



HOUSING AUTHORITY OF THE CITY OF NORTH LAS VEGAS

1632 Yale Street

North Las Vegas, Nevada 89030

Telephone: (702) 649-2451 FAX: (702) 649-8093 TDD: (702) 649-0085

PRE-LEASE UNIT ELIGIBILITY WORKSHEET

Client Name: _____ I can be reached at _____
(phone number)

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

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

1) UTILITIES:

A) Heating:	Gas	<input type="checkbox"/>	Landlord pays	<input type="checkbox"/>
	Electric	<input type="checkbox"/>	Tenant pays	<input type="checkbox"/>
	Other _____	<input type="checkbox"/>		

B) Cooking:	Gas	<input type="checkbox"/>	Landlord pays	<input type="checkbox"/>
	Electric	<input type="checkbox"/>	Tenant pays	<input type="checkbox"/>
	Other _____	<input type="checkbox"/>		

C) Water Heater:	Gas	<input type="checkbox"/>	Landlord pays	<input type="checkbox"/>
	Electric	<input type="checkbox"/>	Tenant pays	<input type="checkbox"/>
	Other _____	<input type="checkbox"/>		

D) Water Bill			Landlord pays	<input type="checkbox"/>
			Tenant pays	<input type="checkbox"/>

E) Sewer Bill			Landlord pays	<input type="checkbox"/>
			Tenant pays	<input type="checkbox"/>

F) Trash Bill			Landlord pays	<input type="checkbox"/>
			Tenant pays	<input type="checkbox"/>

G) Stove/Refrigerator			Landlord provides	<input type="checkbox"/>
			Tenant provides	<input type="checkbox"/>

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

3) Check one box: House Apt. Semi-Detached (Side by Side)

4) Check one box: North Las Vegas Las Vegas (City) Clark County

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.