

Community and Economic Development 4800 South 188th Street SeaTac, WA 98188 206-973-4750 www.seatacwa.gov

Multi-Family Property Tax Exemption Program Tenant Income Verification Form

This form is to be filled out by the tenant and returned to the property manager. ☐ Initial Income Verification ☐ Annual Renewal Tenant(s) Name: Unit Number: ____ Monthly Rent: _____ Monthly utilities/ renter's insurance paid by tenant: _____ Number of persons in household: Current annual gross income: _____ Amount of gross income received from each source in the past 12 months: Income Source Amount **Employment** Payments in lieu of earnings (e.g., unemployment, disability compensation) Income from business operations and income from real or personal Periodic payments (e.g., Social Security, pensions, child support) Public assistance payments I/we certify that the information presented in this form is true and accurate to the best of my/our knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of the lease agreement. Tenant Signature: _____ Date: _____ Tenant Signature: ______ Date: _____ Tenant Signature: _____ Date: _____

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