



# Rental Application for Income Certification

**PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION AS THEY APPLY TO YOUR HOUSEHOLD. INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT FOR COMPLETION.**

**New Tenant**

**Address of property:** \_\_\_\_\_

**Renewal Tenant**

**APPLICANT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Last 4 digits of Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**MARITAL STATUS:**  Single  Married  
 Separated  Divorced

**SEX:**  Male  Female  Non-binary/Non- conforming

**RACE OF APPLICANT:**

- American Indian/Alaska Native
- White/Caucasian
- Black/African American
- Nat. Hawaiian or Other Pacf. Islander
- Asian
- Two or more races
- Other \_\_\_\_\_
- I do not wish to disclose this information

**ETHNICITY OF APPLICANT**

- Hispanic or Latino
- Non-Hispanic or Latino
- I do not wish to disclose

**CO-APPLICANT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Last 4 digits of Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**MARITAL STATUS:**  Single  Married  
 Separated  Divorced

**SEX:**  Male  Female  Non-binary/Non- conforming

**RACE OF CO-APPLICANT:**

- American Indian/Alaska Native
- White/Caucasian
- Black/African American
- Nat. Hawaiian or Other Pacf. Islander
- Asian
- Two or more races
- Other \_\_\_\_\_
- I do not wish to disclose this information

**ETHNICITY OF CO-APPLICANT**

- Hispanic or Latino
- Non-Hispanic or Latino
- I do not wish to disclose

**PLEASE LIST ALL PEOPLE WHO WILL BE RESIDING IN THE UNIT:**

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**TOTAL HOUSEHOLD SIZE:** \_\_\_\_\_

**DO YOU OWN A VEHICLE:**  No       Yes, how many? \_\_\_\_\_

**CURRENT PRIMARY EMPLOYMENT:**

Applicant

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Date of hire \_\_\_\_\_

Position: \_\_\_\_\_

Gross Monthly Income \$ \_\_\_\_\_

I am retired

Co-Applicant

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

Date of hire \_\_\_\_\_

Position: \_\_\_\_\_

Gross Monthly Income \$ \_\_\_\_\_

I am retired

**ADDITIONAL MONTHLY INCOME (check and complete all that apply):**

Applicant

Average overtime earning \$ \_\_\_\_\_

Year round part time employment \$ \_\_\_\_\_

Seasonal employment \$ \_\_\_\_\_

Retirement or Pension income \$ \_\_\_\_\_

**If multiple sources, please list:** \_\_\_\_\_

Social Security Income \$ \_\_\_\_\_

Veteran benefits \$ \_\_\_\_\_

Co-Applicant

Average overtime earning \$ \_\_\_\_\_

Year round part time employment \$ \_\_\_\_\_

Seasonal employment \$ \_\_\_\_\_

Retirement or Pension income \$ \_\_\_\_\_

**If multiple sources, please list:** \_\_\_\_\_

Social Security Income \$ \_\_\_\_\_

Veteran benefits \$ \_\_\_\_\_

- Unemployment income \$ \_\_\_\_\_
- TDI \$ \_\_\_\_\_
- Long-term Disability (not SSDI) \$ \_\_\_\_\_
- Child Support \$ \_\_\_\_\_
- Alimony \$ \_\_\_\_\_
- Family Support \$ \_\_\_\_\_
- SSI or SSDI \$ \_\_\_\_\_
- RI Works \$ \_\_\_\_\_
- Other Income \$ \_\_\_\_\_

Explain Other: \_\_\_\_\_  
 \_\_\_\_\_

- Unemployment income \$ \_\_\_\_\_
- TDI \$ \_\_\_\_\_
- Long-term Disability (not SSDI) \$ \_\_\_\_\_
- Child Support \$ \_\_\_\_\_
- Alimony \$ \_\_\_\_\_
- Family Support \$ \_\_\_\_\_
- SSI or SSDI \$ \_\_\_\_\_
- RI Works \$ \_\_\_\_\_
- Other Income \$ \_\_\_\_\_

Explain Other: \_\_\_\_\_  
 \_\_\_\_\_

**ASSETS - Assets will count at 1% of their value towards household income:**

- Total Checking Acct Balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total Savings Acct Balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total Money Market Acct Balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total 401(k) balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total IRA/Roth IRA balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total Investment or Brokerage Acct Balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Total CD balances (current statement) \$ \_\_\_\_\_ Number of accounts: \_\_\_\_\_
- Other Asset(s) \$ \_\_\_\_\_

Explain Other: \_\_\_\_\_

I currently own a home or other real estate

I currently own a home that is on the market but not under contract  
 Current mortgage balance \$ \_\_\_\_\_ List price \$ \_\_\_\_\_

I currently own a home that is already under contract  
 Current mortgage balance \$ \_\_\_\_\_ Contract price \$ \_\_\_\_\_

I have sold a home in the last 12 months  
 Proceeds from sale \$ \_\_\_\_\_



## REQUIRED SUPPORTING DOCUMENTATION

### **Please provide copies of the following documents as they relate to EACH person in the household**

\_\_\_\_\_ 1 (one) year current personal federal tax returns with all schedules, 1099s and W2s;

**(a) 2 (two) years, if self-employed**

**(b) If you are not required by the IRS to submit a tax return based on your sole source of income being nontaxable income and you did not file a return, please provide a notarized attestation attesting to that fact;**

**(c) If you have not filed a tax return but are required to, please provide current IRS Verification of Non-Filing Letter;**

**(d) If you filed an extension, please provide a copy of the confirmation email that the IRS accepted your request.**

\_\_\_\_\_ If self-employed, current year to date Profit and Loss Business Statement and Balance Sheet;

\_\_\_\_\_ 2 (two) month's most recent pay stubs for each source of employment;

\_\_\_\_\_ For students over age 18, documentation of full or part time school enrollment status;

\_\_\_\_\_ Social Security, Pension, Retirement, VA, SSI, SSDI, or Disability payments Benefit letter(s);

\_\_\_\_\_ Documentation of child support and/or alimony payments;

\_\_\_\_\_ Proof of legal separation or divorce;

\_\_\_\_\_ If monthly financial support is being provided by a family member, please provide a notarized attestation from the person providing the support attesting to the maximum amount of support provided on a monthly basis;

\_\_\_\_\_ If any adult in the household claims to have no income and does not plan to in the coming 52 weeks preceding occupancy and/or has no assets held in their name, please provide a notarized attestation attesting to the applicable facts;

\_\_\_\_\_ 6 (six) month's most recent checking account statements (all pages);\*

\_\_\_\_\_ 6 (six) month's most recent money market account statements (all pages);\*

\_\_\_\_\_ 6 (six) month's most recent savings account statement (all pages);\*

\_\_\_\_\_ Most recently issued statement(s) for 401(k), 403 (b), IRA, ROTH IRA, etc. Statements;

\_\_\_\_\_ Most recently issued statement(s) for investment and brokerage accounts;

\_\_\_\_\_ Most recent issued statement(s) for CDs;

\_\_\_\_\_ Documentation for any other assets;

\_\_\_\_\_ If you currently selling a home, please provide a copy of the most recent mortgage statement and a copy of the Purchase and Sales agreement, and a final closing disclosure when it becomes available;

\_\_\_\_\_ If you have sold a home in the last 12 months, please provide a copy of the final settlement statement;

\*For all non-verifiable deposits over \$100 or if multiple non verifiable deposits appear on a single day regardless of amount, please provide a written explanation, itemized by deposit, as to the source and nature of the deposit. Please also provide the appropriate supporting documentation when applicable. Examples of a non-verifiable deposit are: ATM deposits, mobile deposits, counter credits, Venmo, Cash App, Zelle or the like.

If you have any questions with regards to completing this application,  
please call **Melina Lodge at 401.721.5680 ext. 104**