

GREATER WASHINGTON URBAN LEAGUE HOUSING & COMMUNITY DEVELOPMENT DIVISION

**PLEASE BE ADVISED THIS IS NOT AN APPLICATION**

ERAP Intake Screening

Security Deposit  First month's rent  Delinquency (back rent)

Clients Name; \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you a DC Residence? Yes  or No  Are you the Lease holder? Yes  or No

Have you received rental assistance from another agency in the last 12 months? Yes  or No

Security Deposit  First month's rent  Back rent

Have you applied and received an approval letter from your soon to be Landlord? Yes  or No

Are you a recipient of Housing Authority or any other subsidy program? Yes  or No

If you are applying for security deposit and or 1<sup>st</sup> month rent and you receive subsidy payments towards your monthly rent. The apartment must pass inspection before applying for ERAP.

If the apartment has not gone through inspection your intake form will **Not** be accepted.

What is your source of income?

Employed  SSI  TANF  Retirement  SS  Unemployment  SSDI  Veterans  Other

Amount Requested: \$ \_\_\_\_\_

Have you been to court? \_\_\_\_\_

Clients Address: \_\_\_\_\_

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

Income for the last thirty days if bi-weekly 2 checks amount \$ \_\_\_\_\_ Net after taxes

If weekly 4 check amount \$ \_\_\_\_\_ (Net after taxes)

**ONLY SUBMIT ONE INTAKE FORM**

**You will receive a call in two weeks after you submit**