

Return to: 1279 Parsons Avenue Columbus, Ohio 43206

FAX: 614-388-5787 PHONE: 614-255-6452

EMAIL: <a href="mailto:apps@heartandhomeohio.com">apps@heartandhomeohio.com</a> WEBSITE: heartandhomeohio.com

APP FEE: \$50 Per Person, \$80 Couple

CASHAPP: \$HHPMrent



#### WRITE ADDRESS OF INTEREST BELOW:

\_\_\_\_\_\_

# Heart & Home Applicant Requirements

DEPOSIT IS ONE MONTHS RENT

- > No evictions in the last 5 years
- ➤ No felonies in the last 5 years
- > No theft in the last 5 years
- > Income 3x the rent
- > 500 credit score
- ➤ Bank Account

#### What you need for application to be processed

- $\succ$  Form of identification for applicant and residents over age of 18
- > Last 30 days of income
- ➤ Income; If you're entrepreneur last 3 months of bank statements
- ➤ Income; If supported by CMHA, SSI, disability provide benefit letter.
- ➤ Income; If 3rd party is supporting it has to be at least 6 months with a letter of guarantee.
- > App Fee \$50 per adult \$80 couple

### Please allow 2-3 Business Days for Approvals

Please be aware that our process is first come, first serve. We do not rent without an approved application, viewing of property and a deposit is placed. We do not sublet, We do not do co-signers. No pets over 50 pounds (\$200 Non-Refundable Pet-Fee, \$50 monthly). Pro-rated rent will be required the day of lease signing. Utilities must be placed in your name before you sign lease.

# **RENTAL APPLICATION**

|                         |  |                        |                                   | <del></del>   |
|-------------------------|--|------------------------|-----------------------------------|---------------|
|                         | Cell Phone   |                        |                                   |               |
|                         | Social Securi  | ,                      | <del></del>                       |               |
| Applicant Driver's Lice | nse Number   | State                  |                                   |               |
| Applicant Name#2        |  | Email                  |                                   |               |
| Home Phone              | Cell Phone   |                        |                                   |               |
| Date of Birth           | Social Securi  | ty #                   |                                   |               |
| Applicant Driver's Lice | nse Number   | State                  |                                   |               |
| Do you have Pets? Ye    | es or No If so, how many?                              | ' Breed?               | Weight?                           |               |
| Emergency Contact: Nar  | me Rela  | tion: Phone#           | Email                             |               |
|                         | <u>RESIDENTIAL HI</u>                                  | ISTORY (LAST 3 Y       | <u>(EARS)</u>                     |               |
|                         | City Stat  |                        | n/Year Moved In/Out               |               |
| •                       | : Company  |                        | Phone                             |               |
| , , -                   |  |                        |                                   |               |
|                         | City Stat  |                        | n/Year Moved In/Out               |               |
|                         | Rent \$<br>: Company                                   |                        | Phone                             |               |
| Owner/i roperty wigini  | . company  |                        |                                   |               |
|                         | <b>DESCRIBE YOU</b>                                    | R CREDIT HISTOR        | <u> YY</u>                        |               |
| Have you declared bar   | nkruptcy in the past seve                              | en (7) years? Yes or N | 10                                |               |
| Have you ever been ev   | victed from a rental resid                             | ence? Yes or No        |                                   |               |
| Have you had two or n   | nore late rental payment                               | s in the past year?`   | es or No                          |               |
| Have you ever willfully | or intentionally refused                               | to pay rent when di    | ue? Yes or No                     |               |
| WHY?                    |  |                        |                                   |               |
| •                       | i investigation of my crea<br>rposes of renting a hous | •                      | •                                 | ground        |
| Name (print)            | (  | Sign)                  | Date                              |               |
| DI E/                   | ASE PROVIDE YOUR I                                     | EMDI OVMENIT IN        | IEODMATIONI                       |               |
| <u>r l l r</u>          | ASE PROVIDE TOOK !                                     | LIVIFLOTIVILIATII      | II ORMATION                       |               |
| (If employ              | ed less than 6 months, g                               | ive name & phone c     | f previous employer)              |               |
| Employer                | Job Title  | Dates en               | noloved From To                   |               |
| Full Time Part Time_    | Job Title<br>Manager Name                              | Phone                  | Salary \$per                      | _ <del></del> |
|                         |  |                        |                                   |               |
| Full Time Port Time     | Job Title<br>Manager Name                              | vates en<br>Phone      | ipioyeo From 10<br>Solory \$ _oer |               |



## **RENTAL VERIFICATION**

Please return to by fax 614-388-5787 or email apps@heartandhomeohio.com

| Applicant Name   |   |   |
|--|---|---|
| LandLord Name  | Phone#  |   |
| Lease Dates: Fromto  | Amount of Monthly Rent  |   |
| On-Time Payments? Yes or No  |   |   |
| Late or Returned Payments? Yes or  | r No, How often?  |   |
| Did you evict? Yes or No   |   |   |
| Did you receive noise complaints about Did the police ever have to be called a | amages? Yes or No<br>on their lease ro live in home? Yes or No<br>out the tenant? Yes or No<br>out to the home? Yes or No<br>s or No If so, how many & what kind/weig |   |
|  |   | / |
| Landlord's (or Representative's) Sig   |   |   |
| I hereby authorize the above named L<br>requested below regarding my tenanc    |   |   |
| Applicant Signature  | Date/   |   |