

REQUEST FOR VERIFICATION OF EMPLOYMENT CONVENTIONAL PROPERTIES

Name and Address of Applicants Employer:			Name of applicant:		
			Address:		
			Social Security Number:		
			Work Division or I.D. Number:		
To Employer: An application has been made by the above named applicant for residency in our apartments. The applicant has indicated that he (she) is employed by you, and would appreciate it if you would confirm this			I hereby give my approval for verification of my employment and salary status.		
employment in the space provided below.			Applicant Signature	Date	
	ЕМІ	PLOYER'S	VERIFICATION		
Present Position	Date Hired	Hourly \$ Weekly \$ Annual \$	Present Rate of Pay X hrs/wk X wk/yr X wk/yr Per Year		
Additional Compen (Actual Amounts receive		lve months)	Overtime \$ Commissions \$ Bonus \$ Tips \$		
Probability of conti	nued employn	nent:	Anticipated <u>Total</u> Income for the Next 12 Months:		
Military Service: If A	Applicant is in milita	ary service plea	ase report income on a m	onthly basis as fo	ollows:
Base Pay \$hazard duty allowand	ce \$; quarters & 	subsistence \$		_; flight or
Please return this form to:					
Carlton Apartments 125-A2 West Farrell Ave Ewing NJ 08618 609-403-0197 CarltonTeam@jcmliving.com			Employers Signature	Date	_
			Title	Phone	_
			Thank you for your assistance.		
			Management Representative		