**ATHENS COUNTY**

**VETERANS SERVICE OFFICE**

510 W. Union St. Suite 100

Athens, OH. 45701

740-592-3216

**\*RENT STATEMENT\***

**TO BE COMPLETED BY LANDLORD ONLY**

I, the undersigned landlord/manager state that

Mr./Mrs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Tenant Name)

Do/Will reside at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

And RENT/LEASE (Circle One)

House Apartment Room Trailer

If tenant lives in trailer please state lot rent $\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Monthly Rent $\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Deposit $\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Excluding cable, water, sewer)

Number of persons in residence \_\_\_\_\_\_\_ Date moved/moving in \_\_\_\_\_\_\_\_\_\_\_

Amount behind in rent $\_\_\_\_\_\_\_\_\_\_ No. of months behind \_\_\_\_\_\_\_\_\_\_\_\_

\*\*Please provide printed documentation of tenant’s payment history\*\*

Name of Landlord or manager \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check payable to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that false statements made on this form may lead to prosecution. I have completed and/or reviewed all information pertaining to the tenant and I certify that it is correct to the best of my knowledge.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **ALL FIELDS MUST BE COMPLETED BEFORE CONSIDERATION FOR ASSISTANCE UPON APPROVAL OF THE ATHENS COUNTY VETERANS SERVICE COMMISSION**

Sincerely,

John Woods

Investigator