



RENTAL APPLICATION

Hancock Estates Apartments 345 Hancock St., Tiverton, RI 02878 (401) 624-1673

Equal Housing Opportunity

The information provided in this application is used to determine your household eligibility for occupancy. Misrepresentation of information is grounds for immediate removal from the waiting list and/or will affect approval for residency. Title 18, Section 1001 of the U.S. Code states that it is a felony to intentionally make false or fraudulent statements to any federal department or agency. As the information provided below may be shared with the U.S. Department of Housing and Urban Development, misrepresentation of information is a felony.

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. Upon submission of your completed application, you will be notified in writing within fourteen (14) days.

Please Print all Answers in a Legible Fashion

HOUSEHOLD INFORMATION – Please list all information for ALL household members applying to live at the Hancock Estates. If additional space is needed, please attach a separate document.

	Name	Relationship	Date of Birth	Place of Birth	Social Security #						
		to Applicant									
		Applicant									
		Co-Applicant			,						
	Current Street Address	City		State	Zip						
	Home Phone Business or cell phon	address	Rental Amount								
	•		•		đ).						
	Current Landlord Name Land	dlord Address			\$ Landlord phone #						
	Current Buildiora Punio	uiora riaaross									
	Prior Address (if at current address for less than 5 years)	ears)									
	Prior Landlord Name Prio	or Landlord Address			Prior Landlord phone #						
	Prior Landiord Name Prior	i Landiold Address			Thoi Landiord phone #						
			0.4		1.0						
	▶ Do you own a home? ☐ Yes ☐ No If Yes, w	hat is Market Value	9? \$	Mortgage O	wed \$						
	► Do you own a pet? □Yes □No	1	Are you curren	tly living in subsidi	zed housing						
	► Are you currently enrolled in an Institute of Highe	er Education \[\sum Y \in \]	es 🗆 No								
	► Is any member of this household subject to lifetim	a registration unde	r any state sev of	fender program?	lVes □No						
	Is any member of this nousehold subject to meth	ie registration unde	ally state sex of	render program:	ics and						
	► Has any member of this household ever resided in If Yes, please list member's name(s) and state(s):		an RI? □Yes □	∃No							
	If it es, please list member is name(s) and state(s).	•									
1		1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1									
	UNIT MODIFICATIONS										
	Is there a member of your Household who requires a physically modified unit to address a disability?										
	No unit modification	ns required	A	wheelchair accessib	ole unit						
	A sensory-impaired	accessible unit	Ot	her physical adaptat	ions						

ANNUAL INCOME

Include anticipated GROSS income from all sources for the next 12 months

Source	Applicant	Co-applicant	Other househo		Total
Employment					
Social Security/SSI					
Pensions/Annuities					
IRA – Annual Required Minimum Distribution					
Alimony/Child Support					
Recurring Cash Gifts					
Interest/Dividend Income					
Other (specify)					
Total:					
ASSETS DESCRIPTION: Checking, Savings, IRA, CDs, Stocks, Money Market, Whole Life Insurance Policies, etc.		CASH VALUE OR DOLLAR AMOUNT		INTEREST % RATE OR DIVIDENDS	
			:		
					
During the past two years,	have you disposed of assets for	r less than fair market	value totaling \$1000.	00 or mor	e? □Yes □ No
If yes, please explain:					
RACE/NATIONAL (ORIGIN				
Housing Opportunity a	tion could be provided to and Fair Housing Laws. A ed below or whether or no	An application may	not be discrimina	_	-
White/Not of Hispani	c Origin Hispanic	American India	n/Alaskan A:	sian or Pa	cific Islander
Black/Not of Hispanio	c Origin Other		☐ I do not wish to f	urnish the	above information.
CERTIFICATION/C	ONSENT				
pains and penalty of pereport, current and price	led above is true and concriury. I/We consent to the landlord inquiries, incoired as part of the applicate o	he disclosure of a come and financial in	criminal investigat aformation from al	ive repo	rt, financial credit able sources and all
Applicant's Signature			Dat	te	
Co-Applicant's Signate	ure		Dat	te	

Rev. 10/2014