



STRENGTHENING COMMUNITIES
THROUGH SHARED HOUSING

Application

Home Provider

HomeShare Ulster County currently serves the northern region of Ulster County including the towns of Woodstock, Saugerties, Shandaken, Olive, Hurley & Ulster, as well as our new area City of Kingston. Expansion further into the county depends on the availability of housing, so if you're interested, please let us know.

THIS INITIAL APPLICATION WILL BE FOLLOWED BY A PERSONAL INTAKE INTERVIEW. **PLEASE PRINT CLEARLY**

First Name: _____ **Middle Name:** _____ **Last Name:** _____

HOMESHARE ADDRESS:

Address Line 1: _____ City: _____
Address Line 2: _____ State: _____ Zip Code: _____

MAILING ADDRESS Same as Above

Address Line 1: _____ City: _____
Address Line 2: _____ State: _____ Zip Code: _____

Email: _____ **Phone:** _____ Cell Home Work

Secondary Phone: _____ Cell Home Work

PREFERRED METHOD OF CONTACT: Email Call Text **BEST TIME TO CONTACT YOU:** _____

Location: Woodstock Kingston Saugerties Hurley Olive Town of Ulster Shandaken Other
.....

Property Details: Kind of space you wish to offer a home sharer? room in house separate dwelling or separate property?

Do you Rent or Own the space? If rented, can you get written permission from your landlord to home share? Yes No

Approximate square footage of entire house: _____ **of the offered space:** _____

Bath: private shared **Kitchen:** private shared **Bedroom:** furnished unfurnished

Number of people in household

(including yourself if applicable): # Of Adults _____ # Of Seniors _____ # Of Children _____

Estimated rent you are asking: \$ _____ with utilities without utilities with tasks without tasks

Is the property rental ready?? _____ Not Sure

I am looking for help with the following services in exchange for decreased rent:

- Gardening Yard work Light housekeeping Snow shoveling Driving Pet care Errands Meal preparation
- Night presence Grocery shopping Computer help Other

Estimated hours of service per week: _____

The general guideline that we advise is no more than 10 hours/week of neighborly exchange tasks

Do you have pets? No Yes (Please describe): _____

Transportation: I can drive I cannot drive I have a car I do not have a car The HomeShare is near a bus line

HomeShare Ulster County welcomes ALL applicants and does not discriminate in our services.

**The following information is for reporting and statistical purposes; our funders ask that we collect the following demographics.*

Age: _____ **Gender:** She/Her He/Him They/Them Other: _____

Do you have a disability? No Yes **Do you require any accommodations?** Yes No

Please Explain: _____

Ethnicity/ Race: Hispanic Black/African American American Indian/Alaskan Native White
 Asian Native Hawaiian/Pacific Islander Other: _____

Please tell us about yourself, your interests, hobbies, personality.

What you are seeking in a housemate?

How did you hear about HomeShare Ulster County?

Newsletter Radio Newspaper Social Media Friend/Word of Mouth Informational Session Tabling event Presentation

Were you referred by another program? No Yes (*What organization and who?*) _____



Reference Request Form

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Applicant's Name: _____ Date: _____

All references should be people who have known you for at least one year. Together, the references should cover a span of at least 5 years to the present. We accept references from past or present roommates, landlords, employers or co-workers. NOT ACCEPTED as references are family members, friends, romantic partners or employees of Family of Woodstock, Inc. It is essential that you notify your references that someone from HomeShare Ulster County will be calling them. Please realize that if you have trouble reaching them, we will also have the same trouble and your application will be delayed.

I hereby give permission for HomeShare Ulster County to have my references checked from the contacts listed below:

Signature of Applicant _____ Date _____

.....
REFERENCE 1 |

Name: _____ Daytime phone: _____

City/ State: _____ Email: _____

How long have they known you? _____

How do they know you? _____

REFERENCE 2 |

Name: _____ Daytime phone: _____

City/ State: _____ Email: _____

How long have they known you? _____

How do they know you? _____

REFERENCE 3 |

Name: _____ Daytime phone: _____

City/ State: _____ Email: _____

How long have they known you? _____

How do they know you? _____



Background Check Authorization

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PRINT NAME – First, Middle, Last			
Former Name(s) and Dates Used			
Current Address – Street, City, State, Zip			
Since (date/year)			
Social Security Number			
Date of Birth			
Phone Number(s)			
Driver’s License Number:		Issuing State:	

Our background checks are conducted through the American Apartment Owners Association www.american-apartment-owners-association.org. AAOA strictly adheres to all security measures as set forth by the credit bureaus and the Fair Credit Reporting Act. The background checks performed include credit check, credit score, previous address/tenant history, tele check verification, eviction history (state specific), criminal (nationwide), sex offender, terrorist and federal search. This information is used for the HomeShare Ulster County program only and will comply with all HIPAA regulations.

The information contained in this application is correct to the best of my knowledge. I hereby authorize HomeShare Ulster County and Family of Woodstock, Inc. and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative report to be generated for my application to the HomeShare Ulster County program only. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residencies; employment history; education background; character references; civil and criminal history records from any criminal justice agency in any or all federal, state, and county jurisdictions; driving records; birth certificates; and any other public records. I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to HomeShare Ulster County and Family of Woodstock, Inc. or its agents. I hereby release HomeShare Ulster County and Family of Woodstock, Inc. and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____

PLEASE RETURN BY EMAIL, MAIL, OR HAND DELIVER TO OUR APPLICATION PROCESSING OFFICE

Home Share Ulster County
31 Albany Ave
Kingston NY 12401
homeshareuc@fowinc.org

HSUC#:	Match Coordinator:
Date Received:	Intake Area: <input type="checkbox"/> Woodstock <input type="checkbox"/> Kingston