



## **PROMISE DEVELOPMENT CORPORATION**

**“Welcome to Promise Development Corporation Rental Property Management Services.”**

We hope that you will find a property that meets your needs. For your convenience, the following is a brief overview of the general guidelines used to process an application.

- **A COMPLETED APPLICATION FORM:** in order to tell us about yourself. **EACH** adult wishing to live in one of our properties must fill out an application and be approved. All sections of each application must be completed and accurate.
- **EMPLOYMENT:** in order to verify that there is adequate income to make rental payments. In general, we expect applicants to have been in current employment at least six(6) months, and that income is verified by providing four (4) to six (6) consecutive check stubs.
- **RENTAL HISTORY:** in order to verify that the prospective tenant has demonstrated a desire to meet lease obligations. In general, we want to verify the amount of current rent and that the rent was paid in a timely manner; that the property was kept in good condition; that there is no history of complaints from other tenants; that all lease obligations have been met; and that the tenancy has been a positive experience.
- **CREDIT HISTORY:** is completed in order to verify that the prospective tenant has demonstrated fiscal responsibility. In general, we look for payments that are made on time, that there are no judgments or bankruptcy records, and that credit responsibilities are in line with income. (Proof of Social Security Cards of all individuals expected to be in the home suffice for credit check.)
- **VEHICLE INFORMATION:** including make, model, color and year of any vehicle to be kept at the rental property.
- **A VALID PHOTO ID:** so that we can assure the property owner that the person apply for the property is indeed the person moving in.
- **AUTHORIZATION** is for us to verify information given on the application.

**No person shall be denied the right to rent one of our properties based on applicant’s race, color, religion, national origin, gender, age, disability, marital status or familial status.**

## APPLICATION FOR Promise Development Corporation Housing

Please complete all information requested in ink. Do not leave blanks or we may be unable to process your application. Please print. Thank you and we look forward to assisting you.

This is a preliminary application for housing at Promise Development. All information will be verified by the management prior to an applicant being placed on our waiting list for consideration. All applicants must meet established selection criteria.

**Return to:      Property Management**  
**262 Chelsea Ave. Suite #101**  
**Memphis, Tenn. 38107**  
**Office (901) 800-1404 fax (901) 800-1405**

Date of Application _____	Single Family Home _____ bedrooms _____ bath
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### **I. Applicant Information**

Applicant Name/Head of Household \_\_\_\_\_ Any Alias Names \_\_\_\_\_

Date of Birth \_\_\_\_\_ Address (where you live now/or receive mail) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

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

Social Security # \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Race \_\_\_\_\_

\*Race: White, Black, American Indian/Alaska Native, Asian or Pacific Islander, Hispanic, Other

Marital Status:    Single \_\_\_\_\_                      Married \_\_\_\_\_                      Divorced \_\_\_\_\_                      Widow/Widower \_\_\_\_\_

Children/Dependents: Do you have any children or dependents? \_\_\_ Yes \_\_\_ No

    If yes, how many? \_\_\_\_\_                      Do they currently live with you? \_\_\_ Yes \_\_\_ No

Please list all person living with you	Relationship	Age	Sex	Social Security #	DOB
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Pets: Do you own any pets/animals? \_\_\_ Yes \_\_\_ No

    If yes, what kind and how many? \_\_\_\_\_

    Does the pet(s) live with you currently? \_\_\_ Yes \_\_\_ No

    Are the pets vaccinated? \_\_\_ Yes \_\_\_ No

Are either you or your spouse handicapped or disabled? \_\_\_ Yes \_\_\_ No: (If Yes, what is the nature of the condition?)

Have you ever been convicted of a misdemeanor or felony? \_\_\_ Yes \_\_\_ No

If YES, please explain \_\_\_\_\_

### **II.**

Is there any specific accommodation you would like to request that would allow you to fully utilize our programs? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_

Provide information on an emergency contact person. If we are unable to contact you, we will try to contact the emergency person on your behalf. NAME: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Relationship \_\_\_\_\_

### **III. Household Income**

Please provide all income/earnings information below. This income may include but is not limited to: Employment Income, Self-Employment Income, Unemployment Compensation, Social Security, Disability Income, Child Support, Pensions, Baby-Sitting Income, etc. If you have no income, write NONE below.

Name of Household Member Receiving Income	Employment or Self-Employment Gross Weekly Income and Employer Name	Weekly Unemployment Benefits	Social Security/ SSI Monthly Benefits	AFDC/TANF Monthly Income	Child Support Monthly Income	Other Income List-Type and Monthly Amount (Food Stamps)
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____







**Promise  
Development  
Corporation**

**Promise Development Corporation 262 Chelsea Ave. Suite 101  
Memphis, TN 38107  
Phone: 901-800-1404, Fax: 901-800-1405  
Email: [infor@pdevcorp.org](mailto:infor@pdevcorp.org)  
Website: [www.pdevcorp.org](http://www.pdevcorp.org)  
**Employment Verification****

**THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY APPLICANT**

TO: (Name & Address of Employer) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RE: \_\_\_\_\_  
Applicant Name Social Security Number Unit No.

I hereby authorize release of my employment information.

\_\_\_\_\_  
Signature of Applicant Date

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

**THIS SECTION TO BE COMPLETED BY EMPLOYER**

Employee Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Presently employed: Yes \_\_\_\_\_ Date First Employed \_\_\_\_\_ No \_\_\_\_\_ Last Date of Employment \_\_\_\_\_

Current Wages/Salary: \$ \_\_\_\_\_ (Circle) Hourly Weekly Biweekly Semimonthly Monthly Annually Other

Average No. of regular hours per week: \_\_\_\_\_ Year to date earning: N/A through \_\_\_\_\_

Overtime Rate: \$ \_\_\_\_\_ per hour Average number of overtime hours per week: \_\_\_\_\_

Shift Differential Rate: \$ \_\_\_\_\_ per hour Average number of shift differential hours per week: \_\_\_\_\_

Commissions, Tips, Bonuses: \$ \_\_\_\_\_ (Circle) Hourly Weekly Biweekly Semimonthly Monthly Annually Other

List any anticipated change in the employee's rate of pay within the next 12 months: \_\_\_\_\_

\_\_\_\_\_ Effective date of change: \_\_\_\_\_

If the employee is work seasonal or sporadic, please indicate the layoff period(s): \_\_\_\_\_

Additional Remarks:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Employer's Signature Employer's Printed Name Date

\_\_\_\_\_  
Employer (Company) Name and Address

\_\_\_\_\_  
Telephone Number Fax Number E-mail Address

Note: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statement or misrepresentations to any Department of Agency f the United States as to any matter within its jurisdiction.