

Polk County Veteran Affairs

POLK COUNTY RIVER PLACE

2309 EUCLID AVE, DES MOINES, IOWA 50310

PHONE (515) 286-3670

FAX (515) 286-2106

EMAIL: VETERANS.AFFAIRS@POLKCOUNTYIOWA.GOV

THE LANDLORD OR AGENT MUST COMPLETE THE FOLLOWING QUESTIONS:

1. Name, title, and contact information for person completing this form:

Name, title Street, City, State, and Zip Phone Number
EMAIL: _____

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 check the box:

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 check the box: 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