



Regional Lead Grant for Rental Properties Program Landlord Application

Applicant		I. OWNER/APPLICANT INFORMATION		Co-Applicant	
Applicant Name (include Jr. or Sr. if applicable)		Applicant Name (include Jr. or Sr. if applicable)		Applicant Name (include Jr. or Sr. if applicable)	
Mailing Address (street/city/state/zip):		Mailing Address (street/city/state/zip):		Mailing Address (street/city/state/zip):	
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:	Home Phone:	Cell Phone:
Fax:	E-mail:	Fax:	E-mail:	Fax:	E-mail:
Social Security #	Birth date:	Social Security #	Birth date:	Social Security #	Birth date:

II. REQUIRED ATTACHMENTS	
<input type="checkbox"/> Copy of lease agreement with current tenant and copy of recent rent payment receipt or check copy <input type="checkbox"/> Copy of current property management agreement <input type="checkbox"/> Verification of tenant income, see attached guidelines for required documents <input type="checkbox"/> Copy of the declaration page of the hazard/liability insurance policy on property <input type="checkbox"/> Copy of current property tax statement, to verify taxes are paid and verify ownership <input type="checkbox"/> Tenant Questionnaire	

III. INFORMATION FOR GOVERNMENT MONITORING PURPOSES			
<p>The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)</p>			
BORROWER <input type="checkbox"/> I do not wish to furnish this information		CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information	
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaska native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race:	<input type="checkbox"/> American Indian or Alaska native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male
US Citizen	<input type="checkbox"/> Yes <input type="checkbox"/> No Resident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No	US Citizen	<input type="checkbox"/> Yes <input type="checkbox"/> No Resident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No

IV. PROPERTY INFORMATION	
Property Name:	Year Built: _____ Total Number of Units: _____
Property Address (street/city/state/zip):	Are you planning any building renovations? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", please describe work plans (if available, please also provide PHB the scope of work). _____
How are the units heated? _____ If there is ductwork, have you had the duct work cleaned? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes" when was the ductwork last cleaned? _____	Have you recently completed any building renovations? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes" where? _____ Was building debris stored in the yard? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes" where? _____

Property/Tenant Information

Eligible properties are:

- constructed prior to 1978; and
- property is occupied by a family with one or more children under the age of 6; and
- half of the units are occupied by tenant(s) with income under 50% MFI
- remaining units are occupied by tenant(s) with an income under 80% MFI
- rents under 50% of HUD affordable rates

Unit	#____	#____	#____	#____	#____
Tenant Name					
Tenant's Phone Number					
Address/ unit #					
Year Built					
Year Purchased					
Years Rented					
No. of Bedrooms					
Lease Expires					
Age of Adults					
Number of Children					
Age of Children					
Ethnic-Race					
Annual Household Income (all sources)					
Monthly Rent					

(Reproduce this page as needed to cover all units in the property)