

**CITY OF MIDLAND SENIOR LIVING COMMUNITY
APPLICATION INFORMATION**

Washington Woods Apartments
821 Cambridge Street
Midland, Michigan 48642

Telephone: (989) 837-3494

Riverside Place Apartments
400 East Main Street
Midland, Michigan 48640

Telephone: (989) 837-3535

The City of Midland Senior Living Communities are Smoke Free environments.

1. Name _____ Social Security # _____
(Please use your own number, not any other number you receive benefits under.)

2. Address _____
(Street)

_____ (City and State) _____ (Zip Code)

3. Telephone: (Area Code) _____ E-mail Address _____

4. Age ____ Date of Birth _____ Married ____ Single ____ Widowed ____ Divorced ____

5. Name of Spouse, if married _____ Age _____
Social Security No. _____ Date of Birth _____
Spouse will ____ will not ____ be sharing an apartment.

6. Name of person(s) planning to live with you other than your spouse:
Social Security No. _____ Relation _____ Date of Birth _____

7. Will a barrier-free apartment be required? Yes _____ No _____

8. If we have an apartment and are unable to reach you, do you have another person that we should contact on your behalf:

Name _____ Telephone # _____ Relation _____

9. If you have high medical bills that are not reimbursed by insurance, please list the amounts and dates. We need written verifications from pharmacy, doctors, hospitals, etc.

10. Please be as accurate as possible with the monthly income and asset valuations requested below. All accounts must be officially verified before applicant can be placed on the waiting list.

<u>Monthly Income</u>		<u>Asset Valuation</u>	
<u>Source</u>	<u>Amount</u>	<u>Type</u>	<u>Total Value</u>
Social Security	_____	Savings Account(s)	_____
Supplemental Security Income (SSI)	_____	Checking Account(s)	_____
V.A. Pension	_____	Savings Certificates	_____
Company Pension	_____	Stocks (Market Value)	_____
Interest (Savings)	_____	Bonds	_____
Dividends (Investment)	_____	Real Estate - S.E.V. (State Equalized Value)	_____
Annuity	_____	Existing Mortgage	_____
Land Contract (Interest ONLY)	_____	Annuity (Value)	_____
Other	_____	Land Contract (Value)	_____

11. If you have given away or sold an asset (such as property) during the past two years, please list:

12. I/We certify that all information submitted in this application is true and correct. I understand that intentional misrepresentation of any information may disqualify my application.

DATE: _____ Applicant
 _____ Applicant
 _____ Applicant Representative

Return to: Riverside Place, 400 East Main Street, Midland, MI 48640