

Form J
Town of Alstead

**RENTAL/MORTGAGE
VERIFICATION FORM**

THIS FORM MUST BE COMPLETED BY THE LANDLORD/MORTGAGE COMPANY

Tenant's Name: _____ Date: _____

Address: _____
(Number/Street) (Apt. #) (City) (State)

Number of adults in apartment: _____ Number of children in apartment: _____

List of people in apartment:

Rent/Mortgage amount: \$ _____; paid monthly weekly other _____

If subsidized rent, please list tenant portion: \$ _____

Date last rent/mortgage was paid: _____ Amount Paid: \$ _____ Back rent owed: _____

(If back rent/mortgage is owed, please attach accounting of months and amounts)

Occupancy date: _____ Security Deposit: Amount: \$ _____ Date paid: _____

Rent Includes: All Utilities No Utilities Hot Water Heat Electric

Type of Heat: Electric Oil Gas Other _____

For IRS reporting, landlord's Tax ID or Social Security # must be provided:

Tax ID #: _____ **OR** Social Security #: _____

Failure to provide the correct Tax ID or Social Security # may subject payments to backup withholding.

CHECKS MADE PAYABLE TO: (PLEASE PRINT CLEARLY)

Landlord/ Mortgage's Name

Telephone / Fax Numbers

Landlord/Mortgage Address

Name of Manager or other Representative

Landlord/Mortgage Signature

Date