



INTERFAITH HOUSING ALLIANCE, INC.

Please check community that you are applying for:

RETURN TO:

\_\_\_ Union Village \_\_\_ Weinberg House \_\_\_ Natelli Manor

Interfaith Housing Alliance, Inc.  
731 N. Market Street  
Frederick, MD 21701  
301-662-4225 x1303 Fax 1-888-662-2953

\_\_\_ Washington Ridge \_\_\_ Washington Square

The following information is confidential and will not be disclosed without your consent.

**PERSONAL INFORMATION**

Name \_\_\_\_\_ SS# \_\_\_\_\_ Drivers Lic # \_\_\_\_\_ D.O.B \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Co-Applicant \_\_\_\_\_ SS# \_\_\_\_\_ Drivers Lic # \_\_\_\_\_ D.O.B \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**HOUSEHOLD MEMBERS – LIST ALL OTHER MEMBERS WHO WILL OCCUPY THE APARTMENT**

Last Name	First Name	Middle	SS#	Relationship	Birthdate

**RENTAL INFORMATION**

Current Landlord: \_\_\_\_\_ Length of Residence \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Rent Amount. \_\_\_\_\_ Total Utilities \_\_\_\_\_ Phone \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Length of Residence \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Rent Amount. \_\_\_\_\_ Total Utilities \_\_\_\_\_ Phone \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Employer (Applicant) \_\_\_\_\_ Hire Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Annual Gross Income \_\_\_\_\_ OR \$ \_\_\_\_\_ /HR \_\_\_\_\_ /HRS PER WEEK

Employer (Co-Applicant) \_\_\_\_\_ Hire Date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Annual Gross Income \_\_\_\_\_ OR \$ \_\_\_\_\_ /HR \_\_\_\_\_ /HRS PER WEEK

Are all household members full-time students? \_\_\_ Yes \_\_\_ No

**ANNUAL INCOME – Please put Amount- You must list ALL income**

SOURCE	APPLICANT	CO-APPLICANT	OTHER HOUSEHOLD MEMBERS 18 YEARS OR OLDER	TOTAL
Gross Salary	_____	_____	_____	_____
Overtime Pay	_____	_____	_____	_____
Commissions/Fees Tips/Bonuses	_____	_____	_____	_____
Unemployment	_____	_____	_____	_____
Social Security	_____	_____	_____	_____
Pensions Retirement Funds	_____	_____	_____	_____
Net Business Income	_____	_____	_____	_____
Net Rental Income	_____	_____	_____	_____
Other	_____	_____	_____	_____
TOTAL INCOME				_____

The information provided above is true and complete to the best of my/our knowledge and belief. I/we consent to the disclosure of income and financial information from my/our employer and financial references for purposes of income and asset verification related to my/our application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date