



HOUSING AUTHORITY of the County of Butte

(530) 895-4474

FAX (530) 894-8738

TDD/TTY (800) 735-2929

(800) 564-2999 Butte County Only

WEBSITE: www.butte-housing.com

2039 Forest Avenue • Chico, CA 95928

New Participant

PRE-LEASE UNIT ELIGIBILITY WORKSHEET

Date: _____

Client Name: _____ Phone #: _____

New Unit Address: _____
(Street) (Apt. No.) (City) (Zip)

Amount of Monthly Rent Requested by Landlord \$ _____ Number of Bedrooms _____

Check one box: House Apartment Duplex Mobile/Manufactured Home

Landlord Name: _____

Landlord Phone Numbers: (____) _____ (____) _____ (____) _____
Home Work Cell

Please ask your prospective landlord to help you record the following information concerning the unit that you wish to lease:

- UTILITIES: Does unit have its own meter? Yes No
- A) Heating: Gas Landlord pays
 Electric Tenant pays
 Propane Other _____
- B) Cooking: Gas Landlord pays
 Electric Tenant pays
 Propane Other _____
- C) Water Heater: Gas Landlord pays Common
 Electric Tenant pays Individual
 Propane Other _____
- D) Cooling System Central A/C Landlord pays
 Wall A/C Tenant pays
 Swamp Cooler Other _____
- E) Water City Landlord pays
 Well Tenant pays
If Well, electricity hooked to what unit? _____
- F) Sewer Bill Landlord pays Tenant pays
- G) Trash Bill Landlord pays Tenant pays
- H) Stove Landlord provides Tenant provides
- I) Refrigerator Landlord provides Tenant provides

Return this worksheet to the Housing Authority immediately. Please leave a phone number in the upper right hand corner so that we may reach you and let you know if this is an eligible unit for your family. We will contact you with a decision within 72 hours of submission of this form.

PROCESSED BY _____



The Housing Authority is an equal opportunity employer and housing provider.

