

Property Name _____ Unit # _____

Resident Name _____ (main contact)

Resident Name _____ (other adult)

Resident Name _____ (other adult)

Resident Name _____ (other adult)

Resident Phone _____ Call / Text / Both

Resident Phone _____ Call / Text / Both

Resident Email(s) Required

Resident will receive Important Time Sensitive messages & due dates via email from Recert Geeks

Move in Date _____ Recert Due Date _____

HouseHold Size _____ Income Limit _____ @ _____ %

Please attach the following documents, if applicable:

(for **each** household member 17 years and older)

TIC and all TICQ(s) from last Recert

If anyone is turning 18 within the next 12 months please include their add-on application

Any applications for new household add ons

Proof of any persons being removed from lease that will not be included in this recertification

Special Instructions/Notes

File Submission Date _____ Number of Pages Sent _____

Upload file at RecertGeeks.com Start an E-Cert