

APPLICATION FOR RESIDENCY AT TYLER STREET TOWER

*****Tyler Street Tower is a smoke-free facility.*****

Please complete this application with all details. Please give full answers even if you must attach additional pages. If accepted as a resident, this application will become part of the lease.

Head of Household Information:

First Name	Middle Initial	Last Name
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Date of Birth	Age	Social Security #	Sex	Occupation
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Marital Status (check one): Single Married Divorced Widowed

If married, please list your spouse's information below:

First Name	Middle Initial	Last Name
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Date of Birth	Age	Social Security #	Sex	Occupation
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Contact Number (s):

Mobile #	Home #	Other #
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Current Address:

Street Address	Apt #	City	State	Zip Code
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How long have you resided at the above address? _____

Have you notified your current landlord that you are moving? Yes or No

Current Apartment/Landlord Name	Phone number
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Reason for moving:

Have you ever been evicted? _____ If "yes," from where and when? _____

Residence for the last five (5) years:

Landlord/Apartment Name	Address	Phone	Date To	Date From

Have you ever been exposed to or treated for bedbugs in the last 6 months? YES NO

CURRENT INCOME, SOURCE AND AMOUNT:

List all income sources and amounts. This includes, but is not limited to, full and/or part-time employment including self-employment, all income from welfare agencies, Social Security, pensions, Supplemental Security Income (SSI), disability compensation, baby-sitting, care-taking of elderly/disabled, alimony, child support, educational loans, scholarships and grants, income from rental property, interest on assets, dividends, annuities, regular contributions from others.

Source of Income	Monthly Amount Received

MEDICAL INFORMATION

What kind of medical assistance do you receive? Check all that apply:

Medicare Medicaid Veteran Benefits Other _____

Personal References (Non-Family):

Name	Address	Phone Number

Next of Kin (Family):

Name	Relationship	Address	Phone Number

Have you ever been convicted of a felony? Yes No

If checked "yes", please give details:

The following information is required for federal reporting regulations, it is used only for statistical purposes:

Please check the appropriate box:

- White Black Hispanic Non- Hispanic Asian American Indian
 Alaskan Native Other: _____

I hereby affirm that the foregoing information is true and correct to the best of my knowledge.

Signature of Applicant

Date

Signature of Spouse

Date

How did you hear about Tyler Street Tower?

CRIMINAL BACKGROUND CHECK

I hereby give my consent to Tyler Street Tower to perform a criminal background check.

Signature of Applicant

Date of Birth

Signature of Spouse

Date of Birth