保障性租赁住房项目入住申请表（样表）

申请入住项目名称： 户型：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **主申请人** | 姓 名 |  | | | | 性 别 | | | | | □男 □女 | | | | | 本市户籍 | | | | | □是 □否 | | | | |
| 婚姻现状 | □已婚 □未婚 □离婚 □丧偶 | | | | | | | | | | | | | | | | | | | | | | | |
| 身份证号码 |  |  |  |  | |  |  |  |  | |  |  | |  | | |  |  |  |  |  |  |  | |
| 联系电话 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 工作单位名称 |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | 单位所在区 |  | | | | | | 单位地址 | | | | | |  | | | | | | | | | | | |
| **共同申请人** | 姓 名 |  | | | | | 与主申请人关系 | | | | | | | | | | □配偶 □子女 | | | | | | | | |
| 身份证号码 |  |  |  |  | |  |  |  |  | |  |  | |  | | |  |  |  |  |  |  |  | |
| 姓 名 |  | | | | | 与主申请人关系 | | | | | | | | | | □配偶 □子女 | | | | | | | | |
| 身份证号码 |  |  |  |  | |  |  |  |  | |  |  | |  | | |  |  |  |  |  |  |  | |
| 姓 名 |  | | | | | 与主申请人关系 | | | | | | | | | | □配偶 □子女 | | | | | | | | |
| 身份证号码 |  |  |  |  | |  |  |  |  | |  |  | |  | | |  |  |  |  |  |  | |  |
| 姓 名 |  | | | | | 与主申请人关系 | | | | | | | | | | □配偶 □子女 | | | | | | | | |
| 身份证号码 |  |  |  |  | |  |  |  |  | |  |  | |  | | |  |  |  |  |  |  |  | |
| **拥有本市产权住房1** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 房屋所在区 | |  | | | | | | 坐落地址 | | | | | |  | | | | | | | | | | | |
| 建筑面积 | |  | | | | | | 产权人及各自份额 | | | | | |  | | | | | | | | | | | |
| **拥有本市产权住房2** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 房屋所在区 | |  | | | | | | 坐落地址 | | | | | |  | | | | | | | | | | | |
| 建筑面积 | |  | | | | | | 产权人及各自份额 | | | | | |  | | | | | | | | | | | |
| **承租本市公有住房** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 房屋所在区 | |  | | | | | | 坐落地址 | | | | | |  | | | | | | | | | | | |
| 面积 | |  | | | | | | 公房承租人 | | | | | |  | | | | | | | | | | | |
| 本人承诺，申请表所填信息均属实，所提交的相关材料均真实有效，同意接受政府相关主管部门核查、抽查；如有隐瞒虚报，按照本市保障性租赁住房相关规定接受处理。  主申请人签名：  申请日期： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 政府住房保障机构住房核查结果与本人申报住房情况：□一致 □不一致  审核结果：□通过 □未通过  出租单位盖章：  审核日期： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |