

G.A. Case # \_\_\_\_\_

Date \_\_\_\_\_

### GENERAL ASSISTANCE RENTAL INFORMATION AGREEMENT

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY AND RETURNED IN PERSON FOR INSPECTION PURPOSES.

Tenant's Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

1. Address of rental unit \_\_\_\_\_ Apt #: \_\_\_\_\_ Floor: \_\_\_\_\_ City: \_\_\_\_\_

Is this building a rooming house? YES \_\_\_\_\_ NO \_\_\_\_\_ Room # \_\_\_\_\_ Number of Bedrooms: \_\_\_\_\_

2. What is the landlord's name (person or firm who owns the building)? \_\_\_\_\_

Home phone #: \_\_\_\_\_ Business phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

3. **Make check payable to:** Name \_\_\_\_\_  
Address \_\_\_\_\_ City/State/ZIP \_\_\_\_\_

4. Owner's Social Security # or Taxpayer Identification # \_\_\_\_\_  
(Tax identification # must coincide with the name provided in #3 above)

5. What is the unit manager's name? \_\_\_\_\_

Home phone #: \_\_\_\_\_ Business phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

6. Rent amount \$ \_\_\_\_\_ Weekly / \$ \_\_\_\_\_ Monthly

(Any attempt to collect rent over the above contracted amount, when tenant is receiving City assistance, will disqualify a Vendor from receiving any future General Assistance rental payments.)

7. What utilities are included in the rent? Water/Sewer \_\_\_ Hot Water \_\_\_ Electric \_\_\_ Gas for Cooking \_\_\_ Heat \_\_\_

8. How is the unit heated? Electric \_\_\_ Gas \_\_\_ Oil \_\_\_ Other \_\_\_ (please explain): \_\_\_\_\_

9. Number of tenant's occupying this unit: \_\_\_\_\_

10. Is this person currently occupying this unit? YES \_\_\_ NO \_\_\_ If no, when is the unit available? \_\_\_\_\_

11. Does this unit have a washer/dryer? YES \_\_\_ NO \_\_\_ If no, is hook-up available? YES \_\_\_ NO \_\_\_

**\*IT IS THE TENANT'S RESPONSIBILITY TO RETURN THIS FORM TO DETERMINE ELIGIBILITY FOR RENTAL PAYMENT\***

All requests for rental payments will require a building inspection and all prospective applicants must reapply for assistance after the building has passed inspection. Applicants receive a written decision stating whether or not assistance has been granted. The City will only authorize rental payments after the unit has passed City inspection.

**\*City will authorize rental payments from the date the apartment passes inspection \***

**\*I certify that this unit meets all State and local licensing land use codes and that this unit includes working carbon monoxide and smoke detectors, which meet State codes.**

\_\_\_\_\_  
**Landlord Signature**

\_\_\_\_\_  
**Date**

NOTICE: This Rental Information Agreement is not intended to imply that the prospective tenant is either eligible for assistance or that they will necessarily be renting an apartment from you. All rental payments are made directly to the landlord, not the tenant. Please Note that the first payment may take up to a month, any subsequent payments are usually within 14 business days.

*The City of Portland will not discriminate on account of sex, sexual orientation, age, race, religion, disability, or political affiliation.*

**City of Portland ~ Health & Human Services Department ~ Social Services Division ~ (207) 775-7911**