

R & L PROPERTIES, LLC

Phone (540) 366-2374 or 540-345-8827– Fax (540) 366-3160

VERIFICATION OF INCOME FROM WAGES

Date: _____

To: _____

Re: _____

SS#: _____

Dear Employer:

The above referenced individual has applied or is a resident at our community.

We ask that you complete and return this form to the address shown below. The information will be used solely for the determination of residency eligibility and will not be disseminated or otherwise released to any third party.

Thank you,

Property Manager
R & L Properties, LLC

I hereby authorize the release of the information requested on this verification form.

Applicant/Resident's Signature

Date

Date of Hire: _____

Position: _____

Hourly Rate: _____

Average Number of Hours Worked per Week: _____

Overtime Rate: _____

Average Number of Overtime Hours a Week: _____

Does employee earn any tips? _____ If yes, how much. _____

Commissions? _____ If yes, how much. _____

Bonuses? _____ If yes, how much. _____

Shift Differential Pay? _____ If yes, how much. _____

Do you anticipate an increase in the base pay over the next twelve months? If so please indicate the amount of anticipated increase:

\$ _____ per _____ effective on _____.

Employer Signature

Date

Name (print) and Title

Phone Number