



Housing Partners of Larimer Cover Letter

Applicant Name:

Referring Agency:

Case Manager Name:

Household Size: Voucher Holder: Voucher Type:
(if applicable)

Personal Narrative:

All HPL
applicants bring
the benefits of the
Collective to their
tenancy!

Outline of Payment Sources: (eg. Voucher, nonprofit-assistance, personal income, etc.)

Monthly Rent

Security Deposit

Utilities

HPL Financial
Benefits

*HPL benefits are paid
by Larimer County's
Office of Housing
Stability*

*All households applying through the Housing Partners of Larimer Collective offer access to damage & vacancy loss reimbursements & a sign on bonus. Contact **Lexi Valenti** at valental@co.larimer.co.us for more information.*

Case Management Outline: (eg. monthly check-ins, financial planning, resource navigation etc.)

Contact Information:

Case Manager Phone #:

Case Manager Email:

Applicant Phone #:

Applicant Email:

Secondary Contact Name:

Secondary Contact Relation:

Support Contact Phone #:

Secondary Contact Email:

The information provided in this cover letter is not meant to be comprehensive. The property/landlord is still responsible for screening decisions. This cover letter offers context but does not guarantee mention of all information found in a background check. The outlined direct assistance and services may be subject to change upon communication from the case worker.