

PUBLIC ASSISTANCE/TANF VERIFICATION

Send To: «reference_name»
«reference_address_line1»
«reference_address_line2»
«reference_address_line3»
«reference_city», «reference_state» «reference_zip»

Applicant/Tenant: «full_name» Unit #: «apt_nbr»

Soc. Security #: «ssn»

Property Name: «community»

Address: «community_address_line1»
«community_address_line2»
«community_address_line3»
«community_city», «community_state» «community_zip»

Type of Grant: _____

Current Monthly Grant: \$ _____

Will the amount listed under current monthly grant be changed due to a cost of living or inflation index in the next 12 months? Yes _____ No _____

If yes, effective date: _____ New amount: \$ _____

AUTHORIZED SIGNATURE

Print Name: _____ Title: _____

Signature: _____ Date: _____

Telephone: _____ Agency: _____

RETURN TO: «rental_agent» ***RETURN BY:*** «return_date»
«mgmt_company»
«mgmt_company_address1»
«mgmt_company_address2»
«mgmt_company_city», «mgmt_company_state» «mgmt_company_zip»

--OFFICE USE ONLY--

Date Sent: «send_date»

Date Received: _____

Comments: _____