

**Ross Valley Ecumenical Housing Association**  
**P.O. Box 2969**  
**San Anselmo, CA 94979**  
**415-457-5633**

**Tam Houses**  
**Preliminary Application for Occupancy**

Name: \_\_\_\_\_

**Housing Status – Please account for the last five years (Use reverse side if needed):**

Current Mailing Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work or Cell Phone: \_\_\_\_\_

How long at this address? \_\_\_\_\_ Monthly Rent: \_\_\_\_\_ Subsidized? \_\_\_\_\_

Present Landlord Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Name of Previous Landlord: \_\_\_\_\_

Previous Landlord Telephone: \_\_\_\_\_ Monthly rent: \_\_\_\_\_

How long at this address: \_\_\_\_\_ Was your rent subsidized? \_\_\_\_\_

**Income - Employment Sources:**

List all full and/or part-time employment income. (Use reverse side if needed.)

Full Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Monthly Wages/Salary: \_\_\_\_\_

Full Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Monthly Wages/Salary: \_\_\_\_\_

**Income – Other Sources:**

List all social security, SSI, pension, retirement, disability compensation, unemployment compensation, interest income, annuities, dividends, regular contributions, etc.)

Type of Income: \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

Type of Income: \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

Type of Income: \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

Type of Income: \_\_\_\_\_ Monthly Amount: \_\_\_\_\_

**Assets - Complete each category as applicable:**

Checking Account - Name of Bank: \_\_\_\_\_

Balance/Date: \_\_\_\_\_

Other Account – Name of Bank: \_\_\_\_\_

Balance/Date: \_\_\_\_\_

401K/IRA: \_\_\_\_\_

Balance/Date: \_\_\_\_\_

Stocks and Bonds Value: \_\_\_\_\_

Do you own Real Estate? \_\_\_\_\_ Current value: \_\_\_\_\_

**General Information**

Have you ever been evicted? If yes, when? \_\_\_\_\_ Explain. \_\_\_\_\_

Have you filed for personal bankruptcy? If yes, when? \_\_\_\_\_ Please explain. \_\_\_\_\_

Were you ever convicted of a drug or violent crime? If yes, when? \_\_\_\_\_ Please explain. \_\_\_\_\_

Identify any outstanding debts and payment terms. \_\_\_\_\_

Are there any current debts on which you are more than 90 days delinquent?

Do you currently hold a Section 8 voucher? If so from what county? \_\_\_\_\_

Do you require a unit with accessible features for persons with disabilities?

If yes, what features? \_\_\_\_\_

I DECLARE THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. **WARNING:** MISLEADING, WILLFUL FALSE STATEMENTS, MISREPRESENTATIONS OR INCOMPLETE INFORMATION IN THIS APPLICATION WILL BE GROUNDS FOR REJECTION OF THIS APPLICATION. I AUTHORIZE RVEHA TO CHECK PREVIOUS LANDLORD REFERENCES AND TO OBTAIN A CREDIT REPORT.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

THE FILING OF THIS APPLICATION IN NO WAY GUARANTEES YOU A PLACE IN TAM HOUSE II.  
PLEASE DO NOT MAIL MORE THAN ONE APPLICATION. INCOMPLETE APPLICATIONS WILL BE RETURNED.