

Request for Tenancy Approval

1. Name of Public Housing Agency (PHA)				2. Address of Unit (Street Address, Apt #, City, State, & Zip Code					
								-	
 Requested Beginning Date 	4. Qualified #BR (PHA Use Only)	5. #BR Actual		5. Year Constructed	6	. Proposed Rent	7. Security Deposit \$	8. Date Un	it Available for Inspection
268	(1.1.1.000 0.1.1)								
9. Type of House/Apartment (PHA Use Only – refer to PHA policy for unit classifications)									
10. If this unit is subsidized, indicate type of subsidy:									
11 Utilities and Appliances. The owner shall provide or pay for the utilities and appliances indicated below by $a = "0"$. The tenant shall provide an application of the state of the sta									
11. Utilities and Appliances. The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by an "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.									
Item	Specify fuel to Natural Gas	ype Bottle Gas	Oil	Electric	Coal	Other	Provided by	Paid by	
Heating Cooking	Natural Gas	Bottle Gas	Oil	Electric	Coal	Other			
Water Heating	Natural Gas	Bottle Gas	Oil	Electric	Coal	Other			
Other Electric									
Water									
Sewer									
Trash Collection									
Air Conditioning									
Refrigerator									
Range/Microwave									
Other (specify)	snecify)								
12. Owner's Certification. The owner (including a principal or other interested party) is not the parent, child, grandparent, grandchild, sister or brother of any member of the family, unless the PHA has determined (and has notified the owner and the family of such determination) that approving leasing of the unit, not									
withstanding such relationship, would provide reasonable accommodation for a family member who is a person with disabilities.									
13. The PHA will arrange for inspection of the unit and will notify the owner and family as to whether or not the unit will be approved.									
14. The PHA has not screened the family's behavior or suitability for tenancy. Such screening is the owner's responsibility.									
Print or Type Name of Owner/Owner Representative						Print or Type Name of Household Head			
Signature (Owner/Owner Representative) Signature (Head of Household)									
Business Address						Present Address of Family			
Telephone Number			Date	(mm/dd/yyyy	r)	Telephone Number		Date (mm/dd/yyyy)	