

Summit County Veterans Service Commission
1060 E. Waterloo Road, Akron OH 43306
Phone: (330) 643-2830 Fax: (330) 785-3623
www.vscsummitoh.us

PROPERTY OWNER STATEMENT

Tenant:

Name: _____

*****All information below this line should only be completed by the property owner*****

Address: _____

OCCUPANTS:

Property Owner / Owner:

Name: _____

Address: _____

Phone: _____

\$ _____ \$ _____ _____
Monthly Rent Amt Last Paid Date Last Paid

\$ _____ \$ _____ \$ _____
Total Amt Past Due Amt Need to Avoid Eviction** Security Deposit

- The tenant / occupants have been renting since: _____
- Is the property owner or rental property management a relative? Y N
Relation: _____
- Who does tenant pay rent to? __property owner__ rental property management
- Who owns the rental property? _____
- **If rent is past due, I agree not to evict the tenant(s), provided all past due rent is paid in full by the Veterans Service Commission.
_____. (Landlord/Authorized Agent Signature)

Signature: _____ Date _____

Assistance approved paid directly to the property owner. Application for assistance does not guarantee approval for payment.