



APARTMENT COMPLEXES:
 PARK HOMES
 GEORGE SMITH
 SUNSET TERRACE
 LA VILLITA
 COMMERCE MANOR

BHA

Brownwood Housing Authority

P.O. Box 1647 BROWNWOOD, TEXAS 76804
 TELEPHONE: (325)646-0790
 FAX: (325) 646-7799

EXECUTIVE DIRECTOR
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MAINTENANCE
MICHAEL LANDERS - SUPERVISOR
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TENANT SCREENING VERIFICATION

DATE: _____

PLEASE RETURN BY: _____

TO: _____

Dear Sir or Madam:

Our tenant selection policy obligates us to verify certain information about all members of families applying for housing assistance. To comply with this requirement, we ask for your cooperation in supplying information on the tenant history of the family. This information will be used only in determining whether the family can be accepted for assistance by this agency.

Your prompt return of this information will be appreciated. Our fax number is 325-646-7799 if you wish to return the form by fax or you may choose to return it to our office at 1500 Terrace Dr., Brownwood, Texas 76801, between the hours of 9:00 – 4:00 Monday through Thursday. If you have any questions, you may contact the office at 325-646-0790.

Sincerely,

Brownwood Housing Authority

.....
 I authorize the release of this information to the Brownwood Housing Authority.

 Signature

 Date

NAME OF APPLICANT: _____

PREVIOUS ADDRESS: _____

INFORMATION REQUESTED:

Name of Person Verifying Information: _____

Please circle one: Are you a; current landlord previous landlord other

Dates of Applicant's: From: _____ To: _____

Rental Payment Information:

Does or Did the Applicant pay rent on time? _____
 Was the Applicant ever late on rent? _____
 How Late? _____

How Often? _____
 Did you ever have to begin or complete eviction proceedings, for non-payment of rent? _____

CARING FOR THE UNIT:

Does or Did the Tenant keep the unit clean? _____
 Has or had the tenant damaged the unit? _____
 Describe the damages: _____
 Cost of repair? _____
 How often did the damages occur? _____
 Has the tenant paid for the damages? _____
 Does this family owe you any money? _____
 If so; How Much? _____
 Will or did you keep any of the Security Deposit? _____
 Did the tenant have problems with insect infestation? _____

GENERAL

Does or did the tenant permit persons other than those on the lease to live in the unit? _____
 Does or did the tenant create any physical hazards to other residents living nearby? _____
 Did they interfere with the rights and quiet enjoyment of other residents? _____
 Has or had the tenant given you any false information? _____
 Describe: _____
 Could the tenant control his/her children? _____
 Would you re-rent to this tenant? _____
 If not; Why? _____

PREVIOUS HOUSING AUTHORITIES

Was this tenant on Earned Income Disregard while at your Authority? _____
 If yes; When? From: _____ To: _____

Signature of Previous or Current Landlord _____

Date _____