

M-39 Tenant Profile Form

Applicant Name: _____

I. UNIT CHARACTERISTICS

Unit Number: _____

Number of Bedrooms: _____

 Occupied Unoccupied

Monthly/Weekly Rent Paid by Tenant: _____

\$ Monthly Rent Subsidy: _____

By Whom: _____

Average Monthly Utilities--Lights, Heat, Water and Sewer: _____

Are Utilities Included in the Rent?

 Yes No**II. TENANT CHARACTERISTICS**

List all Persons Living in Unit

Name	Relationship	Sex	Age
	Head of Household		

List all Gross Income of all Persons Eighteen Years or Older Living in Unit (gross income is defined as income earned before taxes or other deductions)

Name	Employer/ Source of Income	Gross Income Monthly/Weekly/Hourly	# of Hours Per Week

Is anyone in the unit Physically Handicapped?

 Yes No

I (we) certify that the information contained on this form is true and complete to the best of my (our) knowledge.

Signature of Tenant_____
Date_____
Witness_____
Date