

EMPLOYMENT INQUIRY

TO: Manager

DATE:

EMPLOYER:

EMPLOYEE:

ADDRESS:

ADDRESS:

Social Security #

The person named above is a tenant/applicant for rental assistance. One of the requirements of the Federal Law which provides rental assistance is that family income must be within the limits set by US Department of Housing and Urban Development. The information requested below is for the purpose of determining eligibility and will be kept in STRICT CONFIDENCE. Attached is an executed authorization for the release of information form. Thank you for your cooperation by returning this form in person or by mail.

Please complete that portion below which is applicable.

Very truly yours,

Lynette Dillinger, Program Manager

PRESENTLY EMPLOYED:

1. Date of employment: _____ 2. Occupation: _____
3. Present rate of pay \$ _____ per (Check one) _____ hourly _____ weekly _____ monthly
4. Pay periods _____ weekly _____ monthly _____ bimonthly
5. If present rate of pay has been in effect less than 12 months, please give previous pay rate \$ _____
6. Average regular hours worked per week _____
7. Average overtime hours worked per week _____ rate per overtime hour _____
8. Other (tips/meals) if any, estimated amount \$ _____ (day or week, please circle)

REMARKS: _____

I/We certify that the statements above are true and complete to the best of my/our knowledge and belief. I/We understand that false statements of information are punishable under Federal Law.

DATE: _____ SIGNATURE: _____

TELEPHONE NO: _____ TITLE: _____

RETURN TO: Housing Authority, PO Box 107; 1449 West Villard; Dickinson, ND 58602-0107. Should you have any questions regarding this form, please telephone 225-3120.