



Havaras Group LLC
New Beginnings Housing
Business Phone: (844) 844-5355
Alternate Phone: 814-806-0101
Email: info@havarasgroupllc.com
Alternate Email: lataushabonner2014@gmail.com

HOUSING APPLICATION

Applicant Full Name: _____

Date of Birth: _____

Phone Number: _____ Email (if any): _____

Emergency Contact Name & Phone: _____

Current Living Situation: _____

Primary Income Source (SSI, SSDI, VA, SSA, Other): _____

Approximate Monthly Income: _____

Do you receive income consistently each month? Yes No

Are you able to live independently without 24-hour medical supervision? Yes No

Do you currently take prescribed medications as directed? Yes No

Are you willing to follow all house rules (no drugs, no visitors, shared living)? Yes No

Do you understand this is a shared living environment? Yes No

What type of housing are you seeking? Short-term Long-term

Is there anything you would like us to know to support your success in housing?

Important Notice: New Beginnings Housing does not require credit checks or background checks. Housing decisions are based on program fit, income stability, and ability to live independently.

Submission Instructions: Please return this completed application by email to info@havarasgroupllc.com. Once reviewed, applicants will be contacted to schedule an in-person interview.