



HÄMEENLINNAN ASUNNOT OY

APPLICATION FOR HOUSING

HÄMEENLINNAN ASUNNOT

| | |
|--------------------|------|
| Application number | Date |
|--------------------|------|

APPLICANT

| | | | | |
|---|----------|---|----------|----------------------|
| Surname and previous names | | First names | | Phone number |
| Social security number (or date of birth) | Hometown | Occupation | Employer | Employment since |
| Current address | | Postal code | City | Phone number to work |
| E-mail address | | Marital status <input type="checkbox"/> single <input type="checkbox"/> living together <input type="checkbox"/> married <input type="checkbox"/> living separately <input type="checkbox"/> divorced <input type="checkbox"/> widowed | | |

ACCOMPANYING APPLICANT

| | | | | |
|--|----------|-------------|-------------|--------------|
| Surname and previous names | | First names | | |
| Social security number (or date of birth) | Hometown | Since | Nationality | |
| Living together with other applicant <input type="checkbox"/> Yes | | Occupation | Employer | |
| Current address | | Postal code | City | Phone number |

OTHER PERSONS INCLUDED IN HOUSEHOLD

| | | | |
|------|---|---|---|
| Name | Social security number (or date of birth) | Name | Social security number (or date of birth) |
| Name | Social security number (or date of birth) | With unborn child <input type="checkbox"/> Yes (Add a certificate of pregnancy to appendices.) | Expected date of delivery |

continues on other side

APARTMENT BEING APPLIED FOR

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|--|--|
| District | Maximum rent |
| Address (when applied to a specific address) | Minimum-maximum area (m ²) |
| Type of building <input type="checkbox"/> High rise <input type="checkbox"/> Row house <input type="checkbox"/> Any | Number of rooms room(s)+kitchen or rooms+kitchen <input type="checkbox"/> Any |

DETAILS OF CURRENT DWELLING

| | | | | |
|--|--|------------------------------|----------------|-----------------------|
| Type of building | Condition of apartment <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | Floor area (m ²) | Rent €/month | Number of residents |
| Ownership status of current dwelling <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Subtenant <input type="checkbox"/> Living with parents <input type="checkbox"/> Other, what? | | | Living started | Housing needed (date) |
| Need for housing <input type="checkbox"/> Homeless, since? <input type="checkbox"/> Required to move, why? <input type="checkbox"/> New job in town <input type="checkbox"/> Other, what? | | | | |
| Further information (Appendices can be used if needed.) | | | | |

APPENDICES FOR APPLICANT

Following appendices must be included in the application. Appendices should be delivered within a week from delivering the application. Appendices should be copies of original papers. Original documents will not be returned. Application is valid for 3 months. Applicants need to take care of renewing the application and updating appendices themselves.

Salary certificate or other certificate of monthly income
 Tax certificate
 Certificate of student status (from students only)
 Other appendices (certificate of pregnancy, certificate of a pending divorce, eviction order ect.)

I hereby assure the information provided by me to be correct and I authorize Hämeenlinnan Asunnot Oy to review my credit report. Information given in this form is entered into Hämeenlinnan Asunnot Oy applicant register for applying a rental apartment. Information will not be used for direct marketing nor handed over to other registers. Registered information can be viewed at Hämeenlinnan Asunnot Oy's office and online at our website www.hmlasunnot.fi

SIGNATURES AND DATE

| | | |
|----------------|----------------------|-------------------------|
| Time and place | Applicants signature | Co-applicants signature |
|----------------|----------------------|-------------------------|