

Arlington Housing Authority Application for Continued Occupancy

<u>Name</u>	<u>Birth Date</u>
1. _____	_____
2. _____	_____

Address _____ Apt # _____ Phone # _____

Do you receive any of the following sources of income? If you do, please list them.	<u>Tenant #1 Monthly Amount</u>	<u>Tenant #2 Monthly Amount</u>
Social Security Benefits	\$ _____	\$ _____
Supplemental Social Security	\$ _____	\$ _____
Pension, Annuity, Retirements	\$ _____	\$ _____
Alimony, regular allowances or gifts from another person	\$ _____	\$ _____

If you work, please list name and address of employer

Bank Interest (Form 1099) (IF NONE, PLEASE WRITE NONE)

Bank Name _____	\$ _____	\$ _____
Bank Name _____	\$ _____	\$ _____
Bank Name _____	\$ _____	\$ _____
Bank Name _____	\$ _____	\$ _____

Dividends (Form 1099) (IF NONE, PLEASE WRITE NONE)

IRA annual distribution)

	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

Other income, please specify _____

	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

I hereby certify that the financial data supplied by me is timely and accurate in all respects. I understand that misrepresentation of facts is a ground for eviction.

SIGNED UNDER PAINS AND PENALTIES OF PERJURY

Signature _____ Date _____