

TENANT INCOME CERTIFICATION QUESTIONNAIRE

Name _____

(Each adult household member 18 years or older must complete a separate questionnaire)

INCOME INFORMATION

			MONTHLY GROSS INCOME
1	Yes	No	I/we am self employed. _____ \$ _____
2	Yes	No	I/we have a job and receive wages, salary, overtime pay, commissions, fees, tips, bonuses, and/or other compensation: List the businesses and/or companies that pay you: <u>Name and phone # of Employer(s) / Name of Household Member</u> 1) _____ / _____ Name of Employer Phone # Name of Household Member \$ _____ 2) _____ / _____ Name of Employer Phone # Name of Household Member \$ _____ *Please provide any additional Employer information on a separate sheet of paper.
3	Yes	No	I/we receive cash contributions of gifts including rent or utility payments, on an ongoing basis from persons who are not living with me. Name _____ Phone # _____ *Please Provide any additional cash contributions or gifts on separate sheet of paper \$ _____
4	Yes	No	I/we receive Unemployment or Workman's Comp benefits. (please circle which one) Name of Company Providing Workman's Comp Benefits _____ \$ _____ Phone Number _____
5	Yes	No	I/we receive Veteran's Administration, GI Bill, or National Guard/Military benefits/income. Name of Company _____ Phone # _____ \$ _____
6	Yes	No	I/we receive payments for Social Security, Supplemental Security Income (SSI), and/or direct deposit card. \$ _____
7	Yes	No	This household receives <u>unearned</u> income from family members age 17 or under (i.e., Social Security payments, Trust Fund disbursements, etc.). 1) _____ / _____ Name of Company providing unearned income Phone # Name of Household Member \$ _____ 2) _____ / _____ Name of Company providing unearned income Phone # Name of Household Member
8	Yes	No	I/we receive payments for disability, death benefits, or adoption assistance.(please circle which one) _____ \$ _____ Name of Company providing adoption assistance Phone #
9	Yes	No	I/we receive Public Assistance Income (examples: TANF, AFDC), <u>not including food stamps.</u> \$ _____
10	Yes	No	I/we am entitled to receive child support payments. \$ _____
	Yes	No	I/we am currently receiving child support payments through _____ County or directly from _____ (name of individual). Phone # _____ If yes, from how many persons do you receive support? _____ \$ _____
	Yes	No	I/we am/are currently making efforts to collect child support owed to me. List efforts being made to collect child support: _____
11	Yes	No	I/we am entitled to receive alimony/spousal maintenance payments \$ _____
	Yes	No	I/we am currently receiving alimony/spousal maint payments through _____ County or Directly from _____ (name of individual). Phone # _____
	Yes	No	I am currently making efforts to collect alimony/spousal maintenance payments owed to me. List efforts being made to collect: _____



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12	Yes	No	I/we receive periodic payments from trusts, annuities, inheritance, severance, retirement funds or pensions, insurance policies, or lottery winnings. 1) _____ / _____ Source Phone # Name of Household Member 2) _____ / _____ Source Phone # Name of Household Member	\$ _____ \$ _____
13	Yes	No	I/we receive income from real or personal property. Please Explain _____	(use <u>net</u> earned income) \$ _____
14	Yes	No	I/we am a full-time student and receive Section 8 assistance. I receive student financial assistance (i.e., grants, private sources) in amounts that exceed tuition costs. Name of School _____ / Phone # _____	\$ _____

Asset information

				INTEREST RATE	BALANCE/CASH VALUE
1	Yes	No	I/we have a checking account(s). If yes, list bank(s): 1) _____ Acct# _____ Name Phone # 2) _____ Acct# _____ Name Phone #	_____% _____%	\$ _____ \$ _____
2	Yes	No	I/we have a savings account. If yes, list bank(s): 1) _____ Acct# _____ Name Phone # 2) _____ Acct# _____ Name Phone #	_____% _____%	\$ _____ \$ _____
3	Yes	No	I/we have a revocable trust(s). If yes, list bank(s): _____ / _____ Name Phone #	_____%	\$ _____
4	Yes	No	I/we own real estate. If yes, provide description: _____ Assessor's Valuation: _____		\$ _____
5	Yes	No	I/we own stocks, bonds, or Treasury Bills. List sources/bank names 1) _____ Phone # _____ Name 2) _____ Phone # _____ Name	_____% _____% _____%	\$ _____ \$ _____ \$ _____
6	Yes	No	I/we have Certificates of Deposit (CD) or Money Market Account(s). If yes, list sources/bank names 1) _____ Phone # _____ Name 2) _____ Phone # _____ Name	_____% _____% _____%	\$ _____ \$ _____ \$ _____
7	Yes	No	I/we have an IRA/Lump Sum Pension/Keogh Account/401K. If yes, list bank(s) 1) _____ Phone # _____ Name 2) _____ Phone # _____ Name	_____% _____%	\$ _____ \$ _____



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8	Yes	No	I/we have a whole life insurance policy (policy has CASH VALUE). If yes, how many policies _____ 1) _____ Policy # _____ Name _____ 2) _____ Policy # _____ Name _____		\$ _____ \$ _____ \$ _____ \$ _____
9	Yes	No	I/we have cash on hand.		\$ _____
10	Yes	No	I/we have disposed of assets (i.e., a home) for less than the fair market value within the past 2 years. If yes, list items and date disposed: _____ Item Disposed of _____ Date disposed _____		\$ _____ \$ _____
11	Yes	No	I/we have income from assets or sources other than those listed above. If yes, list type below: 1) _____ Phone # _____ Name _____ 2) _____ Phone # _____ Name _____	_____% _____%	\$ _____ \$ _____

HOUSING assistance

Yes	No	Will the household receive Section 8 housing assistance?	List agency name, contact person and phone # _____ _____
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Signature: _____ Date: _____

