



Application for Housing

Thank you for applying with Matthew 25!

The following information is needed at the time your application is submitted:

- **Matthew 25 Rental Application completed by all applicants with signatures on every page**
- **Copy of a valid Driver's License or Military ID for all applicants**
- **Six consecutive months of pay stubs**
- **\$30 Application Fee per applicant**
 - **Payable to Matthew 25**
 - **Cash payments must be in exact change**

Your application will be processed when all of the above items are provided. Any missing information will delay the process.

To qualify, prospective tenants must make three times the monthly rent.



Matthew 25 will not discriminate on the basis of race, color, creed, religion, natural or ethnic origin, citizenship, ancestry, class, sex, sexual orientation, familial status, disability, military/veteran status, source of income, age or other basis prohibited by local state or federal law in any aspect of tenant selection.

Matthew 25 runs a credit check on all prospective tenants 18 years of age and over. Any outstanding balances with current or previous landlords, utility companies, liens, or judgments must be paid in full before we can approve the application.

Iowa Code Chapter 216, Iowa's anti-discrimination law, does not affect "tenancy of an individual that would constitute a direct threat to the health and safety of other individuals or tenancy that would result in substantial physical damage to the property of others" (216.20).

I have read all information on this page.

Applicant 1 Signature _____ Date _____

Applicant 2 Signature _____ Date _____

201 Third Ave SW
Cedar Rapids, IA 52404
(319)362-2214



info@hub25.org
www.hub25.org

Current Employment

Company: _____

Occupation/Title: _____

How Long? _____ Gross Income: \$ _____

(From prior year tax filing)

Is your monthly income 3 x the rent rate? ☐ Yes ☐ No

Address: _____

City: _____ State: _____

Supervisor Name: _____ Supervisor Ph#: _____

Current Residence

Bedrooms: _____ Rent Amount: \$ _____/Month

Address: _____

City: _____ State: _____ Zip: _____

How long at this address? _____

Current Lease Expiration Date: _____

Reason for moving? _____

Current Landlord

Name: _____

Address: _____

Phone: _____ E-mail: _____

Start Date: _____ End Date: _____

References

List three business or professional references (not relatives).

	<u>Name</u>	<u>Phone #</u>	<u>Relationship</u>	<u>Years Known</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

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Applicant #2 Details

Full Name: _____ DOB: _____

SSN: _____

Driver's License No: _____ Phone: _____

E-mail: _____

Other Occupants? ☐ Yes ☐ No If yes, please name: _____

Vehicles? ☐ Yes ☐ No If yes, provide details below.

Make/Model/Year: _____

Ever been convicted of a felony or plead guilty to a serious misdemeanor?

☐ Yes ☐ No If yes, describe: _____

Ever filed for bankruptcy? ☐ Yes ☐ No

If yes, describe: _____

Ever been evicted? ☐ Yes ☐ No

If yes, describe: _____

Have you ever gone by another name? Please list all names, nicknames, or aliases.

Current Employment

Company: _____

Occupation/Title: _____

How Long? _____ Gross Income: \$ _____

(From prior year tax filing)

Is your monthly income 3 x the rent rate? ☐ Yes ☐ No

Address: _____

City: _____ State: _____

Supervisor Name: _____ Supervisor Ph#: _____

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Current Residence

Bedrooms: _____ Rent Amount: \$ _____ /Month
Address: _____
City: _____ State: _____ Zip: _____
How long at this address? _____
Current Lease Expiration Date: _____
Reason for moving? _____

Current Landlord

Name: _____
Address: _____
Phone: _____ E-mail: _____
Start Date: _____ End Date: _____

References

List three business or professional references (not relatives).

	<u>Name</u>	<u>Phone #</u>	<u>Relationship</u>	<u>Years Known</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

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Consent and Acknowledgment

I hereby certify that I am at least 18 years of age. Applicant represents that all information given on this application is true and correct. Applicant hereby authorizes verification of all references and facts, including but not limited to current and previous landlords, employers, and personal references. Applicant hereby authorizes owner/agent to obtain any and all Unlawful Detainer, Credit Reports, Tele checks, and/or Criminal Background Reports. Applicant agrees to furnish additional credit and/or personal references upon request. Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing which may result in denial of tenancy. Applicant hereby waives any claim and releases from liability any person providing or obtaining said verification or additional information.

Applicant #1

Date

Applicant #2

Date

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Verification of Employment

AUTHORIZATION: Federal regulations require us to verify employment income of all members of the household applying for participation in the HOME Program which we operate and to re-examine this income periodically. We ask for your cooperation in supplying this information. This information will be used only to determine the eligibility status and level of benefit of the household. Your prompt return of the requested information is appreciated.

Employed since: _____ Occupation: _____

Salary: _____ Effective date of last increase: _____

Base pay rate: \$ _____/hour or \$ _____/week or \$ _____/month

Average hours/week at base pay rate: _____ Number of weeks _____/year

Overtime pay rate: \$ _____/hour

Expected weekly average number of hours overtime to be worked during next 12 months _____

Any other Compensation not included above (Specify commissions, bonuses, tip, etc.)
for: _____ \$ _____/hour/week/year

Do you receive paid time off? Yes / No If Yes, number of days/year _____

Total base pay for past 12 months: _____ Total overtime for past 12 months: _____

Probability and expected date of pay increase: _____

Is there access to a retirement account? Yes / No If Yes, what amount can be access:
\$ _____

RELEASE: I hereby authorize the release of the requested information.

Signature of Applicant: _____ Date: _____

Signature of _____ or Authorized Representative: _____

Title: _____ Date: _____ Telephone: _____

WARNING: Title 18, section 1001 of the US Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States government.

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RENTAL VERIFICATION

APARTMENT ADDRESS: _____

LANDLORD: _____ **PHONE #:** _____

Please verify rental information for _____.
(As per the signature authorization as soon as possible and email: **rentals@hub25.org**)

SECTION BELOW TO BE FILLED OUT BY PROPERTY MANAGERS ONLY:

1. Move in Date: _____
2. Lease Expiration Date: _____
3. Did they give 30 day notice: _____
4. Amount of monthly rent: _____
5. Number of late payments: _____
6. Have you had to serve a 3 Day Notice to Quit? _____ If so, how many? _____
7. Number of NSF Checks: _____
8. Legal notices or actions: _____
9. Noise complaints _____
10. Condition of apartment: _____
11. Would you rent to them if they reapplied and qualified: _____
12. Has tenant ever had an issue with bed bugs: _____
13. Comments: _____

THANK YOU FOR YOUR HELP. IT IS APPRECIATED!

Reference given by: _____

Title: _____

****I hereby give permission for Landlords to release rental information concerning me to Matthew 25.**

Resident's Signature: _____ **Date:** _____

**CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK IN
COMPLIANCE WITH THE FCRA
(FAIR CREDIT REPORTING ACT)**

This authorization and consent for release of personal information acknowledges that _____ (Hereafter referred to as "Company") and/or its agent, C4 Operations LLC may now, or at any time renting from conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to, searches of educational institutions attended; state driving records; financial or credit institutions, including records of loans; records of commercial or retail credit agencies; other financial statements; records of previous employment, including work rental history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veterans' Administration; criminal history information of file in local, state or federal agencies; and motor vehicle records. I understand that these searches will be used to determine renting eligibility under the company's renting policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the company. In addition, I release and discharge the company and its agent and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether occupancy was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from **C4 Operations LLC, 1201 Edgewood Rd SW, Cedar Rapids, IA 52404** at telephone number (319) 491-6300. After reading this document, I fully understand its contents and authorize the background verification.

Signed this _____ day of _____, 20_____

Applicant (Print Name)

Applicant Signature
