

# Annual Re-Certification Form for Deed-Restricted Rental Units

**MID-GBZR 6-110g**

(To be filed every year)

**Development Name:** \_\_\_\_\_

**Administrator or Management Company:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Property and Ownership Information:**

Property Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

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

**Renter Information: Head of Household**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Current Annual Salary: \_\_\_\_\_

Income from other Sources: \_\_\_\_\_

Total Annual Income: \_\_\_\_\_

**Other Adult Household Members:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Current Annual Salary: \_\_\_\_\_

Income from other Sources: \_\_\_\_\_

Total Annual Income: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Current Annual Salary: \_\_\_\_\_

Income from other Sources: \_\_\_\_\_

Total Annual Income: \_\_\_\_\_

**Other Household Members under age 18:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

**NOTE: For verification purposes only, proof of income, employment, age and education (for dependents) and any other required documentation must be submitted with this form.**