Rental Assistance Application

Application Checklist

PLEASE NOTE WE WILL NOT BE ACCEPTING INCOMPLETE APPLICATIONS

ELIGIBLE APPLICANTS WILL BE CONTACTED VIA EMAIL AND PHONE TO SET UP INTAKE. PLEASE CHECK JUNK OR SPAM AS OUR EMAILS MAY GO INTO THOSE FOLDERS.

- ☐ Proof of income received in the last 30 days for each member 18 years or older
- ☐ A copy of your signed rental agreement.
- ☐ A copy of your eviction notice or court summons
- ☐ A copy of your Social and ID
- ☐ Proposed or sample lease at unit you are moving into. (If applying for move in assistance)

Please note that we are no longer accepting applications for move-in assistance from individuals who are currently receiving housing subsidies.

KLCAS Is currently processing eviction prevention assistance of up to $3,000

Any applications submitted that owe $7,000 or more will be denied.

To return your application:

By Mail: 2316 South 6th St
Suite B
Klamath Falls, OR 97601

By Email: rentassist@klcas.org

By Fax: 541-882-3674

Rental Assistance Application

Important: **All sections must be completed in order to be considered for Rental Assistance**.

Email: _____

Date: _____

Name:_____

Current Residence: _____

_____

_____

Phone: _____

Is anyone in the household:
(check all that apply)

- ☐ HCV/Section 8 Holder
- ☐ Fleeing DV
- ☐ Pregnant
- ☐ Veteran

Have you exhausted all other available resources?

Requesting: (Check one)

Eviction Prevention

Do you have an eviction notice?

Yes No

Are you behind on rent?

If so, how much do you owe?

Monthly Rental Amount:

Deposit Assistance

Have you been approved for a unit?

☐ Yes ☐ No

Deposit amount:

Monthly rent amount:

Household Information Name	Date of Birth	SSN:	Monthly Income Amount	Income Source

Contact information for the Landlord we will be making payment to:

Name or Property Management Company:_____
Phone Number:_____ Email:_____

Please initial here if KLCAS has permission to contact your Landlord _____

*By initialing this form, you are giving KLCAS permission to speak with your landlord about your situation.

Rental Assistance Application

What is your current living situation?	Have you experienced: (Check all that apply)
☐ Renting a Room/ Apartment / House	☐ Job loss in the past 12 months.
☐ Mobile Home Space Rent	☐ Medical event resulting in loss of income?
☐ Staying with Friends/Family Temporarily	Do you have a Checking/Savings account? ☐ Yes ☐ No
☐ Hotel/Motel- ☐ With Voucher ☐ Without Voucher	Do you have any assets? ☐ Yes ☐ No
☐ Literally Homeless (In car, camping, shelter)	

Client Signature: _____

*Please note there is a back page you will need to fill out.

*Grievance Policy is available at KLCAS Office

Rental Assistance Action Plan

I can't pay my rent or deposit right now because…

If I get help from KLCAS, I could…

What steps will you take to ensure your housing stays stable if you receive our assistance?

***If you are currently fleeing domestic violence and are still in an unsafe situation please let us know the safest way to contact you.**