

APPLICATION FOR ADMISSION

The following information is confidential and will not be disclosed without your content.

Applicant's Name		Social Security No.		Home Phone ()
Present Street Address	City	State	Zip Code	No. Yrs. at Present Address
Former Street Address (if at present address for less than 2 yrs.)	City	State	Zip Code	No. Yrs. at Former Address
Current Housing Status: Provide the name, address and phone number of all landlords for the past 3 years.				
Current Landlord: _____		Phone: _____		
Address: _____				
Previous Landlord: _____		Phone: _____		
Address: _____				
Previous Landlord: _____		Phone: _____		
Address: _____				
Name and Address of Employer		Type of Business		Self Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Phone Number ()	Position/Title	# Years on the Job		Yrs. in this Line of Work
Name and Address of Previous Employer (if Employed at Present Position less than 2 yrs.)		# of Years with Previous Employer		Business Phone Number ()
Co-Applicant's Name		Social Security No.		Home Phone ()
Present Street Address	City	State	Zip Code	No. Yrs. at Present Address
Former Street Address (if at present address for less than 2 yrs.)	City	State	Zip Code	No. Yrs. at Former Address
Name and Address of Employer		Type of Business		Self Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Phone Number ()	Position/Title	# Years on the Job		Yrs. in this Line of Work
Name and Address of Previous Employer (if Employed at Present Position less than 2 yrs.)		# of Years with Previous Employer		Business Phone ()

ANNUAL INCOME				
SOURCE	APPLICANT	CO-APPLICANT	OTHER HOUSEHOLD MEMBERS 18 YEARS OR OLDER	TOTAL
Gross Salary				\$
Overtime Pay				\$
Commissions/Fees/Tips/Bonuses				\$
Unemployment Benefits				\$
Workers Compensation, etc.				\$
Social Security, Pensions, Retirement Funds, etc., Received Periodically				\$
TANF Payments				\$
Alimony, Child Support				\$
Interest and/or Dividends				\$
Net Income from Business				\$
Net Rental Income				\$
Other:				\$
			TOTAL:	\$
ASSETS	CASH VALUE	INCOME FROM ASSETS	NAME OF FINANCIAL INSTITUTION	ACCOUNT NUMBER
Checking Account	\$	\$		
Savings Account	\$	\$		
Certificate of Deposit	\$	\$		
Mutual Funds/Stocks/Bonds	\$	\$		
Real Estate	\$	\$		
Whole Life Insurance	\$	\$		
Annuity, Keogh, IRA, 401(k)	\$	\$		
Other:	\$	\$		
TOTAL:	\$	\$		

I _____ have _____ have not disposed of any asset(s) valued at \$1,000 or more in the past two years for less than the fair market value of the item. If yes, please list the asset value under the “other” column in the above listing of assets.

Are all household members full-time students? Yes No

HOUSEHOLD COMPOSITION: List the head of household and all members who live in your home. List the relationship of each family member to the head.

MEMBER NO.	FULL NAME	RELATIONSHIP	BIRTHDATE MM/DD/YYYY	SOCIAL SECURITY NO.
1				
2				
3				
4				
5				
6				
7				
8				

Are there any special housing needs or reasonable accommodations that the household will require?

Have you or any member of the household ever been convicted of a felony? Yes No
If yes, please explain: _____

The information provided above is true and complete to the best of my/our knowledge and belief. I/We consent to the disclosure of income and financial information from my/our employer and financial references for purposes of income and asset verification related to my/our application for tenancy as well as credit and criminal background checks.

Applicant Signature

Date

Co-Applicant Signature

Date

Date

Date

Date

ALL ADULT HOUSEHOLD MEMBERS MUST SIGN