



Utah for Rational Sex Offense Laws

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UTRSOL Housing Authority

RESIDENTIAL APPLICATION

Please note: UTRSOL does not have funds available to assist with deposits, move-in costs, or first month's rent. This program provides referral and matching assistance only. Completing this application helps us identify housing options that fit your needs.

Applicant Information

First Name:

Last Name:

Phone Number:

Current Address:

Number of Occupants (adults/minors):

Note: occupants age 18 or older must be included on the lease.

Do you have pets? ☐ Yes ☐ No

If yes, describe (type/breed, size, number):

Is any pet a legitimate Emotional Support Animal (ESA)? ☐ Yes, documentation available? ☐ No

Do you have any mobility limitations (stairs, distance, single-level requirement, etc.) that would affect which units work for you?

Housing Preferences

What County are you looking for housing in:

What City or Cities are you searching for housing in:

What is your Monthly rental budget:

Do you have a deposit available (typically 1-2 months' rent)? ☐ Yes ☐ No ☐ Partial

If no or partial: do you have savings, a co-signer, or a confirmed assistance program that can cover a deposit and first month's rent?

What time frame are you looking at (immediate, 30/60/90 days):

What is prompting your move?

Housing type sought: ☐ Shared housing ☐ Single-family residence ☐ Apartment ☐ Duplex

Registry & Legal Status

Are you currently on probation or parole? ☐ Yes ☐ No

Registry classification: ☐ Group A (minor offense) ☐ Group B (adult offense) ☐ Group C

What is your relation to the registrant? (spouse, parent, sibling, etc.)

Financial Background

Are you currently employed? ☐ Yes ☐ No

If yes, where do you work, and for how long?

What is your household's total monthly income? (Include disability, Social Security, housing assistance, and food stamps as income.)

Do you have any court-ordered or supervision-related recurring costs? ☐ Yes ☐ No

If yes, please list which apply and the approximate monthly total (e.g., supervision/probation fees, treatment fees, polygraph costs, GPS monitoring, registry fees, restitution):

Do you have a co-signer available if needed? ☐ Yes ☐ No

Treatment History

Have you completed sex offense treatment? ☐ Yes ☐ No ☐ In progress

If yes, how long ago?

Where was treatment completed?

Applicant Certification

I certify that the information provided above is true and accurate to the best of my knowledge. I understand this application is used solely to help UTRSOL identify and refer potential housing options, and does not guarantee housing placement.

Signature: _____ Date: _____