

TRUE COLORS RESIDENCE

c/o West End Intergenerational Residence
483 West End Avenue, New York, NY 10024

HOUSING APPLICATION

Referral Information:

Referring Agency: _____

Contact Name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-mail: _____

Applicant Information:

Name: _____

SSN: _____

D.O.B.: _____

Current Residence or Contact _____

Telephone Number: _____

Hours when you can be reached: _____

Type of Current Residence:

Emergency Shelter _____

Transitional Residence _____

Family: _____

Friends: _____

Street: _____

Hospital: _____

Other: _____

Please explain: _____

Previous Rental History:

Have you ever been the primary lease holder? Yes _____ No _____
If so, how many times? _____

Were you ever evicted? Yes _____ No _____
If so, how many times? _____

Reasons for Prior Evictions:

- Nonpayment of Rent _____
- Not on lease _____
- Illegal Activity _____
- Domestic violence _____
- Property Damage _____
- Other (Please explain) _____

Did you contest the eviction: _____

Date of last eviction: _____

Income/Employment Information:

Are you currently employed? Yes _____ No _____

- If yes, where? _____
- Hourly Rate _____
- Hours per Week _____
- Employment status:
 - Permanent _____
 - Temporary _____
 - Seasonal _____

Dates of current employment _____

Other sources of Income:

- Public Assistance \$ _____ per month
- SSI \$ _____ per month
- Social Security \$ _____ per month
- Food Stamps \$ _____ per month
- Other _____ \$ _____ per month

Criminal Justice History:

Have you ever been arrested and convicted of the following:

- Assault _____
- Robbery _____
- Burglary _____
- Property Damage _____
- Drugs _____
- Possession _____
- Selling _____
- Other (explain) _____

Do you currently have an outstanding criminal justice issues:

- Outstanding Warrants (explain) _____
- Probation/Parole/Bail Violations (explain) _____
- Current Convictions Awaiting Sentencing _____
- Sentencing Obligations _____

Are there any legal and/or personal matters which could interfere with your taking possession and maintaining occupancy at True Colors Residence? Yes _____ No _____

If yes, please explain: _____

I certify the information in this application is true and correct. I authorize True Colors Residence to contact the sources listed in this application for the purposes of verifying the accuracy of the information.

Signed: _____ Date: _____
 Applicant

Witnessed by: _____ Date: _____

TRUE COLORS RESIDENCE

c/o West End Intergenerational Residence

483 West End Avenue

New York, NY 10024

Applicant Name: _____

Social Security : _____

3 Year Housing History:

<u>Address</u>	<u>Dates of Residence</u>
1. _____ _____	_____
2. _____ _____	_____
3. _____ _____	_____
4. _____ _____	_____

Signature

Date