

LUTHER VILLAGE III

TENANT APPLICATION

Name (Head of Household) _____ M or F
First Middle Initial Last (Circle One)

Present Address _____ Years of Residence _____

City _____ State _____ Zip _____ Telephone # _____

Social Security # _____ Date of Birth _____

Name (Second Occupant) _____ M or F
First Middle Initial Last (Circle One)

Social Security # _____ Date of Birth _____

Relationship to Head of Household _____

ESTIMATED ANNUAL INCOME:

	Resident #1	Resident #2
Social Security*	\$ _____	_____
• Total Social Security without deductions		
SSI	\$ _____	_____
Pensions	\$ _____	_____
Annuities	\$ _____	_____
VA Benefits	\$ _____	_____
Salary/Wages	\$ _____	_____
Tax Credits	\$ _____	_____
Asset Income	\$ _____	_____
TOTAL INCOME	\$ _____	_____

VALUE OF ASSETS OWNED:

Checking & Savings	\$ _____
Money Market	\$ _____
Certificates of Deposit	\$ _____
Stocks / Mutual Funds	\$ _____
Bonds	\$ _____
Real Estate (Market Value less mortgage balance)	\$ _____
TOTAL	\$ _____
5% of above TOTAL	\$ _____
(this amount must be added to the TOTAL INCOME)	

Person to contact if for some reason Applicant cannot be reached.

Name: _____
Address: _____
Telephone: _____

Place of residence for the last five years

Present Landlord: from (_____) to (_____)
Name: _____
Address: _____
Telephone: _____

Previous Landlord: from (_____) to (_____)
Name: _____
Address: _____
Telephone: _____

Previous Landlord: from (_____) to (_____)
Name: _____
Address: _____
Telephone: _____



Have you ever been evicted? Yes No
If "Yes" What Year? _____ Reason for Eviction _____

Have you ever been convicted of a felony? Yes No
If "Yes" What Year? _____ Identify Felony _____

Have you ever been convicted or required to register for a sex offense? Yes No
If "Yes" What year and state? _____

Have you ever been convicted of theft, shoplifting, or crime where you served time and/or probation?
Yes No Identify Crime and date(s) _____

Have you ever been convicted of a violent crime with/without the use of a deadly weapon?
Yes No Identify Crime and date(s) _____

The Information Requested Below is Voluntary.

RACE: (Select One)

- American Indian/Alaska Native Asian
 Native Hawaiian/Pacific Islander White
 Black/African American

ETHNICITY: (Select One)

- Hispanic or Latino
 Non-Hispanic

SIGNATURE: _____ DATE: _____
(Head of Household)

(Spouse/Second Occupant) DATE: _____

