



**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
<b>Head of Household</b> <b>Ethnic Categories</b> (Answers Optional)  Hispanic or Latino Not-Hispanic or Latino  <b>Racial Categories</b> (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