



MAIL APPLICATION TO:

Telacu Residential Management
1248 Goodrich Blvd., Los Angeles, CA 90022

FAX APPLICATION TO:

fax (323) 838-0548

www.projectnewhope.org

INDICATE WHICH HOUSING DEVELOPMENT YOU ARE APPLYING FOR: Main Street San Pedro

I. APPLICANT INFORMATION

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Telephone: _____ Other Contact #: _____

Birthdate: _____ SS#: _____

email: _____ Primary Language: _____

Marital Status

- Single
- Married
- Divorced
- Separated
- Domestic Partner

Household Occupants

List all household occupants including minors who will be applying with you:

Name	SS#	Birthdate	Gender	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL NUMBER OF PERSONS IN HOUSHOLD (including applicant): _____

II. ELIGIBILITY CRITERIA

- Proof of Disability Yes
- Proof of HIV/AIDS Diagnosis Yes

In addition, preference will be given to households meeting any one of the following conditions. Proof will be required at the time of processing.

Household is currently living in transitional housing or leaving home without an alternative situation.

If yes, explain: _____

Household consists of a single parent with dependent child or children.

Household is living in over-crowded (more than two persons per bedroom) or substandard conditions.

If yes, explain: _____



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III. RENTAL HISTORY

Please supply all residences including temporary and transitional housing.

Current Address: _____
Number Street City State Zip

Owner/Manager: _____
Full Name Contact Number

Reason for Leaving: _____

From _____ To _____ Rent Amount \$ _____
Month/Year Month/Year

Previous Address: _____
Number Street City State Zip

Owner/Manager: _____
Full Name Contact Number

Reason for Leaving: _____

From _____ To _____ Rent Amount \$ _____
Month/Year Month/Year

Previous Address: _____
Number Street City State Zip

Owner/Manager: _____
Full Name Contact Number

Reason for Leaving: _____

From _____ To _____ Rent Amount \$ _____
Month/Year Month/Year

IV. INCOME

For each household member give the source and amount of income received (i.e. Social Security, SSI, SSDI, SDI, Rental Income, VA Benefits, Unemployment, Retirement Pension, Welfare, AFDC, Alimony, etc.)

Household Name	Source of Income	Monthly Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



V. ADDITIONAL INFORMATION

- 1. Have you ever had any credit problems? Yes No
- 2. Have you ever had an unlawful detainer filed against you? Yes No
- 3. Have you ever been evicted for non-payment of rent or for any other reason? Yes No
- 4. Have you ever filed bankruptcy? Yes No
- 5. Have you ever been convicted of a felony? (If yes, please explain) Yes No
- 6. Do you have any pets? (If yes, please describe pets) Yes No
- 7. Will you be using any water filled furniture in your residence? Yes No
- 8. Is there a need for a fully handicapped accessible unit? Yes No

The applicant(s) represent that all of the above statements are true and correct and hereby authorize their verification including, but not limited to, the obtaining of a credit report, and agrees to furnish additional credit references on request. Owner/Agent is authorized to obtain credit reports now and in the future.

In connection with my/our application for rental and/or employment, I/we understand that background inquires will be made on myself/ourselves, and other members of my household, including consumer, criminal, driving, and other reports. I/we understand that information will be requested from various federal, state, and other agencies and entities, public and private, which maintain records concerning my/our past activities and other members of my household, relating to driving, credit, criminal and civil experiences.

I/we authorize without reservation, any party or agency contacted, to furnish completely and without limitation, any and all of the above mentioned information and any other information related thereto. Further, I/we will release from liability and will defend and hold harmless all requesters and suppliers of information in accordance herewith.

I/we, the undersigned make application to rent housing accommodations set forth above and upon approval of the application agrees to sign a lease agreement and to pay all sums due, including requested deposits before occupancy. I/we certify the above information is correct and complete to the best of my/our knowledge and belief. I/we understand that the information given will be verified.

ALL ADULTS 18 YEARS AND OLDER MUST SIGN BELOW.

Signature of Applicant	Date	Signature of Co-Applicant	Date
Signature of Applicant	Date	Signature of Co-Applicant	Date
Signature of Applicant	Date	Signature of Co-Applicant	Date
Signature of Applicant	Date	Signature of Co-Applicant	Date