

126 WEST 6<sup>th</sup> STREET

EAST LIVERPOOL, OH 43920

Ph: 330-385-5437

Fax: 330-385-3955

HEAD OF HOUSEHOLD \_\_\_\_\_ SS# \_\_\_\_\_

SPOUSE \_\_\_\_\_ SS# \_\_\_\_\_

**PLEASE PROVIDE STREET ADDRESS**

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Previous East Liverpool address if applicable \_\_\_\_\_

Phone Number \_\_\_\_\_

Date you became a resident of East Liverpool \_\_\_\_\_

Do you own or rent your current address? \_\_\_\_\_

If you rent -- Name and Address of Landlord \_\_\_\_\_

**SOURCES OF INCOME**

**EMPLOYMENT- (provide Name and Address of Employers) indicate self or spouse**

NAME	ADDRESS	CITY	SELF/SPOUSE
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

OTHER (explain)

SELF-EMPLOYED Trade Name & Address

RENTAL INCOME (Yes/No)

List all properties & date rental started (on back or attach a separate page)

OTHER INCOME: (explain)

**LIST ALL OTHER RESIDENTS IN HOUSEHOLD (Over age 18)**

<b>NAME</b>	<b>AGE</b>	<b>SS#</b>	<b>EMPLOYER/CITY</b>
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_