## **JCM**living

## REQUEST FOR VERIFICATION OF EMPLOYMENT CONVENTIONAL PROPERTIES

Name and Address of Applicants Employer:  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 employment in the space provided below.			Name of applicant:  Address:  Social Security Number:  Work Division or I.D. Number:  I hereby give my approval for verification of my employment and salary status.  Applicant Signature  Date		
EMPLOYER'S VERIFICATION					
Present Position	Date Hired	Present Rate of Pay			
Additional Compensation: (Actual Amounts received over the last twelve months)			Overtime         \$           Commissions         \$           Bonus         \$           Tips         \$		
Probability of continued employment:			Anticipated <u>Total</u> Income for the Next 12 Months:		
Military Service: If Applicant is in military service please report income on a monthly basis as follows:					
Base Pay \$hazard duty allowand		; quarters & 	subsistence \$; flight or		
Please return this from to:					
Lindcrest Apartments 1116 N Stiles St Linden, NJ 07036 Phone: 908.986.2406 Fax: 908-486-916 lindcrestapts@jerseyc.com			Employers Signature  Title  Thank you for your and Management Representative		

