

**Names:**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Primary Social Security Number      First Name      Middle      Last Name

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Spouse's Social Security Number      First Name      Middle      Last Name

Primary date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_      Spouse's date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Registration for the city or village of: \_\_\_\_\_

**Current Residence Address Information:**

\_\_\_\_\_  
Street No.      Street Name      Apt. /Suite #      PO Box

\_\_\_\_\_  
City / Village      State      Zip Code

Date you moved to this address: \_\_\_\_/\_\_\_\_/\_\_\_\_      Contact Phone No. (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Do you own or rent your home? (Please check  one) Own  Rent

If renting please give the Landlord's name, address and phone number \_\_\_\_\_

**Previous Residence Address Information:**

\_\_\_\_\_  
Street No.      Street Name      Apt. /Suite #      City / Village      State      Zip Code

Date you moved to this address: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Employment Information:** (Check Yes or No, if retired please include date of retirement)

Are you employed? Yes  No       Is your spouse employed? Yes  No

Are you retired and/or have no taxable income? Yes  No       If Yes, date you retired: \_\_\_\_/\_\_\_\_/\_\_\_\_

Is your spouse retired and/or have no taxable income? Yes  No       If Yes, date your spouse retired: \_\_\_\_/\_\_\_\_/\_\_\_\_

Do you have income reported on Federal Schedules C, E or F? Yes  No

Does your spouse have income reported on Federal Schedules C, E or F? Yes  No

Do you and/or your spouse own rental property? Yes  No  (Please list tenant's name, address and date you began renting property. If you have multiple properties, please supply additional information on back or a separate sheet of paper.)

Tenant's First, Last Name and address: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_