

AFFORDABLE RENT WORKSHEET

Income Sources (after Taxes)	Monthly Amount
Salary/Wages	
Private Pension	
Social Security	
SSI	
SSDI	
Unemployment Insurance	
Public Assistance	
Alimony (paid to you)	
Child Support (paid to you)	
Interest	
Dividends	
SNAP/TANF/etc.	
Other	
Other	
Total Income	
Multiply Total Income by .30 = Suggested Affordable Rent	
Monthly Expenses	Monthly Amount
Food (groceries, dining out)	
Transportation (gas, bus, etc.)	
Child Care	
Medical Expenses, Medications	
Insurances (renters, life, auto) (divide by 12 if annually)	
Alimony (paid by you)	
Child Support (paid by you)	
Clothing	
Phone	
Electric	
Gas	
Cable TV, Internet, Cell Phone, etc.	
Other (e.g. cigarettes, coffee, lunch, etc.)	
Debts (loans, credit card, etc.) (List on back if you need more space)	
Total Expenses	
Total Income	
Subtract Total Expenses (-)	
Amount Available for Housing (Compare this number to the Suggested Affordable Rent above)	

BASIC HOUSEHOLD DATA SHEET

Enter basic information about each person who will live with you.

Basic Household Data Sheet			
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	
Full Name			
Date of Birth		Social Security Number	

FINANCIAL DATA SHEET

Rental applications sometimes ask for information about income to determine if you can afford to pay the rent. You may also be asked to provide copies of pay stubs or benefit award letters. List below the sources and amounts of income for all members who will live with you in your household and include proof of income (3 months, if possible) in your folder.

Income Source	Name of Household Member			
	1.	2.	3.	4.
Salary/Wages				
Current Employer, Address, Phone Number, Etc.				
Social Security				
Pension				
Disability Insurance				
Public Assistance				
Other				
Other				

Income Source	Name of Household Member			
	1.	2.	3.	4.
Salary/Wages				
Current Employer, Address, Phone Number, Etc.				
Social Security				
Pension				
Disability Insurance				
Public Assistance				
Other				
Other				

ASSET INFORMATION

If applying for subsidized or public housing, you will be asked if you have any assets. Money in bank accounts, investments and/or real estate are considered assets. It is also important to note if you have a representative payee.

Type of Asset	Bank/Financial Institution Name	Value/Balance	Account Number	Family Member
Checking Account				
Savings Account				
PA Able Account				

PREVIOUS HOUSING REFERENCE

List below the information about places you have lived. List the contact information of someone who will give you a positive reference.

Dates Lived in Unit		Address of Property Lived In	Property Manager/Landlord Contact
From	To		Name, Phone, Address of Reference

PREP CHECKLIST

Below is a checklist of all the items you should have in your completed PREP folder.
There is a column to enter information for each person who will live with you.

Item Needed	Name/Initials of Household Members				Family Member
Photo ID					
Birth Certificate					
Social Security Card					
Benefits Award Letter					
Pay Stubs (previous 3 months)					
Other Proof of Income					
Basic Information Sheet					
Previous Housing References Sheet					
Financial Information Sheet					
Asset Information Sheet					

Lease Review Sheet

1. What is the exact address of the property you will be living in?

2. How long is the lease for: _____ Start Date __/__/__ End Date __/__/__

3. What is the amount of rent per month: _____ Security Deposit: _____
Are there any additional fees: _____ Amount Paid: _____
Explanation for additional fees: _____

4. Does your rent include any of the following unitiles:
Heat _____ Water _____ Electric _____ Trash Removal _____ Other _____

5. What day of the month is your rent due: _____
Is there a late fee? If so, after how many days is the fee charged: _____
How much is the late fee: _____

6. Who do you pay rent to:
Name _____
Address _____) _____
Phone Number _____ Email _____

7. What types of payment can be used to pay your rent:
Check _____ Money Order _____ Cash _____ * If paying cash, get a receipt!

8. Who do you contact for repairs or problems? Is it someone other than who you pay rent to:
Name _____
Address _____) _____
Phone Number _____ Email _____

9. What other costs are you responsible for:
Heating _____ Type _____ Electric _____ Water _____
Sewer _____ Trash Removal _____ Parking _____
Other _____

10. Are pets allowed: No _____ Yes _____ Are additional fees required: _____

11. Is smoking allowed: No _____ Yes _____
Are there rules about smoking outside of the property (e.g. no smoking in entryways): No _____ Yes _____

12. Is there a limit to the number of nights a guest may stay:
No _____ Yes _____ Number of days _____

13. Can additional people move in with you: No _____ Yes _____
Fees/additional rent required _____

BASIC UNIT WALK THROUGH

Documenting the condition of a rental property before you move in is a great way to help ensure that your security deposit is returned if you decide to move. In the top row is the name of each room in your apartment. The column on the left side of the page has some basic items you should check for in each room. Simply walk through each area of the apartment and note any issues in the box below.

Document any concerns by taking photos.

	Living Room	Kitchen	Bathroom	Bedroom	Bedroom	Bedroom	Other
Ceilings and Walls – Look for cracks, holes, peeling paint, or water stains.							
Floors – Look for rips, holes, stains, burn marks, or wear.							
Windows – Note if latches are in working order or if there are cracks in the glass.							
Electrical – Make sure outlets and switches are in working order. Make sure light fixtures are in working order or if they are chipped or cracked.							
Appliances – Note if they are in working order and if they have any scratches or dents.							
Safety – Check that all locks work. Make sure there are smoke detectors in the apartment and that they work.							

CLEANING CHECKLIST

M	T	W	Th	F	S	Su	Regular Tasks: Often done several times a week or on a daily basis	Less Frequent Tasks: Often done on a weekly basis
							Kitchen - Clean up after eating or cooking. Store food away. Refrigerate any perishable items.	Kitchen - Sweep and scrub kitchen floor
							Throw out any wrappers, cartons, or food you will not eat.	Clean off outside of appliances such as stove or refrigerator.
							Wash dirty dishes and put them away.	Clean out the inside of the refrigerator, wipe up spills.
							Wipe off the countertops, stove, microwave, and sink.	Take out garbage to dumpster or curb on collection day.
							Check the floor for crumbs or spills, mop or sweep as needed.	
							Bathroom - Rinse sink and countertop areas, wipe up the toothpaste or other dirt in the sink.	Bathroom - Scrub shower and bath area with cleaner. Remove dirt and soap build up.
							Clean the toilet bowl with a brush as needed.	Toilet- clean bowl with cleaner. Clean above and below seat. Wipe off other outside areas.
							Put dirty clothes and towels in a hamper or laundry basket.	Launder towels.
							Living Room and Bedrooms - Throw out newspapers, mail, or clutter you do not need.	Living Room and Bedrooms - Empty trash cans.
							Straighten up any toys, books, or hobbies.	Launder sheets.
							Vacuum carpeting or sweep floor if necessary.	If you have hard surface floors, such as tile, you will need to sweep and mop.
							Put dirty clothing in a hamper or clothes basket.	
							Wipe up any spills or dust on furniture.	
							Hang, fold, or store any other clothing.	