



**RESIDENT APPLICATION FOR HOUSING**

**Mail To:  
SEED, Corp.  
333 Dodd St. Suite 3  
East Orange, NJ 07017**

The information provided on this application will be used to determine your eligibility to become a resident. Answer all questions on this application. Enter "None" or "N/A" for those questions which do not apply to you. Applications will not be considered unless they are fully completed. Please ask someone from our office if you need help to complete this form.

**APPLICANT INFORMATION**

Applicant's Name	Social Security Number
Date of Birth	(Area Code) Telephone #

Gender: Male Female

Marital Status: Single Married Separated Divorced Widow

Are you a citizen of the United States? Yes No

If not, do you have permanent resident status? Yes No

Country of citizenship? \_\_\_\_\_

Racial Ethnicity: African American Asian Caucasian American Indian or Alaskan native Native Hawaiian or other Pacific Islander Hispanic or Latino Other \_\_\_\_\_

Are you a United States Veteran? Yes No

Do you claim handicapped or disabled status for eligibility? Yes No

If yes, is it of long term continued and indefinite duration? Yes No

Do you require special accommodations in your dwelling unit? Yes No

If yes, what kind? Physical Visual Auditory

Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation?

Yes No

If yes, please explain: \_\_\_\_\_

Will you consider shared living? Yes No

Do you have a pet? Yes No  
If yes, what type:\_\_\_\_\_

Current living arrangement:  Homeless  Shelter  Room  Apartment  Group Home

Other:\_\_\_\_\_

Reason for leaving?\_\_\_\_\_

If you are homeless, how long have you been homeless?\_\_\_\_\_

How many times in the last 3 years have you been homeless?\_\_\_\_\_

Do you currently have a Housing Voucher or a Section 8 Certificate? Yes No

Are you receiving Temporary Rental Assistance? Yes No

If yes, when does it expire?\_\_\_\_\_

What is your total annual income?\_\_\_\_\_ Source of income?\_\_\_\_\_

Has there ever been a judgment, foreclosure, bad debt, or collection against you? Yes No

Have you ever been evicted? Yes No

If yes to either question, please explain: \_\_\_\_\_

In case you are unable to be reached, please provide alternate contact information:

Name:\_\_\_\_\_ Relationship to you:\_\_\_\_\_

Phone number(s)\_\_\_\_\_

Who referred you to this agency?\_\_\_\_\_

**AGREEMENT**

I am requesting an application for a rental with SEED, Corp. I certify that all statements made on this application are true, correct and complete and that all income has been listed. I understand that SEED, Corp. can request a credit check, a background check, income verification, housing status and disability verification to assist in determining my eligibility and that if I have falsified or withheld information, it may be used as grounds to deny my application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

This data and all data received by the management relative to income of applicant is regarded as being confidential in nature and protected accordingly to the extent permitted by law.

***SEED, Corp. - EQUAL OPPORTUNITY HOUSING PROVIDER***

## SUPPORTING DOCUMENTATION

**The following information is needed to complete your application. Please bring all APPLICABLE documents listed below to your interview. Failure to comply with this request can result in your application being denied on the basis of an incomplete application.**

- \_\_\_\_\_ Copy of Birth Certificate
- \_\_\_\_\_ Copy of Social Security Card
- \_\_\_\_\_ Letter from Referring Agency
- \_\_\_\_\_ Homeless Letter from shelter or program
- \_\_\_\_\_ Copy of Veterans DD 214
- \_\_\_\_\_ Copy of Marriage License
- \_\_\_\_\_ Copy of Divorce Decree
- \_\_\_\_\_ Picture ID- valid state identification or driver's license
- \_\_\_\_\_ Public Aid –case worker statement, medical card or cancellation letter
- \_\_\_\_\_ Employment Verification- signed statement from employer including start date and year-to-date earnings or six (6) current payroll check stubs with year-to-date earnings.
- \_\_\_\_\_ Unemployment – original award letter from Unemployment Compensation and current check stub or exhaust letter.
- \_\_\_\_\_ Child support –notarized letter from the provider
- \_\_\_\_\_ Alimony Agreement – copy of legal alimony agreement
- \_\_\_\_\_ Pension/Annuity- award letter and copy of current check
- \_\_\_\_\_ SSI/Social Security/Veterans benefits - award letter and copy of current check
- \_\_\_\_\_ Railroad Retirement – award letter and copy of current check
- \_\_\_\_\_ Bank Account - bank statement
- \_\_\_\_\_ Military/Armed Forces/Reserves – copy of current check
- \_\_\_\_\_ Other Assets (stocks, bonds, property, IRA's, mutual funds, annuities, trusts, insurance policies etc.) current statement
- \_\_\_\_\_ Contributions – from family members or friends to assist you in the payment of bills
- \_\_\_\_\_ Medical/Handicap Deductions – paid prescriptions, doctor, or hospital receipts
- \_\_\_\_\_ Alien Registration Card/Naturalization papers – original documents