



PO Box 627 \* 945 Hout Circle \* Newport, AR 72112  
Phone (870) 523-2195 \* Fax (870) 523-2232  
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**PHA CHECKLIST : ABILITY TO COMPLY WITH LEASE TERMS**

**This form is only to be completed if landlord verifications are unavailable. It is to be completed for every applicant without landlord references.**

INSTRUCTIONS: The questions in Section I are to be answered by the applicant. The questions in Section II are to be answered by the Housing Authority.

**Statement to Applicant:** We need to ask you some questions to see how you are getting along where you live now and how you will get along if you move into one of our apartments.

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION I**

**QUESTIONS FOR APPLICANT ON CARING FOR CURRENT RESIDENCE**

1. Do you care for your current room, house, apartment? [ ] YES [ ] NO If no, who helps you care for your current room, house, apartment?  
Name and Phone#: \_\_\_\_\_
2. Can you keep an apartment clean enough to avoid health or sanitation problems and conditions that contribute to insects or rodent infestations? [ ] YES [ ] NO
3. Have you damaged or destroyed anything in your current room, house or apartment?  
[ ] YES [ ] NO If yes, please explain what happened and why: \_\_\_\_\_

**MEETING FINANCIAL OBLIGATIONS, ESPECIALLY RENT**

1. Do you pay rent where you are currently living? [ ] YES [ ] NO
2. If no, do you make any regular payments (car loan, installment loan, credit card, utility bills, other: \_\_\_\_\_) [ ] YES [ ] NO
3. If you make no regular payments, how can we verify your ability to make rent payments in the future? \_\_\_\_\_
4. Do you pay your own bills at this time? [ ] YES [ ] NO If no, who currently pays your bills?  
Name and Phone#: \_\_\_\_\_

**REPORTING CHANGES IN INCOME OR FAMILY STATUS**

1. Can you report changes in income or family status? [ ] YES [ ] NO If no, please explain why not: \_\_\_\_\_
2. Can you respond to notices that are mailed to you at your home? [ ] YES [ ] NO If no, how should we get in touch with you? \_\_\_\_\_



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**FOLLOWING APPROPRIATE RULES**

- 1. Do you have a lease where you live now? [ ] YES [ ] NO
- 2. If yes, with whom is your current lease?  
Name and Phone #: \_\_\_\_\_
- 3. If no, whom may we contact to verify your responsibilities of occupancy?  
Name and Phone #: \_\_\_\_\_
- 4. If no, are there rules of tenancy where you now live? [ ] YES [ ] NO
- 5. If there are such rules where you now live, do you have trouble following them? [ ] YES [ ] NO  
If yes, please explain: \_\_\_\_\_

**AVOIDING DISTURBING THE NEIGHBORS**

- 1. Are there neighbors where you presently live? [ ] YES [ ] NO
- 2. Do you have any trouble getting along with your neighbors where you live now? [ ] YES [ ] NO  
If yes, please explain: \_\_\_\_\_
- 3. Have you or any family members ever engaged in physical violence towards your neighbors, landlord or landlord’s staff? [ ] YES [ ] NO if yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4. Have you or any family members ever engaged in verbal abuse (threats, swearing, etc) towards your neighbors, housing provider, or staff? [ ] YES [ ] NO If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AVOIDING CRIMINAL ACTIVITY**

- 1. Have you or any family members listed on this application been involved in any criminal activity that might adversely affect the health, safety, or welfare of PHA tenants if it happened at the PHA? [ ] YES [ ] NO

Examples of Criminal Activity include but are not limited to:

- 1. Homicide/Murder
- 2. Rape or Child Molesting
- 3. Burglary/Robbery/Larceny
- 4. Threats or Harassment
- 5. Destruct. Of Prop./Vandalism
- 6. Assault or Fighting
- 7. Drug Trafficking/Use/Possession
- 8. Child Abuse/Domestic Abuse
- 9. Public Intox/Drunk & Disorderly
- 10. Receiving Stolen Goods
- 11. Fraud
- 12. Prostitution
- 13. Disorderly Conduct



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- 2. Can and will you avoid being involved in any criminal activity in the PHA apartment?  
 YES  NO - PHA will also be checking with the police for any history of criminal activity.

**OTHER LEASE COMPLIANCE ISSUES**

- 1. Have there been instances when you have not complied with an occupancy agreement or lease, or have had trouble doing so?  YES  NO  
If yes, please explain: \_\_\_\_\_
- 2. Whom should we contact to verify your ability to comply with our lease?  
Name and phone #: \_\_\_\_\_

**SECTION II**

**QUESTIONS TO BE COMPLETED BY THE PUBLIC HOUSING AUTHORITY**

- 1. Did the applicant exhibit any behavior that might cause a problem with lease compliance if the applicant were admitted?  YES  NO  
If yes, describe behavior in detail: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2. Did the applicant engage in any verbal abuse, threats, or swearing during the application process?  YES  NO  
If yes, please describe the behavior and what triggered it: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the application interview and subsequent verifications demonstrate that the applicant is currently complying with rules and responsibilities comparable to the PHA's lease, no further documentation of ability to comply with lease terms is needed.

If a friend or family member is presently assisting the applicant with cleaning, personal finances, rule compliance, avoiding disturbances, or avoiding criminal activity, will that assistance be continued if the applicant is admitted to the PHA? Is the person providing the assistance (or alternate) prepared to continue to provide such assistance?

If applicant is receiving assistance with activities described above from a social service or government agency, is the agency prepared to continue to provide such assistance?

