



## APPLICATION FOR RENTAL HOUSING

\*\*Please complete this Application and submit all the required documents stated on the attached checklist

\*\*Disclaimer: GHC reserves its right to make any necessary changes to the Application as provided by law; Please call (671) 632-5660 for inquiries and/or assistance.

**NAME:** \_\_\_\_\_

### PERSONAL INFORMATION

**Mailing Address:** \_\_\_\_\_ **Contact Nos:** Home: \_\_\_\_\_

\_\_\_\_\_ Work: \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Mobile:** \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_ **Employer's Contact No.:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_ **Name of Landlord (if any):** \_\_\_\_\_

**Landlord's Contact No.:** \_\_\_\_\_

**Monthly Rent:** \$ \_\_\_\_\_ **Credit References:** 1. \_\_\_\_\_

2. \_\_\_\_\_

**Verification of Bank Account:** \_\_\_\_\_ **Verification of Employment:** \_\_\_\_\_

**GovGuam Clearance** (to include GPA, GWA and DPW Solid Waste Division): \_\_\_\_\_

**Are you related to a board member and/or an employee of Guam Housing Corporation?**  Yes  No

If yes, please state his or her name and position: \_\_\_\_\_

### DEMOGRAPHIC AND OTHER INFORMATION

**Head of Household's Ethnicity:**  Caucasian  Chamorro  Filipino

ROP  FSM  RMI

Other: \_\_\_\_\_

**Spouse's Ethnicity (if any):**  Caucasian  Chamorro  Filipino

ROP  FSM  RMI

Other: \_\_\_\_\_

**Are you and/or your spouse a U.S. Citizen?**  Yes  No

**Is any member of your immediate family a U.S. Citizen?**  Yes  No

If you are not a U.S. Citizen, who sponsored you for entrance into the U.S.:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contact No: \_\_\_\_\_

(Optional) **Are you a military veteran?**  Yes  No

(Optional) **Do you require special accommodations for accessibility?**  Yes  No

If yes, please state what the type accommodation(s): \_\_\_\_\_

**Have you been a party to an unlawful detainer action and/or filed for bankruptcy within the last seven (7) years?**

Yes  No If yes, please explain: \_\_\_\_\_

**Have you or any of the proposed occupant(s) ever been convicted of a felony and/or pleaded no contest to a felony charge?**  Yes  No If yes, please explain: \_\_\_\_\_

**Have you or any of the proposed occupant(s) ever been evicted and/or requested to vacate a residence and/or a rental unit?**  Yes  No If yes, please explain: \_\_\_\_\_

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\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
Date

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**DO NOT WRITE BELOW THIS LINE  
FOR OFFICIAL USE ONLY**

**APPROVED**

**DISAPPROVED**

\_\_\_\_\_  
Name of Approving Personnel

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date