

Rental/Mortgage Pmt Verification

Ohio Township Trustee

P.O. Box 635

Newburgh, IN 47629

812-853-8835

LANDLORD OR MORTGAGE HOLDER

Please be aware of the following items concerning the applicant for township assistance:

1. A voucher payment system is used for rent and mortgage bills due.
2. Payments are not retroactive to cover previous months.
3. The client and landlord/mortgage holder must sign the voucher.
4. Vouchers returned to this office before the end of the month will be paid directly to the landlord or mortgage holder before the end of the month.
5. Compliance - If a client or member fails to comply with the trustee guidelines, the voucher may be voided and funds withheld.

****THE LANDLORD MUST COMPLETE THIS ENTIRE FORM****

Compliance—If a client or member fails to comply with the trustee guidelines, the voucher may be voided and funds withheld.

THIS FORM MAY NOT BE COPIED, FAXED OR EMAILS

OHIO

PLEASE PROVIDE ALL OF THE FOLLOWING INFORMATION

Date: _____ Client Name: _____

Address: _____

NAMES of other persons in the household: _____

Number of Bedrooms _____

Is anyone related to the landlord? **YES or NO**

Monthly rent _____ Total Due _____ For what **MONTH** _____

If Applicable, Mortgage Account #: _____

Is this client on Section 8 housing? **YES or NO**

What date did client move in? _____

What utilities are included? _____

Is partial payment from Ohio Township Trustee acceptable without evicting/foreclosing for 30 days? YES or NO

Name of Landlord/Apartments/Mortgage Holder _____

Name to appear on Check _____

Address _____

Phone _____

I do solemnly affirm that the above information is true and correct to the best of my knowledge and behalf.

Landlord/Mortgage Holder Signature: _____

Landlord's printed name: _____

Client is to return completed form to trustee office at appointment time