# WELFARE DEPARTMENT

2975 Dartmouth College Highway
North Haverhill, NH 03774
**(603) 787-6514/ FAX (603) 787-2226**

*Leslie Ramsay*
*Welfare Administrator*

## RENTAL REQUEST FORM

**ALL INFORMATION ON FORM TO BE COMPLETED BY OWNER OR AUTHORIZED AGENT ONLY:**

This is for information only and does not constitute agreement for payment.

**PLEASE TAKE NOTICE: Town of Haverhill Welfare discourages landlords from approving applicant tenancy and/or occupancy prior to verifying current ability to financially maintain proposed housing and 1st month rental application decision from this office.**

**OWNER'S NAME** _____ AGENT'S NAME _____

ADDRESS OF OWNER _____ AGENT'S ADDRESS _____

TELEPHONE # _____ AGENT'S # _____

**FOR IRS REPORTING PURPOSES, OWNER'S SOCIAL SECURITY OR TAX ID # MUST BE PROVIDED EITHER ON THIS FORM OR BY TELEPHONE IN ORDER FOR PAYMENT TO BE MADE /*SS#*** _____

**RENTER'S NAME:** _____ **# IN HOUSEHOLD:** _____

NAMES OF OTHER HOUSEHOLD MEMBERS _____

RENTAL ADDRESS: _____ # BEDROOMS _____

**HOW MANY RENTAL UNITS ARE IN THIS BUILDING?** _____

DATE OCCUPIED APARTMENT _____ IF **1ST MONTH**, POTENTIAL OCCUPANCY DATE _____

IF APPLICANT IS APPLYING FOR 1st MONTH RENT, HAS CURRENT FINANCIAL ABILITY TO MAINTAIN PROPOSED RENT BEEN VERIFIED? PLEASE CHECK ☐ Yes ☐ No

RENT AMOUNT: _____ HOW MUCH RENT OWED TO DATE: _____ LAST PAID: _____

HOW IS RENT PAID? WEEKLY ☐ MONTHLY ☐ IF SUBSIDIZED, TENANT=S PORTION _____

**UTILITIES INCLUDED**: ELECTRICITY ☐ GAS ☐ OIL HEAT ☐ OTHER ☐ NONE ☐

WAS DAMAGE DEPOSIT REQUIRED? ☐ Yes ☐ No DATE PAID : _____

***I certify that I completed this form and the above information is accurate to the best of my knowledge.***

**SIGNATURE OF OWNER OR AGENT:** _____ DATE: _____

COMMENTS: _____

PLEASE READ IMPORTANT INFORMATION ON THE BACK OF THIS FORM

## TO OWNERS OF PROPERTY:

Please be advised housing is expected to meet local health and safety code standards for consideration of any financial housing assistance from municipal welfare.

## TO OWNERS MULTI-FAMILY UNIT BUILDINGS:

## *NEW HAMPSHIRE STATE STATUTE*

### *TITLE XII*
### *PUBLIC SAFETY AND WELFARE*

### Section 165:4-a

### AID TO ASSISTED PERSONS

**165:4-a Application of Rents Paid by the Municipality.** – Whenever the owner of property rented to a person receiving assistance under this chapter is in arrears in sewer, water, electricity, or tax payments to the municipality, the municipality may apply, upon approval of the governing body, the assistance which the property owner would have received in payment of rent on behalf of such assisted person to the property owner's delinquent balances, regardless of whether such delinquent balances are in respect of property occupied by the assisted person. For purposes of this section, a payment shall be considered ""in arrears" if more than 30 days have elapsed since the mailing of the bill, or in the case of real estate taxes, if interest has begun to accrue pursuant to RSA 76:13.

**Source.** 1992, 184:2, eff. July 11, 1992.