



Riverside Townhouses, Inc.
WAIT LIST APPLICATION

Date: _____

Number of Bedrooms needed: 1, 2, 3, 4

Phone Number _____

Phone Number _____

E-mail Address: _____

 Name of Head of Household Age Sex Birthday Social Security Number (optional)

 Name of Co-Head or Spouse Age Sex Birthday Social Security Number (optional)

 Address

 City State Zip

Others who will reside in the household

Name Age Sex Social Security Number (optional)

Income Information

Head of Household

Employer _____

Address _____

Position _____

Gross Annual/Monthly Income: \$ _____

Co-Head or Spouse:

Employer _____

Address _____

Position _____

Gross Annual/Monthly Income: \$ _____

How did you hear about us?		
Referred by a friend	Ad	HUD/MHDC Website
Head of Household Ethnic Categories (Answers Optional) Hispanic or Latino Not-Hispanic or Latino Racial Categories (Answers Optional) American Indian or Alaskan Native Asian Black or African American Native Hawaiiin or Other Pacific Islander White Other		
	Employment Income	Other Income (including income From assets)
Member	Yes or No	Yes or No
Co-Member	Yes or No	Yes or No
Dependents Child under 18	No	No
Full-time student over 18 - See Note below		
Non-Members		
Foster Child	No	No
Foster Adult	No	No
Live-in Aide	No	No
Note: the earned income of a full-time student 18 years or older who is not the head, co-head or spouse is excluded to the extent that it exceeds \$480.00.		

 Signature of Head of Household

 Signature of Co-Head or Spouse