

**AHTC Form 305  
TENANT INCOME QUESTIONNAIRE**

To be completed by management:

Property Name: \_\_\_\_\_ Bldg/Unit # \_\_\_\_\_

\_\_\_\_\_ Initial Certification          \_\_\_\_\_ Recertification          \_\_\_\_\_ Other

HH Mbr #	Last Name	First Name & Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YY)	Social Security or Alien Reg. No.
1			HEAD		
2					
3					
4					
5					

Do you expect any changes to the household in the next twelve months?    Y    N

If yes, please explain \_\_\_\_\_

Telephone #: (\_\_\_\_\_) \_\_\_\_\_

**Income Information**

Identify each source and amount of income currently received by the household or that is anticipated to be received in the next 12 months.

	<small>(Circle Y or N)</small>			Monthly Gross Income
	Yes	No		
1	Y	N	Employment receiving wages, salary, overtime pay, commissions, fees, tips, bonuses, and/or other compensation.  <u>Name of Employer(s)</u> _____ _____ _____	\$ _____ \$ _____ \$ _____
2	Y	N	Self employed. (List nature of self employment) _____ _____	(use <u>net</u> income from business) \$ _____
3	Y	N	Cash contributions of gifts including rent or utility payments, on an ongoing basis from persons not living in the unit.	\$ _____
4	Y	N	Unemployment benefits and/or Worker's Compensation.	\$ _____
5	Y	N	Veteran's Administration, GI Bill, or National Guard/Military benefits/income.	\$ _____
6	Y	N	Social security payments.	\$ _____
7	Y	N	<u>Unearned</u> income from family members age 17 or under (example: Social Security, Trust Fund disbursements, etc.)	\$ _____

8	Y	N	Supplemental Security Income (SSI).	\$ _____
9	Y	N	Disability or death benefits other than Social Security.	\$ _____
10	Y	N	Public Assistance (examples: TANF, AFDC, W2)	\$ _____
11	Y	N	Periodic payments from trusts, annuities, inheritance, retirement funds or pensions, insurance policies, or lottery winnings.  If yes, list sources 1) _____ 2) _____	\$ _____ \$ _____
12	Y	N	Income from real or personal property. (examples: rental income, mortgage or tax payments paid by third-party)	(use net earned income) \$ _____
13	Y	N	Alimony/spousal maintenance payments.	\$ _____
14	Y	N	I am entitled to receive Child Support payments.	\$ _____
			If yes, then answer the following:	
	Y	N	a. I am currently receiving child support payments	\$ _____
	Y	N	b. I am not receiving any child support payments but it is court ordered that I do.	
	Y	N	Circle one: 1) I am not pursuing the payments for the following reasons:  _____	
			2) I am making efforts to collect the child support owed to me. List efforts being made:  _____	
15	Y	N	Section 8 rental assistance.	
16	Y	N	Income from a source other than those listed above. (Including Student Grants, Scholarships, etc.) If yes, list sources: 1) _____ 2) _____	\$ _____ \$ _____

**Asset information** Identify each asset, its value and rate of interest currently held by the household.

		<small>(Circle Y or N)</small>			Cash Value/ Balance	Interest Rate
		Yes	No			
17	Y	N	Checking account(s).			
			If yes, list bank(s)			
			1) _____	\$ _____	_____ %	
			2) _____	\$ _____	_____ %	
18	Y	N	Savings account(s).			
			If yes, list bank(s)			
			1) _____	\$ _____	_____ %	
			2) _____	\$ _____	_____ %	

19	Y N	<p>Certificates of Deposit (CD) or Money Market Account(s).</p> <p>If yes, list sources/bank names</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p>	<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>	<p>_____ %</p> <p>_____ %</p> <p>_____ %</p>
20	Y N	<p>Revocable trust(s).</p> <p>If yes, list bank(s)</p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>	<p>_____ %</p> <p>_____ %</p>
21	Y N	<p>Real estate.</p> <p>If yes, provide description</p> <p>_____</p> <p>_____</p>	<p>\$ _____</p> <p>\$ _____</p>	
22	Y N	<p>Stocks, Bonds, or Treasury Bills.</p> <p>If yes, list sources/bank names</p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>	<p>_____ %</p> <p>_____ %</p>
23	Y N	<p>IRA / Lump Sum Pension / Retirement / Keogh / 401(K) Account, etc.</p> <p>If yes, list sources/bank(s)</p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>	<p>_____ %</p> <p>_____ %</p>
24	Y N	<p>Whole life insurance policy.</p> <p>If yes, how many policies _____</p> <p>List Sources</p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>	<p>_____ %</p> <p>_____ %</p>
25	Y N	<p>More than \$500 cash on hand.</p>	<p>\$ _____</p>	
26	Y N	<p>Items held as an investment (antique car, coin collection, etc.)</p> <p>If yes, list items</p> <p>_____</p>	<p>\$ _____</p>	
27	Y N	<p>Safe deposit box.</p> <p>If yes, list contents</p> <p>_____</p>	<p>\$ _____</p>	

28	Y N	Disposed of assets (i.e. gave away money / assets) for less than the fair market value in the past 2 years.	\$ _____ \$ _____	
29	Y N	Income from assets or sources other than those listed above.  If yes, list type(s) below  1) _____ 2) _____	\$ _____ \$ _____	

### Student Status

(Circle Y or N)  
Yes No

30	Y N	Does the household consist of persons who have been (in the past year) or who are <b>all part-time or full-time</b> students (1 <sup>st</sup> grade and higher. Examples: Elementary, High School, College/University, trade school, etc.)?
31	Y N	Does anyone in your household anticipate becoming a full-time student household in the next 12 months?
32	Y N	If you answered yes to either question 30 or 31, are you: <ul style="list-style-type: none"> <li>• Receiving assistance under Title IV of the Social Security Act (AFDC/TANF)</li> <li>• Enrolled in a job training program receiving assistance through the Job Training Participation Act (JTPA) or other similar program</li> <li>• Married and entitled to file a joint tax return</li> <li>• Are you a single parent who is not claimed as a dependent of any other person?</li> <li>• Are any of the children in the household claimed as a dependent of any person other than the parent(s)?</li> <li>• Any student formally received Foster Care Assistance</li> </ul>

**UNDER PENALTIES OF PERJURY, I CERTIFY THAT THE INFORMATION PRESENTED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY/OUR KNOWLEDGE. THE UNDERSIGNED FURTHER UNDERSTANDS THAT PROVIDING FALSE REPRESENTATIONS HEREIN CONSTITUTES AN ACT OF FRAUD. FALSE, MISLEADING OR INCOMPLETE INFORMATION WILL RESULT IN THE DENIAL OF APPLICATION OR TERMINATION OF THE LEASE AGREEMENT.**

\_\_\_\_\_  
PRINTED NAME OF APPLICANT/TENANT

\_\_\_\_\_  
SIGNATURE OF APPLICANT/TENANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME OF APPLICANT/TENANT

\_\_\_\_\_  
SIGNATURE OF APPLICANT/TENANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESSED BY (SIGNATURE OF OWNER/REPRESENTATIVE)

\_\_\_\_\_  
DATE

