

**CAPITAL AREA HOUSING PARTNERSHIP
RENTAL COUNSELING
DOCUMENT CHECKLIST**

THIS INFORMATION IS REQUIRED FOR SERVICE

PLEASE BRING TO FIRST APPOINTMENT:

INCOME DOCUMENTATION FOR ALL ADULTS (OVER 18) IN THE HOUSEHOLD

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| 1. THIRTY (30) DAYS OF CHECK STUBS/RETIREMENT STATEMENTS | <input type="checkbox"/> |
| 2. SOCIAL SECURITY VERIFICATION LETTER(S) | <input type="checkbox"/> |
| 3. PRIOR YEAR TAX RETURN | <input type="checkbox"/> |
| 4. PRIOR YEARS W-2'S AND 1099'S | <input type="checkbox"/> |
| 5. QUARTERLY PROFIT & LOSS STATEMENT FOR SELF-EMPLOYED | <input type="checkbox"/> |
| 6. UNEMPLOYMENT VERIFICATION (from MESC, if applicable) | <input type="checkbox"/> |
| 7. FOOD STAMP AWARD LETTER (IF APPLICABLE) | <input type="checkbox"/> |

BUDGET

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|--|--------------------------|
| 1. A COMPLETE LIST OF MONTHLY BILLS | <input type="checkbox"/> |
| 2. COPIES OF ALL MONTHLY BILLS (Most Recent Month's Utility, Phone, Cable,
Credit Cards etc.) | <input type="checkbox"/> |
| 3. TWO MONTHS BANK STATEMENTS (most recent 2 months, w/ letterhead) | <input type="checkbox"/> |
| 4. COPY OF CURRENT RENTAL LEASE (if applicable) | <input type="checkbox"/> |

LEGAL AND IDENTIFICATION

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| 1. SOCIAL SECURITY # FOR ALL ADULTS (OVER 18) IN THE HOUSEHOLD | <input type="checkbox"/> |
| 2. BANKRUPTCY DOCUMENTS (if applicable) | <input type="checkbox"/> |
| 3. RECENT CREDIT REPORT (if pulled within last 60 days) | <input type="checkbox"/> |

QUESTIONS: 517.332-4663

CAHP UPDATED 1/2020