



Housing Program Partnership Agreement

About Us

DBHSS is a housing-focused organization based in Pittsburgh, Pennsylvania. We provide structured, professionally managed housing solutions for individuals in need of stable living environments.

Our program focuses on:

- Long-term housing stability
- Responsible occupancy management
- Property care and maintenance
- Consistent and reliable rent payments

We partner with property owners to create mutually beneficial leasing arrangements while maintaining high standards for both residents and properties.

Our Services

We work directly with landlords to:

- Lease residential properties on a long-term basis
- Manage all occupant placement and supervision
- Ensure timely and consistent rent payments
- Maintain the condition and cleanliness of the property
- Serve as the primary point of contact for all property-related matters

What We Offer Landlords

- Guaranteed or consistent rental income
- Reduced vacancy risk
- Professional property oversight
- Long-term leasing options
- Minimal day-to-day involvement

Property Use

The property will be used for structured residential housing under our program. We ensure:

- Responsible occupancy levels
- Respect for property and neighbors
- Ongoing monitoring and management

Lease Terms (General Overview)

- Lease Duration: Long-term (6–24 months or as agreed)
- Rent Payment: Paid consistently on agreed schedule
- Security Deposit: Provided as agreed
- Maintenance: Minor upkeep handled by our organization; major repairs coordinated with landlord

Responsibilities

Our Organization:

- Rent payments

- Occupant management
- Property upkeep (minor maintenance & cleanliness)
- Communication with landlord

Landlord:

- Structural/property repairs (as required)
- Compliance with housing laws
- Providing a safe and habitable property

Agreement to Proceed

Both parties agree to move forward in good faith to finalize a formal lease agreement and partnership.

Property Information

Property Address: _____

Landlord Information

Name: _____

Phone: _____

Email: _____

Authorized Representative (Organization)

Name: _____

Title: _____

Signature: _____

Date: _____

Landlord Signature

Name: _____

Signature: _____

Date: _____

Contact Information

Double Blessings Housing & Support Services

Phone: _____

Email: _____
