

HONKAJOKI MUNICIPALITY  
 Housing Office  
 Porhontie 5  
 38950 Honkajoki  
 asuntihakemus@honkajoki.fi

## RESIDENTIAL RENTAL APPLICATION

- Rental apartment  
 Rental apartment change



Application received
Receiver and date

### APPLICANT'S PERSONAL INFORMATION

Surname and Former Names (with block letters)	First Names (underline the one you're called with)	Female <input type="checkbox"/>	Male <input type="checkbox"/>
Identity Number	Dwelling Place	Start Date	
Current Address	Postal Code and Office	Phone Number to Home / Work	
Title or Occupation	Employer / Educational Establishment	Start Date	E-mail Address
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Cohabiting <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widow			

### CO-APPLICANT'S PERSONAL INFORMATION

Surname and Former Names (with block letters)	First Names (underline the one you're called with)	Female <input type="checkbox"/>	Male <input type="checkbox"/>
Identity Number	Dwelling Place	Start Date	
Title or Occupation	Employer / Educational Establishment	Phone Number to Home / Work	
Living with the applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Address	Postal Code and Office	

### OTHER PERSONS INCLUDED IN THE HOUSEHOLD

Proof of pregnancy   Expected Date

Name	Identity Number

### APPLIED APARTMENT

Apartment <input type="checkbox"/> Regular Apartment <input type="checkbox"/> Barrier-free Apartment <input type="checkbox"/> Senior Apartment <input type="checkbox"/> Other, what:	
Type of Building _____ rooms + _____ kitchenette/kitchen   or   _____ rooms + _____ kitchenette/kitchen <input type="checkbox"/> Any	Size of Apartment _____ m <sup>2</sup> - _____ m <sup>2</sup>
Maximum Rent _____ € / month	
Other Wishes	

# NEED FOR HOUSING

## 1. MOVING TO THE AREA BECAUSE OF RECEIVED EMPLOYMENT OR OTHER REASON

Employer	Work Begins
Office Address	
Other reason, what	

## 2. HOMELESSNESS

<input type="checkbox"/> Homeless	Start Date	Current Dwelling
<input type="checkbox"/> Apartment uninhabitable	Reason (a Report from e.g. Health or Building Inspector Required)	

## 3. REQUIRED TO MOVE FROM CURRENT DWELLING

<input type="checkbox"/> Court issued eviction order	must move at the latest	
<input type="checkbox"/> Landlord terminated	must move at the latest	
<input type="checkbox"/> Apartment will be demolished/renovated	must move at the latest	
<input type="checkbox"/> Divorce / termination of cohabitation pending	must move at the latest	
Reason for Eviction / Termination of the Rental Agreement		

## 4. OTHER REASONS FOR THE NEED OF AN APARTMENT

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## DETAILS OF THE CURRENT APARTMENT

Housing Arrangement	Number of Residents	Number of Rooms Rooms + Kitchenette/Kitchen			Floor Area, m <sup>2</sup>
Building Type	<input type="checkbox"/> Block of Flats	<input type="checkbox"/> Terraced House	<input type="checkbox"/> Detached House	<input type="checkbox"/> Other, what	
Accessories	<input type="checkbox"/> Sewer	<input type="checkbox"/> Running Water	<input type="checkbox"/> Warm Water	<input type="checkbox"/> Central / Electric Heating	
	<input type="checkbox"/> Indoor Toilet	<input type="checkbox"/> Shower or Bathroom	<input type="checkbox"/> Balcony	<input type="checkbox"/> Dwelling-specific Sauna	
Apartments Condition	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Poor	
Ownership Status	<input type="checkbox"/> Owner	<input type="checkbox"/> Principal Tenant	<input type="checkbox"/> Subtenant	<input type="checkbox"/> Living with Parents	
	<input type="checkbox"/> Company Housing	<input type="checkbox"/> Dormitory	<input type="checkbox"/> Dwelling with Shared Facilities	<input type="checkbox"/> Other, what	
	Rent/Maintenance Charge	€/ Month	Year when moved in		

**INCOME AND FINANCIAL STATUS**

Official's notes

	Applicant	Co-Applicant	Other Persons	In Total	Deductions	Accountable Wealth
<b>Current Monthly Income before Taxes, €</b>						
<b>Current Value of Property, €</b>						

**ACCOUNT ON OWNED DWELLING/REAL ESTATE**

Does the applicant, their spouse or other future resident own or have they owned shares in a condominium, a building of residence, or other real estate, or a share of them?

No   
  Yes   
  Condominium   
  Detached House   
  Other Building of Residence   
  Other Real Estate

Name of the Owner	Real Estate's Name and Registration Number / Name of the Condominium		
The Location of the Real Estate / Condominium	Purchase Date ___ / ___ 20__	Real Estate's Surface Area _____ m <sup>2</sup> / ha	Floor Area _____ m <sup>2</sup>
Current Usage			
<input type="checkbox"/> Applicant's Current Residence <input type="checkbox"/> Rented <input type="checkbox"/> Leisure Home <input type="checkbox"/> Other, what			
Condominium's / Real Estate's Current Selling Value or Transfer Price €.	Has the Owner Alienated the Apartment? When?		
	<input type="checkbox"/> Yes    / ___ 20__ <input type="checkbox"/> No		
Has a Government Loan been granted for the purchasing or building of the apartment?			
<input type="checkbox"/> No <input type="checkbox"/> Yes    / ___ 20__    Amount    €.    Repayment Date    ___ / ___ 20__			

SHOULD THE REPORTED CIRCUMSTANCES CHANGE, THE APPLICATION MUST BE BROUGHT UP TO DATE  
 THE APPLICATION IS VALID FOR 6 MONTHS FROM THE DAY IT IS SUBMITTED/RENEWED.  
 INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

IN THIS AGREEMENT I/WE AGREE THAT THE CREDIT INFORMATION WILL BE VERIFIED.

I/we guarantee that the information is correct

Date and Place		
Signature / signatures		
	Print Name	Print Name

The tenancy may be terminated immediately if the application is found to entail false information or, if other people than those said in the application will move into the apartment.

**APPLICATION ATTACHMENTS**

<input type="checkbox"/>	Latest income-tax cards from every future resident over the age of 18
<input type="checkbox"/>	Income Information <ul style="list-style-type: none"> <li>- From an employed: A salary certificate from the employer or the latest payslip</li> <li>- From a person moving in to the municipality:                     <ul style="list-style-type: none"> <li>- A verification of the starting employment from the future employer</li> </ul> </li> <li>- From a pensioner: A report of the amount of gross pension</li> <li>- From an unemployed: A notification from the latest paid daily allowance</li> <li>- From an entrepreneur: The latest profit and loss statement, balance and income statement</li> <li>- From someone on maternity, nursing or study leave or leave of absence:                     <ul style="list-style-type: none"> <li>- A salary certificate from the time before leaving work</li> </ul> </li> </ul>
<input type="checkbox"/>	Proof of Deductions from the Income <ul style="list-style-type: none"> <li>- Student Loans Guaranteed by the State</li> <li>- Alimony for a Child</li> <li>- Shift Work Supplements</li> </ul>
<input type="checkbox"/>	Wealth, if one of the movers has full or partial possession of an apartment, real estate or other property 1) 2) <ul style="list-style-type: none"> <li>- Selling Value Certificate</li> <li>- A Copy of the Deed of Transfer</li> <li>- Creditors' testimonies of the debts directed at said property</li> </ul>

Depending on the applicant's life situation:

<input type="checkbox"/>	From over 18 year old student: A school certificate, which shows the estimated graduation date
<input type="checkbox"/>	From someone in military service: Testimonial
<input type="checkbox"/>	Proof of Pregnancy
<input type="checkbox"/>	Divorce Certificate / A Proof of the Pending Divorce
<input type="checkbox"/>	Termination / Eviction / Temporary Rental Contact 3)
<input type="checkbox"/>	Health Inspector's Statement / Demolition Decision
<input type="checkbox"/>	Medical Certificate, if the need for housing is influenced by medical reasons
<input type="checkbox"/>	From an Immigrant: Proof of a Residence Permit (Copy of the Passport)
<input type="checkbox"/>	From a Minor: Guardian's Permission

**Note!**

- 1) The application requires an estimate of the detached house's current value provided by the building inspector or someone in a similar position; an estimate of the condominium's current value provided by the superintendent or someone in similar position; and the creditors' testimonies of the debts directed at said property. If the property has already been transferred, a copy of the contract of sale or some other document that shows the transfer price, must be added to the application..
- 2) If there are or have been several condominiums or real estates, they must be itemized in the attachments. From co-ownerships, a separate report is required, which details the names and sizes of owned shares of each owner.
- 3) If the threat to the move is accompanied by the court decision, a copy of it must be added to the application.

**DECISION**

<input type="checkbox"/>	Approved	
<input type="checkbox"/>	Approved on the basis of special provisions, criterion	
<input type="checkbox"/>	Stays in the queue	
<input type="checkbox"/>	Rejected, criterion	