



Lynchburg Covenant Fellowship  
412 Madison Street, P.O. Box 6016, Lynchburg, VA 24505  
Office Number: 434.847.9059 TTY: 1.800.828.1120 VA: 711

Applications for housing with Lynchburg Covenant Fellowship, Inc. will be accepted on Tuesdays from 9AM to 11AM and 2PM to 4PM at 412 Madison Street, Lynchburg, VA 24504.

Welcome to the application process for Lynchburg Covenant Fellowship's housing programs. To begin your application, please bring the following information with you when you apply. If you do not have all applicable information when you come in, we will ask that you return during application hours with all the required information. The application process will not begin unless you have all the information listed below. If you have questions during this process, please contact our office at 434.847.9059. By using the checklist below, you will ensure that you have all of the information necessary to apply.

*All COMPLETED applications will be processed according to date/time order received.*

Original Social Security Cards for all individuals who will be living in the household. (If you have applied for replacement cards, please bring the temporary printout from the Social Security Administration. We must have the cards before you can move into an apartment.)

Original PAPER Birth Certificates for all individuals who will be living in the apartment. (Original Birth Certificates/records are required for all minors. We can also accept your Driver's License/State Identification Card (18 or older ONLY) or Hospital Issued Birth Record.)

A State Issued Photo Identification Card for all adults.

All addresses where you have lived, in exact order, for the past three to five years, along with the names, addresses, and telephone numbers of the Landlord for each address. (If you stayed with a family member or friend who rented, we still need the information for their landlord whether the landlord was aware of your presence or not.) Please use the attached worksheet.

The names, home addresses and telephone numbers of five Personal References, with no more than two family members, who have known you for at least one year on a personal level. (Please do not list multiple person who live in the same household.) Please use the attached worksheet.

Your current employer information (if any), including name, address, phone number and supervisor's name.

A copy of your Separation Agreement or Divorce Papers. (If applicable.)

One of our staff members will work with you to complete the application package, and make you aware of any additional information or items required, and what to expect as the process proceeds. All COMPLETED applications will be processed in a date and time order as to when they were received.



We do NOT provide emergency housing.



**PERSONAL REFERENCES**

Please provide the following information for five (5) individuals that have personally known you for one (1) year or more. Do not give more than 2 family members, or two (2) people residing in the same household. We need ALL of the information listed, including a *full* address!

**Applicant's Name:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

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**Reference #1 Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_ **Best Time to Reach:** \_\_\_\_\_

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**Reference #2 Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_ **Best Time to Reach:** \_\_\_\_\_

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**Reference #3 Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_ **Best Time to Reach:** \_\_\_\_\_

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**Reference #4 Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_ **Best Time to Reach:** \_\_\_\_\_

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**Reference #5 Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_ **Best Time to Reach:** \_\_\_\_\_

## RENTAL AND RESIDENCE HISTORY

Please provide the following information, from the most recent; regarding ALL places you have lived for the past three to five (3-5) years. If you have lived with another family member or friend, we will still need that person's landlord/rental information. Attach an additional sheet if necessary.

Current Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

How Long at This Address? \_\_\_\_\_ Rental Amount: \_\_\_\_\_ Is Notice Required? \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

If Staying at Another's Residence, Whose Name is on Lease? \_\_\_\_\_

What is This Person's Relationship to You? \_\_\_\_\_

Is his/her Landlord Aware of Your Presence? \_\_\_\_\_ Is Any Notice Required? \_\_\_\_\_

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Past Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Office Address: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

If Staying at Another's Residence, Whose Name is on Lease? \_\_\_\_\_

What is This Person's Relationship to You? \_\_\_\_\_

Rental Amount: \_\_\_\_\_ Was his/her Landlord Aware of Your Presence? \_\_\_\_\_

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Past Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Office Address: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

If Staying at Another's Residence, Whose Name is on Lease? \_\_\_\_\_

What is This Person's Relationship to You? \_\_\_\_\_

Rental Amount: \_\_\_\_\_ Was his/her Landlord Aware of Your Presence? \_\_\_\_\_

Past Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Office Address: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

If Staying at Another's Residence, Whose Name is on Lease? \_\_\_\_\_

What is This Person's Relationship to You? \_\_\_\_\_

Rental Amount: \_\_\_\_\_ Was his/her Landlord Aware of Your Presence? \_\_\_\_\_

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Past Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Office Address: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

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What is This Person's Relationship to You? \_\_\_\_\_

Rental Amount: \_\_\_\_\_ Was his/her Landlord Aware of Your Presence? \_\_\_\_\_

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Past Residence: \_\_\_\_\_

Current Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Office Address: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Do You Owe Money? \_\_\_\_\_ How Much? \_\_\_\_\_

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