



KITSAP COMMUNITY  
*Resources*

For Administrative Use Only: \_\_\_\_\_

Received by: \_\_\_\_\_

KCR Staff Signature \_\_\_\_\_

Date \_\_\_\_\_

Verified by:

TELEPHONE CALL

KITSAP COUNTY TAX RECORDS

## LANDLORD STATEMENT

**LANDLORD OR AUTHORIZED MANAGER:** Please complete all sections below.

**Tenant's Name:** \_\_\_\_\_

Names of all adults and children living at this residence:

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

_____	ADDRESS	_____	APARTMENT NUMBER
_____	CITY	_____	STATE
_____		_____	ZIP CODE

**Date tenant moved in:** \_\_\_\_\_ **The total rent amount:** \_\_\_\_\_

**Is this a subsidized housing unit (HUD, Section 8, etc.)?**  YES  NO

- If subsidized, the tenant's payment is: \_\_\_\_\_

**Is the tenant behind on rent?**  YES  NO **Date that rent is paid up to:** \_\_\_\_\_

**Does the tenant work for a portion of the rent?**  YES  NO

- If yes, the amounts worked off for the last 3 months are:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Is the tenant responsible for heat costs separate from the rent?**  YES  NO

**The main source of heat is:**  ELECTRIC  GAS  PROPANE  OIL  WOOD

**Landlord/Manager's Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

_____	ADDRESS	_____	APARTMENT NUMBER
_____	CITY	_____	STATE
_____		_____	ZIP CODE

**Landlord/Manager's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_