



HSH Permanent Housing Application

Form H: Third Party Rent Payment/Modified Payment Agreement

I, (printed name), _____, DOB _____, have been informed that participation in a Third Party Rent Payment Program or Modified Payment Program is a requirement for placement in the unit to which I am being referred, and I will not be able to sign a lease without agreeing to pay rent through a program as identified below.

For Legacy Direct Access to Housing (DAH) units:

Check one:

- I will submit my rent payment via the Third Party Rent Payment Program managed by Lutheran Social Services. See attached page for methods of payment.
- I will submit my rent payment via the Third Party Rent Payment Program managed by Conard House (applicable to the Plaza Apartments).
- I **already** have a Payee/Money Management service in place that has the ability, and will be instructed by me, to send the exact monthly rent amount to Property Management should I be offered tenancy.

Name of Payee/Money Management Service: _____

Contact Person: _____

Phone Number: _____ Fax Number: _____

For Legacy HSH Master-Leased units:

Check one:

- I will submit my rent payment via the Modified Payment Program managed by Tenderloin Housing Clinic (THC). If I am a CAAP recipient, my benefits will be directed to THC for rent payment.
- I will submit my rent payment via the Third Party Rent Payment Program managed by Conard House (applicable to the McAllister Hotel and the Aranda Hotel).

Client Signature: _____ Date: _____

Housing Navigator Signature: _____

Date: _____