Attempt

____ Proof of child support (received or not):

____ If child support is received (but not court ordered), notarized letter from father with his contact information and amount paid.

If court awarded (received or not):

____ One year print out from Family Court required

____ and/or Court stamped award letter or divorce letter

____ Prospective tenant signature on Child Support Document

If child support is not court awarded:

___ Court record search to verify

____ Prospective tenant signature on Child Support Document

____ Resident Research

___ Rental History

AMI %: _____

Number of potential occupants:

Special Requirements: _____

Notes: ______