## **CERTIFICATION**

I/We hereby certify that I/We do/will not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that my eligibility for housing will be based on applicable income limits and by management's selection criteria. I/We certify that all information in this application is true and will lead to cancellation of this application or termination of tenancy after occupancy. SIGNATURE (S):

| Applicant  | Co-Applicant  |
|--|---|
| Dated  | Dated   |
|  | AUTHORIZATION   |
| authorized representative organizations to obtain  | rize Riverbirch Village Apartments and its staff or the to contact any agencies, local police departments, offices, groups or and verify any information or materials which are deemed necessary to ation for housing in programs administered/managed by Knox Housing  |
| SIGNATURE(S):  |   |
| Applicant  | Co-Applicant_   |
| Dated  | Dated   |
| application for process<br>cashier's check. Once<br>the apartment. Once t<br>If you cancel within th | undable application fee due at the time that you submit your sing. This fee must be paid in the form of a check, money order or your application is approved, a security deposit must be paid to hold he deposit is paid, you will have 72 hours to cancel your application. e 72-hour time period, you will receive a check for the full amount, e notice of cancellation. No refunds will be given for cancellations the deposit is received. |
| initial  | initial   |
| date   | date  |