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RESIDENCY and LIVING ARRANGEMENTS

**THIS FORM MUST BE COMPLETED BEFORE SEEING
THE INTERVIEWER.**

_____ resides at the following:
(Renter's Name)

Address: _____

City: _____ State: _____ Zip Code: _____

The renter pays \$ _____ per month for rent which

DOES / DOES NOT (circle one) include utilities.

Please include any charges which the renter is obligated to pay for:

I understand that any false or misleading information on this form will prohibit the renter and landlord from receiving any assistance of any kind now or in the future from Help the Needy.

Renter's Signature: _____ Date: _____

Print Landlord's Name: _____

Landlord Company Name, if applicable: _____

Landlord's Signature: _____ Date: _____

Landlord's Phone Number: _____

Left Side—Proof of Residence

Right Side—Lease Replacement