

EDEN Request for Lease Approval Form

Public reporting burden for this collection of information is estimated to average 0.08 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of its collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2577-0169), Washington D.C. 20503. Do not send this completed form to either of the above addresses.

1. Name of Housing Agency (HA) EDEN 7812 Madison Avenue Cleveland, Ohio 44102	2. Address of Unit (street address, apartment number, City, State, Zip) Street Address: Apt. #: City: State: Zip:	3. No. of Bedrooms	4. No. of Bathrooms (include ½ baths)
5. Type of property (check one) <input type="checkbox"/> Single Family Detached <input type="checkbox"/> Walk-up <input type="checkbox"/> Double/Duplex <input type="checkbox"/> High-rise <input type="checkbox"/> Manufactured Home	6. Proposed Rent - per month (this amount is not guaranteed)	7. Security Deposit	8. Year Constructed

NOTE: If there are any changes to utility payments during tenancy, the Owner & Tenant must complete new RFLA

[Eligibility Specialist ONLY - circle, initial, date] Who pays security deposit? EDEN TENANT Initials Date			
9.1	Utilities	Please indicate the party responsible for payment:	Indicate power source by checking the appropriate box
	Heating	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other:
	Water Heating	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other:
	Cooking	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other:
	Electric Lighting	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	
	Water/Sewer	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	
	Trash Collection	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	
	Heating Style	<input type="checkbox"/> Baseboard <input type="checkbox"/> Boiler	<input type="checkbox"/> Furnace <input type="checkbox"/> Radiator <input type="checkbox"/> Other:
9.2	Appliances	Please indicate the party responsible for providing:	9.3 Amenities: Please indicate provided amenities
	Range provided by:	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	Air Conditioning Yes <input type="checkbox"/> No <input type="checkbox"/> Ceiling Fan Yes <input type="checkbox"/> No <input type="checkbox"/>
	Refrigerator provided by:	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant	Microwave Yes <input type="checkbox"/> No <input type="checkbox"/> Fenced Yard Yes <input type="checkbox"/> No <input type="checkbox"/>
	Washer provided by:	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> On-Site	Others? Please list:
	Dryer provided by:	<input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> On-Site	

10. HA Determinations

- a. The HA has not screened the family's behavior or suitability for tenancy; screening is the owner's own responsibility.
- b. The HA will arrange for inspection of the unit and will notify the owner and family as to whether or not the lease and unit will be approved.

11. By signing this RFLA...

- a. The owner affirms that the unit is not in foreclosure and is not due to be sold at this time.
- b. The owner affirms that they are the legal owner and the tenant has no ownership interest in this dwelling.
- c. The owner attests that the only individuals that will reside in unit must be listed on both the lease and HAP contract.
- d. The owner understands that the unit must comply at all times with Housing Quality Standards (HQS) as deemed by HUD.
- e. The owner understands that it is illegal to charge the tenant any amount exceeding the rent amount listed on the approved lease agreement/HAP contract.
- f. The owner understands that should the assisted unit become vacant, transferred or sold, they are responsible to notify EDEN immediately in writing.
- g. The owner understands that knowingly falsifying material facts is a violation of State and Federal criminal law Rapid Rehousing Programs Only.

RAPID REHOUSING PROGRAMS ONLY:

- h. The owner understands that failure to comply with the terms and responsibilities of this program is grounds for termination of participation on EDEN subsidy.
- i. The owner understands that this is a time limited program and the tenant's portion of the rent may change without a 30-day notice.
- j. The owner understands that the amount of the security deposit may not be in excess of private market practice, or in excess of amounts charged to unassisted tenants.
- k. The owner understands that EDEN does not always pay a security deposit; however, for this program if it is paid it is on behalf of the tenant and should be returned to them according to Ohio Tenant Landlord Law upon termination of tenancy. EDEN, Inc. is not responsible for any damages or charges to this unit.

Print Name of Owner or Other Party Authorized to Execute Lease	Print Name of Tenant
Signature of Owner or Other Party Authorized to Execute Lease	Signature of Tenant Date
Phone Number	Phone Number
Alternate Number	Alternate Number
Owner Email Address	Tenant Email Address

Warning: Title 18 US Code Section 1001 states that a person is guilty of felony for knowingly and willingly making a false or fraudulent statement to any Department or Agency of the United States. State Law may also provide penalties for false or fraudulent statement.