

ı	nt	2	b	_	c	i+	_	
	m	а	ĸ	μ	. 3	и	μ	0

Date:

App ID:

Rent Amount Verification Rev. 3/19/25

Applicant's Name:	Address:						
Phone Number:	Address:						
Landlord/Manager's Name:							
Phone Number:	Address:						
Household's 30-Day Income:							
Is <u>HEAT</u> utility included in the rent? Yes	s No						
Does the applicant reside in a Subsidized or Section 8 housing unit? Yes No							
What dollar amount of rent is charged to the applicant per month? \$							
Landlord/Manager's Signature:	Date:						
Please Mail or Deliver to:	By Date:						
	LAA VERIFICATION (if applicable)						
LAA Verified Signature:							
Date Landlord/Manager Contacted (If Ne	eded):						