



APPLICATION DATE: \_\_\_\_\_

# CITY OF LAREDO MUNICIPAL HOUSING APPLICATION

**THIS APPLICATION IS VALID FOR ONE YEAR FROM DATE OF APPLICATION**

## A. APPLICANT INFORMATION

1. APPLICANT NAME/HEAD OF HOUSE: \_\_\_\_\_
2. CURRENT ADDRESS: \_\_\_\_\_ PREVIOUS ADDRESS: \_\_\_\_\_
3. CONTACT PHONE NO'S: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
4. HEAD OF HOUSE EMPLOYED BY: \_\_\_\_\_ EMPLOYMENT LENGTH: \_\_\_\_\_
5. OCCUPATION: \_\_\_\_\_ MONTHLY INCOME: \_\_\_\_\_
6. DL/ID #: \_\_\_\_\_ EMAIL: \_\_\_\_\_
7. SPOUSE/JOINT APPLICANT: \_\_\_\_\_
8. OCCUPATION: \_\_\_\_\_ MONTHLY INCOME: \_\_\_\_\_
9. DL/ID #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## B. HOUSEHOLD MEMBERS:

No.	NAME	RELATION	D.O.B.	AGE	SOC.SEC.#
1.		SELF			
2.					
3.					
4.					
5.					
6.					
7.					
8.					

## C. CURRENT RENTAL STATUS:

DOES ANYONE LIVE WITH YOU NOW WHO IS NOT LISTED ABOVE? YES/NO. IF YES, PLEASE EXPLAIN.

LANDLORD NAME: \_\_\_\_\_ LANDLORD ADDRESS: \_\_\_\_\_

CONTACT PHONE NUMBER: \_\_\_\_\_ RENTAL AMOUNT: \_\_\_\_\_

ARE YOU RENTING THIS UNIT OR ARE YOU LIVING WITH A RELATIVE? \_\_\_\_\_

HOW MANY PEOPLE LIVE IN YOUR UNIT NOW? \_\_\_\_\_ HOW MANY BEDROOMS? \_\_\_\_\_

ARE YOU BEING EVICTED? YES/NO ARE YOU BEING DISPLACED FROM YOUR UNIT? YES/NO

- **HAVE YOU EVER RENTED A UNIT WITH MUNICIPAL HOUSING? YES/NO. IF YES, DO YOU HAVE ANY OUTSTANDING MUNICIPAL HOUSING BALANCES? YES/NO.**
- **HAVE YOU EVER BEEN EVICTED OR HAD YOUR LEASE TERMINATED BY MUNICIPAL HOUSING? YES/NO.**

**YOU MAY CALL OUR OFFICE TO REQUEST STATUS OF YOUR APPLICATION. IF THIS APPLICATION IS NOT PROCESSED DURING A ONE YEAR PERIOD, YOU MUST REAPPLY.**

M.H. STAFF: \_\_\_\_\_

DATE: \_\_\_\_\_



APPLICATION DATE: \_\_\_\_\_

**D. PERSONAL REFERENCES:**

NAME	ADDRESS	RELATIONSHIP	PHONE NO.
1.			
2.			
3.			

**E. TYPE OF INCOME THAT EACH MEMBER OF THE HOUSEHOLD RECEIVES. (ex: WAGES, CHILD SUPPORT,SSI...)**

FAMILY MEMBER	TYPE OF INCOME AMOUNT	TOTAL

TOTAL AMOUNT OF INCOME \_\_\_\_\_ X 30% \_\_\_\_\_

**F. NO. OF VEHICLES:** \_\_\_\_\_

1. MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YR: \_\_\_\_\_ LIC.NO: \_\_\_\_\_  
 2. MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YR: \_\_\_\_\_ LIC.NO: \_\_\_\_\_  
 3. MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ YR: \_\_\_\_\_ LIC.NO: \_\_\_\_\_

*I CERTIFY THAT THE ABOVE INFORMATION PROVIDED IS CORRECT AND MAY BE VERIFIED. IF ANY INFORMATION IS NOT CORRECT UPON VERIFICATION, IT MAY CONSITITUE GROUNDS FOR APPLICATION DENIAL.*

\_\_\_\_\_  
INITIALS

**G. AUTHORIZATION TO RELEASE CREDIT INFORMATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_, \_\_\_\_\_

I (We) have authorized Municipal Housing to request such credit information as needed to complete my (our) rental application. Such information includes, but is not limited to, employment history and income, bank account balances, credit history on current and previous accounts, and/or current and previous rental history. In the event that I (we) am/are approved for a rental unit and if I (we) default on the account, all monies owed to the Municipal Housing will be reported to the credit bureau and will be transferred to a collection agency.

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

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APPLICATION DATE: \_\_\_\_\_



DO NOT FILL OUT THIS SECTION/FOR MH USE ONLY

APPLICANT NAME: \_\_\_\_\_

RENTAL REFERENCES:

DATE: \_\_\_\_\_

1. PREVIOUS ADDRESS: \_\_\_\_\_

2. PERSON CONTACTED: \_\_\_\_\_

3. WAS RENT PAID ON TIME: \_\_\_\_\_

4. ANY TENANT DAMAGES: \_\_\_\_\_

5. HOW IS THERE HOUSEKEEPING: \_\_\_\_\_

6. ANY TENANT DISTURBANCES: \_\_\_\_\_

7. WOULD YOU RENT TO THEM AGAIN: \_\_\_\_\_

**RECORD OF CONTACT**

DATE	RECRUITING FOR HOUSE/APT. #	PERSON CONTACTED	NOTES

## LIST OF REQUIREMENTS

1. **SOCIAL SECURITY CARDS FOR ALL ADULTS IN THE HOUSEHOLD**
2. **DRIVERS LICENSE OR GOVERNMENT ISSUED ID'S FOR ALL ADULTS IN THE HOUSEHOLD**
3. **LAST 4 RENT RECEIPTS**
4. **LAST 4 CHECK STUBS**
5. **2022 OR MOST CURRENT INCOME TAX RETURN (W-2 FORMS INCLUDED)**

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**PLEASE KEEP US INFORMED OF CHANGES TO YOUR PHONE NUMBER(S). IF WE CANNOT CONTACT YOU, YOUR APPLICATION WILL BE REMOVED FROM THE WAITING LIST.**

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## MINIMUM INCOME LEVEL REQUIRED

### TOMAS FLORES APTS.

2-BD - \$474.00/RENT - \$474.00/DEP.	\$1,500.00 MIN. INC.REQ.
3-BD - \$576.00/RENT - \$576.00/DEP.	\$1,780.00 MIN. INC.REQ.

### NOISE ABATEMENT APTS.

1-BD - \$470.00/RENT - \$470.00/DEP.	\$1,530.00 MIN.INC.REQ.
2-BD - \$535.00/RENT - \$535.00/DEP.	\$1,690.00 MIN.INC. REQ.
3-BD - \$611.00/RENT - \$611.00/DEP.	\$1,890.00 MIN.INC.REQ.

### HOUSES/JOSE FLORES

2-BD - \$544.00/RENT - \$544.00/DEP.	\$1,730.00 MIN.INC. REQ.
3-BD - \$685.00/RENT - \$685.00/DEP.	\$2,150.00 MIN.INC. REQ.
4-BD - \$791.00/RENT - \$791.00/DEP.	\$2,460.00 MIN.INC. REQ.