

**HUGH ASH MANOR, INC.**

740 N. Woodland Boulevard  
DeLand, FL 32720

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

Time: \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

**City, State, and Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**References** (non-relatives)

1. **Name:** \_\_\_\_\_ 2. **Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Phone#:** \_\_\_\_\_

**Household Information**

Full Name	Birth Date	Social Security Number
_____	_____	_____
_____	_____	_____

**Placement Planning:** Please indicate if any of the conditions below apply to either head of household or spouse.

	YES	NO
Are you now living in a government subsidized unit?	_____	_____
Has your residency/tenancy or government assistance in a subsidized housing program ever been terminated for fraud, non-payment of rent or failure to comply with recertification procedures?	_____	_____
Does anyone help you with your daily activities?	_____	_____

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Current Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

**Income Information**

Please answer each of the following questions. For each “yes” answer, provide the details in the space below.

- |  |            |           |
|--|------------|-----------|
| <b>1.</b> Are you, or any member of your household, employer (full-time, part-time, or seasonally)?  | <b>YES</b> | <b>NO</b> |
|  | _____      | _____     |
| <b>2.</b> Do you, or any member of your household, expect to work for any period during the next twelve months?  |            |           |
|  | _____      | _____     |
| <b>3.</b> Do you, or any member of your household, now receive, or expect to receive unemployment benefits?  |            |           |
|  | _____      | _____     |
| <b>4.</b> Do you, or any member of your household, now receive, or expect to receive alimony payments?   |            |           |
|  | _____      | _____     |
| <b>5.</b> Do you, or any member of your household, now receive, or expect to receive income from Social Security?  |            |           |
|  | _____      | _____     |
| <b>6.</b> Do you, or any member of your household, now receive, or expect to receive income from a pension or annuity?   |            |           |
|  | _____      | _____     |
| <b>7.</b> Do you, or any member of your household, receive regular cash contributions from individuals of agencies?  |            |           |
|  | _____      | _____     |
| <b>8.</b> Do you, or any member of your household, receive income from assets including interest on checking or savings accounts, interest and dividends from certificates of deposit, stocks or bonds, or income from the rental of property? |            |           |
|  | _____      | _____     |
| <b>9.</b> Do you, or any member of your household, receive income from any other source not named above?   |            |           |
|  | _____      | _____     |

For each type of income that your household receives, give the source of the income and the amount that can be expected from that source during the next 12 months.

<b>Source of Income/Type of Income</b>	<b>Annual Income</b>
_____	_____
_____	_____
_____	_____

**Assets Information**

List the assets of all persons living in your home. Assets include, but are not limited to, cash held in savings or checking type accounts; safety deposit boxes, home, etc; trust; equity in rental property or other capital investments; stocks, bonds, treasury bills, certificates of deposits, money market funds; individual retirement and Keogh type accounts; retirement and pension funds; lump sum receipts; personal property held as an investment; and any assets disposed of within the last two years at less than their fair market value.

