



www.hagc.net

Housing Authority of Grant County

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Phone: (509) 762-5541 • Fax: (509) 762-2202

Toll Free: (800) 747-9202 • TTY: (800) 833-6388

STATEMENT OF INTENT TO RENT

Date: _____

PLEASE COMPLETE THE FOLLOWING INFORMATION

I am the owner/manager of the apartments/house located at: _____

I intend to rent to _____

Beginning _____ provided rent and deposit have been paid.
If tenants move in the first of the month, the total move in cost will be:

Deposit amount: \$ _____
Rent per month: \$ _____
Total amount owing: \$ _____

Year the unit was built _____
Bedroom(s) _____
Bathroom(s) _____

Please check those utilities that are included in the rent: Water: _____ Heat: _____
Sewage: _____ Garbage: _____

Any payments or checks should be made to (correct name and address):

Name

Address

City State Zip

Owner/Management Company: _____ Phone Number: _____

Signature: _____

Return to: _____



The Housing Authority of Grant County, Washington, does not discriminate on the basis of race, color, national origin, religion, sex, physical or mental disability, or familial status. The Housing Authority of Grant County's policies and practices are designed to provide assurances that persons with disabilities will be given reasonable accommodations, upon request, so that they may fully access and utilize the housing programs and related services.

