



# Detroit Catholic Pastoral Alliance

## Housing Rental Application



### **PERSONAL:**

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

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License / MI I.D. No.: \_\_\_\_\_

### **HOUSING INFORMATION:**

Present Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_

Monthly rent at present address: \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Present Landlord: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

Landlord's Phone No. \_\_\_\_\_

List of names of person(s) to live with you:

Relationship to you:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How long do you plan to live here? \_\_\_\_\_

**EMPLOYMENT:**

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

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

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

How Long Employed: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Employer's Phone \_\_\_\_\_

Monthly Income: \_\_\_\_\_

Do you have a current Section-8 Voucher? \_\_\_\_\_ YES \_\_\_\_\_ NO

Any additional Income? \_\_\_\_\_

Amount: \_\_\_\_\_

**REFERENCES (3 MINIMUM):**

Name \_\_\_\_\_ Phone# \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I affirm that the statements above are true and correct. I authorize verification of my references and credit.

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

Return Completed Application to: **Detroit Catholic Pastoral Alliance**  
**9200 Gratiot**  
**Detroit, MI 48213**  
Phone: 313.922.1435 Fax: 313.922.8888