

TENANT HOUSEHOLD DATA FORM

Current name of housing development: _____

Full name of head of household: _____

Street address: _____ Apt # _____

City: _____ Zip Code: _____ County: _____

Unit Type: SRO Eff 1BR 2BR 3BR 4BR

Initial lease start date (original move-in date) ____/____/____ Current Lease expiration date: ____/____/____

Total monthly rent charge: \$_____ Monthly subsidy amount: \$_____

Monthly utility allowance: \$_____ Rent paid by Tenant: \$_____

Subsidy Type: None Section 8 Home TBA Other

Race of the Head of Household? White, not Hispanic Black, not Hispanic Hispanic
 Native American Asian/Pacific Islander

Anticipated gross income of all household members over 18 years of age for the next **12 months**, as defined and verified as set forth in the DCA HOME Manual: **Total Income** \$_____

1. \$_____ 2. \$_____ 3. \$_____ 4. \$_____

Total number of persons in the household, including the head of household: _____

List all household members by their ages. (Relationship to head of household should be listed as spouse, son, daughter, mother, grandson, nephew, etc. If a person is unrelated to head, enter "unrelated").

Name and Relation to head of household	Age	Name and Relation to head of household	Age
1. _____	_____	5. _____	_____
2. _____	_____	6. _____	_____
3. _____	_____	7. _____	_____
4. _____	_____	8. _____	_____

Are all members of your household full-time students or has been a FT student **5** out of the last **12** months? Y / N

Certification of Legal Residency in the United States

1. Individual. (Check one) I certify that I am:
____ a citizen or national of the United States.
____ an alien lawfully present in the United States.

2. Family. (Check all that apply) I certify that there are:
____ persons in my household and that
____ are citizens or nationals of the United States and
____ are aliens lawfully present in the United States.

Will any household members need special accommodations due to a handicap or disability? Y / N

Are there any pets in the home? _____ Number of pets _____ Type/Breed _____ Weight _____

By signing this form, I certify that I understand all of the questions on this form and that all of my answers are true and correct to the best of my knowledge.

Signed: _____ Date: ____/____/____
Head of Tenant Household

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of the federal agency. Household anticipated income as stated above has been verified.