

TIP/GRATUITY INCOME AFFIDAVIT

Applicant/Tenant: _____ Unit #: _____

Name of Employer: _____

Job Title: _____

1. Do you receive tips or gratuities at this job? YES NO

2. Please list the average amount of tip/gratuity received: \$ _____

\$ _____ per day week other _____

3. Are all tips reported to the employer? YES NO

If NO, please explain:

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

Tenant Signature: _____ Date: _____

Management Signature: _____ Date: _____