



RENTAL DEPOSIT GUARANTEE PROGRAM
 Chaffee County Office of Housing
 PO Box 699, Salida, CO 81201
<http://chaffeecounty.org/housing>

Chaffee County’s RENTAL DEPOSIT GUARANTEE PROGRAM (RDGP) offers security deposit assistance to residents of Chaffee County who are seeking to enter a new rental housing lease agreement. Approved applicants receive assistance (in an amount equal to the rental security deposit, not to exceed \$1,500) in the form of a PROMISSORY NOTE (*not cash*) to the landlord, and an interest-free LOAN to the applicant. RDGP assistance is intended to reduce the upfront costs associated with a new rental housing lease agreement.

INCOME ELIGIBILITY GUIDELINES

RDGP assistance is available to Chaffee County residents who earn no more than the Area Median Income:

Applicant’s Household Size	1 person	2 people	3 people	4 people	5 people	6 people
Maximum Annual Income	\$50,000	\$57,100	\$64,200	\$71,300	\$77,100	\$82,800

In order to be eligible for the RENTAL DEPOSIT GUARANTEE PROGRAM, the applicant’s household must meet the income eligibility guidelines above, be able to maintain the monthly rental fee on the unit, be able to repay the RDGP loan within up to 12 months (not to exceed the initial term of the lease), never have defaulted on a prior RDGP loan, and be able to provide all of the following:

- an accurate, complete and legible application;
- documentation of all income and expenses;
- positive references from previous landlords;
- a written legal lease from the new landlord;
- a signed RDGP landlord form (stating that the new landlord understands the RDGP and is willing to participate in the program knowing that they will not receive cash upfront).

Applicants may be denied if:

- they do not submit an accurate, complete and legible application with the required supporting documentation;
- they do not meet the income eligibility guidelines;
- the Office of Housing is unable to verify their employment or income;
- it is determined that they cannot afford the rental unit;
- they have a prior history of damaging rental housing;
- they have consistently failed to pay rent in the past;
- they have failed to pay and/or defaulted on a prior RDGP loan.

The RDGP is not an emergency assistance program; the application process may require 10 or more business days to complete, beginning the date a completed application, with supporting documentation, is received. If you have any questions, please call the RENTAL DEPOSIT GUARANTEE PROGRAM at (719) 626-1451.

Completed applications with supporting documentation may be scanned and emailed to RDGP@chaffeecounty.org, or mailed via USPS to:

Chaffee County Office of Housing
 ATTN: RDGP
 PO Box 699, Salida, CO 81201

RENTAL DEPOSIT GUARANTEE PROGRAM APPLICATION

Applicant: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Telephone: _____ Cell Landline

Email Address: _____

Marital Status: Single; Married; Separated; Divorced; Widowed

CURRENT RESIDENCE

Renting; Living w/ Family or Friends; Homeless; Own Home; Other: _____

Address of Current Residence: _____

City: _____ State: _____ Zip: _____

Current Landlord: _____ Landlord's Phone: _____

How Long at Current Residence: _____ Current Monthly Rent: \$_____

Rent Includes: Heat; Hot Water; Electricity; Cooking Gas; Number of Bedrooms: _____

Reason for Leaving Current Residence: Eviction; Foreclosure; Other: _____

RESIDENTIAL HISTORY

Previous Address: _____

City: _____ State: _____ Zip: _____

Landlord: _____ Landlord's Phone: _____

How Long at This Address: _____ Reason for Leaving: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Landlord: _____ Landlord's Phone: _____

How Long at This Address: _____ Reason for Leaving: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Landlord: _____ Landlord's Phone: _____

How Long at This Address: _____ Reason for Leaving: _____

NEW RENTAL INFORMATION; you're applying for RDGP assistance with this rental unit:

New Address: _____ City: _____

State: _____ Zip: _____ New Landlord: _____ Landlord's Phone: _____

Rent Includes: Heat; Hot Water; Electricity; Cooking Gas; Number of Bedrooms: _____ Monthly Rent: \$ _____

Amount of Security Deposit: \$ _____ Anticipated Move-In Date: _____ Length of Lease: _____

HOUSEHOLD INFO & INCOME WORKSHEET

Please list the applicant first, followed by every person who will be living with the applicant at the new rental unit (i.e., "household members").

Please list the total monthly income for each household member; include all sources of income (e.g., wages, tips, public benefits like Cash Assistance, TANF, SNAP, and WIC benefits, Social Security benefits, Unemployment benefits, etc).

For each person that receives income, please attach records of all income from the past three months (e.g., pay stubs, Social Security Statements, etc).

Full Name	Birthdate	Gender	Veteran	Total Monthly Income	Unemployed
			<input type="checkbox"/>		<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>
Household's Total Monthly Income:				\$	

HOUSEHOLD EXPENSES WORKSHEET

Please list all regular monthly expenses. For the HOUSING section, list estimated expenses for the new rental unit, not the residence you're leaving. Fill in all blanks; put "Ø" or "N/A" if the question does not apply to you.

HOUSING

Rent: _____

Utilities (e.g., Electric, Gas, Internet, Phone, etc);
List each, and the estimated monthly bill:

Rental Insurance: _____

FOOD & HOUSEHOLD

Food: _____

Non-Food Grocery: _____

Laundry: _____

Diapers: _____

Childcare: _____

TRANSPORTATION

Auto Payment(s): _____

Fuel: _____

Auto Insurance: _____

PERSONAL

Doctor/Dentist: _____

Medications: _____

Meals Out/Delivered: _____

Loan Payment(s): _____

Credit Card Payment(s): _____

Rent-to-Own: _____

Other: _____

TOTAL MONTHLY EXPENSES: _____

Do you receive TANF, SNAP, WIC, and/or other public assistance? _____

If yes, how much? _____

APPLICANT'S AUTHORIZATION TO FURNISH INFORMATION

I/We authorize the release of records, documents, or other information from any person(s) or organization(s), including but not limited to: current/prior employer, current/prior landlord, financial institution, medical provider, professional provider and service provider, concerning my/our circumstances to the Chaffee County Office of Housing. I/We further authorize all federal, state and local agencies, such as the Internal Revenue Service, Social Security Administration, U.S. Department of Veterans Affairs, and state/local Department of Human Services, to release records, documents, or other information to the Chaffee County Office of Housing. I/We understand that the Chaffee County Office of Housing will use said information for the sole purpose of reviewing eligibility under the RDGP and this authorization shall be valid immediately and expires one year from the date below.

I/We affirm that I/we have examined this application and accompanying documentation, and to the best of my/our knowledge and belief, they are true, correct, and complete.

APPLICANT'S SIGNATURE: _____ DATE: _____