

Date Application Received:	
Time Application Received:	
Requested Accessible Unit:	
Set Aside:	

LIBERTY COTTAGES RENTAL APPLICATION FORM

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

Member No.	Full Name	Relationship	Birth Date	Age	Sex	Social Security No.	Full Time Student [Y/N]
1		Head of Household					
2							
3							
4							
5							
6							
7							
8							

STUDENT STATUS:

- Are all of the residents full time students? Yes No
- If yes: Is every member of the household a single parent and his or her children, neither of whom is a dependent of a third part? Yes No
- If yes: Is every member of the household married and filing a joint tax return? Yes No
- If yes: Is any member of the household enrolled in a job training program comparable to the Job Training Partnership Act? Yes No
- If yes: Is any member of the household receiving assistance under Title IV of the Social Security Act: AFDC or TANF? Yes No

RENTAL HISTORY:

Current Address: _____ Landlord's Phone: _____

Rent: \$ _____ Length of Residency: _____ Landlord's Name: _____

If less than three years, provide previous address and landlord's name:

Previous Address: _____ Landlord's Phone: _____

Rent: \$ _____ Length of Residency: _____ Landlord's Name: _____

CONTACT INFORMATION:

Home Phone: _____ Day Phone: _____

Cell Phone: _____ Other Phone: _____

