

LANDLORD QUESTIONNAIRE FORM

Required if applying for rent assistance.

Jasper County General Assistance
115 N.2nd Ave. E. Newton, IA 5020 8
641-791-260 9 | Fax: 641-787-1302
Email: cmcquiston@jasperia.org

This authorizes you to release information to Jasper County General Assistance.

| | |
|-------|-----|
| Date: | RE: |
|-------|-----|

Please provide the requested information regarding the property at _____.
I release you from liability for disclosing this information even if it is confidential.

| | |
|--------------------|-------|
| Tenant's signature | Date: |
|--------------------|-------|

The following information is to be completed by the landlord only.

1. Did you rent the property at the above address to the person signing this form?
 Yes No

If No, to whom was the property rented? _____
Is there a lease agreement? Yes No If yes, state the names of all persons signing the lease.

Is there a co-signer to the lease? Yes No If yes, state the names

2. List the names of all persons living in the household.

3. List the start date of the lease _____ and end date _____

4. How much is the rent per month? _____
Deposit paid _____ Deposit owed _____
If Low Rent Housing, how much rent is billed to Low Rent Housing? _____

5. Does the rent include extra charges? (Pets, Garage, Other) _____

6. Which utilities are included in the rent? _____

7. How does the tenant pay rent? Cash Check Money order Other

8. Do you have a rental permit? _____

| | |
|----------------------|------------------------|
| Landlord's Name | Phone |
| Address | City, State, Zip |
| Landlord's Signature | Landlord Taxpayer ID # |

Date: _____