Polk County Veteran Affairs

POLK COUNTY RIVER PLACE

2309 EUCLID AVE, DES MOINES, IOWA 50310

PHONE: (515) 286-3670

EMAIL: VETERANS.AFFAIRS@POLKCOUNTYIOWA.GOV

THE LANDLORD OR AGENT MUST COMPLETE THE FOLLOWING QUESTIONS:

1. Name, title, address, and phone number of the person completing the form.

   _____ ( ) _____
   Name, title Street, City, State, and Zip Phone Number

2. Name, address, and phone number of the owner of property, if different than #1. (This will be verified, or voucher will not be issued).

   _____ ( ) _____
   Name, title Street, City, State, and Zip Phone Number

3. What is the Federal ID or Social Security number of the owner of the property?

   _____

4. What is your family relationship, if any, to the renter/buyer? _____

5. How much is the monthly rent/house payment? $ _____

6. How much is received from Section 8 or HUDVASH? $ _____

7. What utilities, if any, are included in the rent? Please circle:
   Electric Natural Gas Heat Water Sewer Solid waste

8. How much is owed and for what time period?

   $ _____ From: ___/___/___ To: ___/___/___

9. Will the landlord accept a Polk County Voucher, and agree not to evict for a 30-day time period?
   Please circle: YES NO

10. What is the minimum voucher amount you will accept? $_____

11. Address of property being rented/purchased? _____

12. Please list all occupants of apartment or home. _____

13. What arrangements have been made for the difference between the actual monthly cost and the amount of the Polk County Voucher? _____

14. Is deposit required? Yes No if so, how much is the deposit: $ _____

15. How long has the tenant lived at the above address? _____

X _____ ___/___/___
SIGNATURE OF LANDLORD OR AGENT DATE