



## APPLICANT QUESTIONNAIRE

Desired Apartment Size:    1 BR    2 BR    3 BR

Date Desired: \_\_\_\_\_

### Household Information

List all household members and all sources of income for each member that will be living in this apartment. Please include overtime, tips, bonuses, commissions, unemployment benefits, public assistance, child support, pension, and social security benefits.

\*If employment listed below is less than two years, please list previous employment for each member of the household.

	Member 1	Member 2	Member 3	Member 4
<b>Name of Each Household Member</b>	<b>First →</b>			
	<b>Last →</b>			
<b>Relationship</b>	HEAD			
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Social Security Number</b>				
<b>Date of Birth</b>				
<b>Student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

#### INCOME ANTICIPATED FOR THE NEXT 12 MONTHS FOR EACH HOUSEHOLD MEMBER

	Member 1	Member 2	Member 3	Member 4
<b>Name of Employer</b>				
<b>Dates Employed</b>				
<b>Position</b>				
<b>Income</b>				
	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly
<b>Name of 2<sup>nd</sup> Employer</b>				
<b>Dates Employed</b>				
<b>Position</b>				
<b>Income</b>				
	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly	<input type="checkbox"/> Annual <input type="checkbox"/> Monthly
<b>Alimony / Child Support</b>				
<b>Social Security, Pensions, Retirement Funds, Etc.</b>				
<b>Self Employment Income</b>				
<b>Other Income</b>				
<b>Other Income</b>				

#### INCLUDE ALL ASSETS HELD AND THE INCOME DERIVED FROM THE ASSETS

	Bank	Account Number	List Average
<b>Checking</b>			
<b>Checking</b>			
<b>Savings</b>			
<b>Savings</b>			
<b>Other Source</b>			

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you have any pets? Yes  No  If yes, please list all pets \_\_\_\_\_

**Housing Information**

Do you own or rent at your current address? Rent  Own

If you have rented an apartment during the past **TWO** years, please list apartment information below:

<u>Current Landlord's Name/ Address</u>	<u>Your Current Address</u>	<u>Dates From: To:</u>
Name: _____	_____	_____
Address: _____	_____	<u>Amount Paid</u>
_____	_____	_____
Phone: _____	_____	_____

<u>Previous Landlord's Name/ Address</u>	<u>Your Previous Address</u>	<u>Dates From: To:</u>
Name: _____	_____	_____
Address: _____	_____	<u>Amount Paid</u>
_____	_____	_____
Phone: _____	_____	_____

**Signature Clause**

I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application.

I authorize management to verify all of the information in this application for the purpose of determining my eligibility for occupancy. I will provide all necessary information including source names, addresses, phone numbers, and account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent on meeting management's resident selection criteria and requirements.

**All ADULT household members must sign**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_





Mail application to:

**Patriot Manor Apartments  
Management Office  
Estate Altona & Welgunst – Suite 6  
St. Thomas, USVI 00802**