Supplemental Rental Application for Units Under Broward County and HOME/NSP Housing Programs

SUPPLEMENTAL INFORMATION. The purpose of this supplemental Rental Application is to determine whether you qualify for affordable rental housing under Broward County and HOME/NSP Housings Programs. It is important that you answer all questions fully and accurately.

Number of Persons	Full Name	Relationship	Age	Student Status		
Head of Household				O ₋FT	O-PT	O -NA
2				Ô₋FT	O-PT	© -NA
3				○_FT	O-PT	© -NA
4				O_FT	O-PT	O-NA
5				Ô₋FT	O-PT	© -NA

ANNUAL INCOME. List all income of all adults and persons in your household, including those under 18 (except for income earned from employment by persons under the age of 18.)

Gross Monthly Income Source: Indicate whether anyone in your household receives income from the following.		Applicant	Co-Applicant	Other Household Members	Total	
Salary	🔿 Yes	O No	\$	\$	\$	\$
Overtime Pay	O Yes	O No	\$	\$	\$	\$
Commissions and Fees	O Yes	○ No	\$	\$	\$	\$
Tips and Bonuses	O Yes	© No	\$	\$	\$	\$
Interest/Dividends	O Yes	○ No	\$	\$	\$	\$
Income from Business	O Yes	© No	\$	\$	\$	\$
Rental Income	O Yes	© No	\$	\$	\$	\$
Social Security, Pensions, Retirement Funds, etc.	O Yes	🔿 No	\$	\$	\$	\$
Support from Parents or Relatives	O Yes	○ No	\$	\$	\$	\$
Unemployment Benefits	🔿 Yes	O No	\$	\$	\$	\$
Work's compensation	🔿 Yes	O No	\$	\$	\$	\$
Court Order Child Support (regardless whether paid)	O Yes	O No	\$	\$	\$	\$
					Tota	1\$

ASSETS. List all assets of all adults and persons in your household, including those under the age of 18.

List of All Assets			Cash Value	Annual Interest Dividends	Name of Financial Institution	Account Number
Checking Account(s)	🔿 Yes	🔿 No	\$	\$		
Savings Account(s)	O Yes	O No	\$	\$		
Credit Union Account(s)	O Yes	O No	\$	\$		
Stock, Bonds, Mutual Funds	🖱 Yes	O No	\$	\$		

List of All Assets		Cash Value	Annual Interest Dividends	Name of Financial Institution	Account Number	
Real Estate or Home	Yes	O No	\$	\$		
IRA	🔿 Yes	🔿 No	\$	\$		
Retirement/Pension Fund	🔿 Yes	O No	\$	\$		
Trust Fund	🔿 Yes	🔿 No	\$	\$		
Mortgage Note Held	🔿 Yes	O No	\$	\$		
Whole Life Insurance (cash Value)	O Yes	O No	\$	\$		
Others:	Yes	🔿 No	\$	\$		

6. CERTIFICATION. By signing this Supplemental Rental Application, you as the applicant are certifying that all the above information is true and correct. You are consenting to disclosure of income and financial information from your employer(s) and any financial institutions where your assets are kept.

Applicant

Date

Co-Applicant

Date

WARNING: Title 18, section 1001 of the US Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

