

Riverside Townhouses, Inc.
WAIT LIST APPLICATION

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

Date: _____

Phone Number _____

Phone Number _____

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 Income _____

Co-Head or Spouse:

Employer _____

Address _____

Position _____

Gross Annual Income _____

How did you hear about us?

Referred by a friend Ad HUD/MHDC

Other _____

**Head of Household
Ethnic Categories**

Hispanic or Latino
Not-Hispanic or Latino

**Racial Categories
(Answers optional)**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian 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 |
| Other Adult | Yes or No | Yes or NO |
| Dependents | | |
| Child under 18 | No | No |
| Full-time student over 18 - See Note | | |
| 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 _____