



## Tenants to Homeowners, Inc.

2518 Ridge Court, Suite 103, Lawrence, Kansas 66046

# Rental Program #1

## General Rental Housing Program Requirements

**ATTENTION: This program is open to anyone who makes less than 80% of the median income in Lawrence for the year. The rents in this program are set below Fair Market Rent BUT do not vary based on your specific income. However, we do accept Section 8 vouchers. All units in this program are FOR RENT only. TTH units are in East and North Lawrence. Potential tenants would be responsible for paying all utilities including electric, gas, water and trash.**

**\*We will discard applications that do not include all the following:**

- The application must be filled out completely.
- Name, address and phone number of previous landlord.
- Employment, income and asset boxes.
- Copy of photo ID of adults in the household.
- Copy of Social Security cards or proof of legal residency for all members of the household.
- 3 Months of the most recent bank statements for all adults in the household. All pages of the bank statements must be provided and statements must have the bank logo and the account holders name and address. Printed screen shots of bank accounts will be rejected.
- Current Income Verification including:
  - If applicable, 3 months of consecutive pay stubs for each job. Pay stub must show gross wages.
  - If applicable, Social Security/SSDI letter
  - If self-employed, 8 months bank statements showing deposits, and previous year's tax return.

### **THE APPLICATION PROCESS:**

- There is no application fee. We offer application forms to anyone who requests one. Accepting an application does not indicate that we have a unit available or that your application is approved.
- We do not review the applications in full until a unit becomes available.

### **THE APPROVAL PROCESS: WHAT DO WE LOOK AT?**

- Sufficient income/resources to pay rent
- Income verification must be clearly verified as listed above.
- Income Eligibility (income restrictions apply to subsidized housing and may vary by unit)
- Prior Rental History- Evictions within the past 5 years disqualify the applicant from the program.
- Criminal History – Felonies or sex offender crimes of any kind are a lifetime ban from any program offered by Tenants to Homeowners.
- Credit History
- Can applicant get utilities switched to their name? Keys will not be handed over until confirmation has been provided that the utilities are in the tenant's name.

TTH, Inc owns and operates this property. Our mission is to create affordable housing opportunities in Lawrence. For this reason, we aim to keep these rentals below fair market rent. We are [also] pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are not barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, national origin, or sexual orientation. TTH, Inc. complies with and bases its policies on the Kansas Landlord Tenant Law.

# Tenants to Homeowners Rental Application

Please print legibly. We will not accept incomplete applications.

Full Name of Head of Household: \_\_\_\_\_

Current Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

I would like to find a place by (Date): \_\_\_\_\_

If you are interested in a specific location, please note. \_\_\_\_\_

Please keep my application on file, no matter how long it takes: Yes  No

## Household Composition & Characteristics

| Member's Name | Relationship to Head | Date of Birth | Age | Sex | Social Security Number (SSN) |
|---------------|----------------------|---------------|-----|-----|------------------------------|
|               | <b>HEAD</b>          |               |     |     |                              |
|               |                      |               |     |     |                              |
|               |                      |               |     |     |                              |
|               |                      |               |     |     |                              |

## Residential History (The more information, the better. Required: Past 3 years of residential history and at least one previous landlord who is not a relative.)

1. Present Landlord/Property Name: \_\_\_\_\_  
 Present address: \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Landlord Day Phone: (\_\_\_\_\_) \_\_\_\_\_ Rent Amt: \$ \_\_\_\_\_ per month  
 Dates Rented/From: \_\_\_\_\_ To: \_\_\_\_\_
2. Previous Landlord/Property Name: \_\_\_\_\_  
 Previous address: \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Landlord Day Phone: (\_\_\_\_\_) \_\_\_\_\_ Rent Amt: \$ \_\_\_\_\_ per month  
 Dates Rented/From: \_\_\_\_\_ To: \_\_\_\_\_
3. Previous Landlord/Property Name: \_\_\_\_\_  
 Previous address: \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Landlord Day Phone: (\_\_\_\_\_) \_\_\_\_\_ Rent Amt: \$ \_\_\_\_\_ per month  
 Dates Rented/From: \_\_\_\_\_ To: \_\_\_\_\_
4. Previous Landlord/Property Name: \_\_\_\_\_  
 Previous address: \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Landlord Day Phone: (\_\_\_\_\_) \_\_\_\_\_ Rent Amt: \$ \_\_\_\_\_ per month  
 Dates Rented/From: \_\_\_\_\_ To: \_\_\_\_\_



**General Questionnaire**

Are you or any members of your household currently receiving housing assistance? Yes  No

If yes, list source of assistance: \_\_\_\_\_ City/State: \_\_\_\_\_

1. Have you ever been convicted of a criminal offense? Yes  No

If yes, Offense: \_\_\_\_\_ City/State: \_\_\_\_\_

2. Have you or any members of your household ever been evicted? Yes  No

If yes, Property/Landlord Name: \_\_\_\_\_ City/State: \_\_\_\_\_

3. Are you or any members of your household currently using an illegal substance or drug? Yes  No

4. Are you or any members of your household subject to the State Sexual Offenders Registration? Yes

No  If yes, list the State where the offence occurred: \_\_\_\_\_

5. Will the apartment for which you are applying be the family's only residence? Yes  No

6. Do you or any members of your household need an accessible unit? Yes  No  **Income:**

**Employment Income (Please list the last three years of employment history):**

| Applicant Name | Employer | State Date | End Date | Position | Monthly Gross Income |
|----------------|----------|------------|----------|----------|----------------------|
|                |          |            |          |          |                      |
|                |          |            |          |          |                      |
|                |          |            |          |          |                      |

**Other Household Income (SSI, child support, pension, benefits, etc.)**

| Applicant Name | Source of Income | Monthly Gross Income |
|----------------|------------------|----------------------|
|                |                  |                      |
|                |                  |                      |
|                |                  |                      |

**Assets (List all):**

| Applicant Name | Name of Financial Institution | Asset type (i.e. checking) | Current Balance |
|----------------|-------------------------------|----------------------------|-----------------|
|                |                               |                            |                 |
|                |                               |                            |                 |
|                |                               |                            |                 |

**Vehicles:**

| Make | Model | Color | License Number |
|------|-------|-------|----------------|
|      |       |       |                |
|      |       |       |                |







# DOUGLAS COUNTY- KANSAS BACKGROUND CHECK

Applicant: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Information: (For agency internal use)

Rental Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_





## TENANT RELEASE AND CONSENT

I/We, \_\_\_\_\_, the undersigned, hereby authorize all persons or companies in the categories listed below to release, without liability, information regarding employment, income, and/or assets to Tenants to Homeowners, Inc., for purposes of verifying information on my/our apartment rental application.

### INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are not limited to: personal identify; employment, income and assets; medical or child care allowances. I/We understand that this authorization cannot be used to obtain any information about me/us that is not pertinent to my eligibility for and continued participation as a qualified tenant.

### GROUPS OR INDIVIDUALS THAT MAY BE CONTACTED

The groups or individuals that may be asked to release the above information include, but are not limited to:

- Past and Present Employers Welfare Agencies
- Veterans Administration Previous Landlords (including public
- State Unemployment Agencies housing agencies)
- Retirement Systems Social Security Administration
- Banks/Other Financial Institutions Support and Alimony Providers
- Medical and Child Care Providers

### CONDITIONS

I/We agree that a photocopy of this authorization may be used for the purpose(s) stated above. The original of this authorization is on file and will stay in effect for a year and one month from the date signed. I/We understand I/we have a right to review this file and correct any information that is incorrect.

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

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

