

CARDINAL CAPITAL MANAGEMENT

Application For Residency - TC

Name of Apartment Home you are interested in: _____

How many bedrooms are you interested in? _____

Date/time received _____

List all persons that are applying to live in this unit:

Staff Initials _____

Name (Last, First, MI)	Relationship	Sex	Disabled Y or N	Social Security Number	Date of Birth
	HOH				

***Acceptable age verifications include: Birth Certificate, Driver's License or passport**

Applicant's Driver's License Number: _____

Current Address: _____
City State Zip Code

Current Daytime Phone: _____ Other Phone: _____

Email Address (Optional): _____

Do you expect to add anyone to the household within the next twelve months? YES ___ NO ___

If yes, please provide the name and relationship of the person to be added, and explain why they are being added.

Have you ever filed bankruptcy? YES ___ NO ___ If yes, please explain (include dates)

Have you or anyone listed on this application ever been convicted of a felony (or have any charges pending against them)? YES NO If yes, please explain (include dates) _____

Is anyone listed on this application required to register as a sex offender in any state? YES ___ NO ___

Please advise Cardinal Capital Management staff if you need assistance reading or completing this application

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Have you or anyone listed on this application ever been evicted? YES ___ NO ___ If yes, please explain (include dates) _____

Have you been or will you be a part-time student for at least 5 months in the current calendar year?

YES ___ NO ___

If yes, at what institution are you enrolled? _____

Have you been or will you be a full time student for at least 5 months in the current calendar year?

YES ___ NO ___

If yes, at what institution are you enrolled? _____

Do you or other adult household members anticipate becoming a full student for at least 5 months in the next calendar year? Yes _____ No _____

Do you or other adult household members anticipate becoming a part-time student for at least 5 months in the next calendar year? Yes _____ No _____

List all addresses that you have lived at within the last three years. (Attach another page if necessary)

Property Address	Dates	Did you Own or Rent	Landlord's Name	Landlord's Address/Phone
	From To			
	From To			

Will you or any adult household member require a live-in care attendant? YES ___ NO

Does the head or co-head of the household require the features of an accessible unit? YES ___ NO

Cardinal Capital Management does not discriminate on the basis of disability status in the admission or access to, or treatment, or employment in, its federally assisted programs and activities



Declaration of Income

Circle One	Description	Family Member	Source	Monthly Income
YES NO	Employment			
YES NO	Self-Employment			
YES NO	Unemployment			
YES NO	Social Security			
YES NO	Social Security (SSI)			
YES NO	VA Benefits			
YES NO	Pension/Annuity			
YES NO	Disability			
YES NO	Child Support			
YES NO	Alimony			
YES NO	Military Compensation			
YES NO	Rental Income			
YES NO	Other Income			
YES NO	Lottery Payments			
YES NO	Workers Compensation			
YES NO	In-kind contributions			
YES NO	Anticipated Income			
YES NO	Recurring Gift			



Declaration of Assets

Circle One	Description	Family Member	Financial Institution	Amount of Income
YES NO	Checking Account			
YES NO	Checking Account			
YES NO	Savings Account			
YES NO	Savings Account			
YES NO	Trust Account			
YES NO	Certificate of Deposit			
YES NO	Money Markets			
YES NO	Mutual Funds			
YES NO	Pension/Annuity			
YES NO	IRA/Keough/401 K			
YES NO	Stocks/Bonds			
YES NO	Real Estate			
YES NO	Personal Property			
YES NO	Cash (more than \$500)			
YES NO	Lump Sum Payment			
YES NO	Whole Life Insurance			
YES NO	Other			



CARDINAL CAPITAL MANAGEMENT
Documents Required (Income Restricted Application)

To help you prepare for your application appointment, and to prevent any unnecessary delays in the application process, please read over the following items you will need to bring with you. If you have any of the following, please submit the originals or copies of the most current documentation with your application.

- _____ 1. Driver's license, birth certificate, state or country ID for proof of age.
 - _____ 2. Rental history (current and previous landlord's address and telephone).
 - _____ 3. Final legal documents if separated or divorced.
 - _____ 4. Latest tax bill showing estimated market values for all owned real estate. (If this is a mobile home and is personal property, bring appraisal). If you sold a home in the last two years, bring proof of sale.
 - _____ 5. All rental properties, land contracts and mortgages owned with amortization schedules.
 - _____ 6. All whole life insurance policies with current name, address and telephone of agent.
 - _____ 7. All stock and bond certificates including Savings Bonds such as E, EE or H bonds along with latest brokerage statements and/or 1099 tax forms.
 - _____ 8. If you have received a lump sum payment, disposed of any assets, and/or changed any assets in the last 24 months, bring proof.
 - _____ 9. Social Security awards letter normally received at the beginning of the year.
 - _____ 10. Veteran's Affairs benefits letter showing claim number and name of veteran.
 - _____ 11. Pension payment information including name, address and phone number of both the company paying pension and the institution distributing pension check.
- *Power of Attorney: If applicant has designated Power of Attorney for finances and that person is signing any part of the application, a copy of the Power of Attorney document must be submitted*



