

DOROTHY DAY HOUSE

106 BELL STREET, SEATTLE, WA 98121
(206) 374-4364 OFFICE (206) 374-8611 FAX



WHO IS ELIGIBLE?

- ▶ Single Adult Female
- ▶ Homeless
- ▶ Income 30% of median (under \$16,350 annually)



RENT REQUIREMENT

- ▶ Rent is 30% of your income
- ▶ Zero income - rent is \$25.00
- ▶ Deposit is equal to one month's rent



TENANT RESPONSIBILITIES

- ▶ Desk/Chore Weekly
- ▶ Committee - 1x Year
- ▶ House Meetings - 1x Month



FACILITY

- ▶ Utilities are included in the rent
- ▶ Community Washer/Dryer
- ▶ Community Shower/Bath
- ▶ Telephone/Cable (responsibility of tenant)



FURNISHED ROOMS INCLUDE

- ▶ Refrigerator
- ▶ Microwave
- ▶ Kitchen table, chair
- ▶ Easy Chair
- ▶ Twin Bed w/ drawers
- ▶ TV Cart



OPPORTUNITIES

- ▶ Support services on-site - case management/counselor
- ▶ Establish friendships
- ▶ Create a stable home & rental history

For more information or to get an application
CALL: 206-374-4364

DOROTHY DAY HOUSE
PRE-APPLICATION

First Name Middle Last Name Date

Date of Birth Social Security # Contact Phone

Current Address/Mailing Address City State Zip Code

Monthly Income Hourly Wage Hours Worked Sources of Income

Are you, or will you be in the next 12 months, a full-time student? _____ YES _____ NO

Housing History: Please list all the places you've stayed for the last 12 months (continue of back if necessary)

NAME OF BUILDING	DATES STAYED	CONTACT PERSON	PHONE #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References: List two professional references (i.e. caseworker, counselor, etc.) that we may contact.

NAME	AGENCY	RELATIONSHIP	PHONE #
1. _____	_____	_____	_____
2. _____	_____	_____	_____

By signing below, I certify that the above information is true and correct to the best of my knowledge. I also authorize representatives of the Archdiocesan Housing Authority (AHA) to check any references that may be used to determine my eligibility for housing.

APPLICANT'S SIGNATURE

DATE

Contact Info

DDH STAFF ONLY