Shared Housing Verification Instructions

Part I (to be completed by the requester):

- Enter your name and the date the form must be returned.

Part II (to be completed by the requester):

- Enter the name and address of the head of household sharing housing expenses with the person named in Part III; and
- Enter the date the person moved in.

Part III (to be completed by person applying for benefits who is sharing expenses with the head of household):

The Authorization to Release Information must be fully completed.

Part IV (to be completed by the head of household who is either the primary tenant or homeowner):

A. Household Information: answer all three questions;

B. Rental Information: answer all three questions;

C. Utility Information: answer one of the four questions in this section.
   - If all utilities are included in the rent, answer number 1.
   - If the tenant pays for heat, or air conditioning or both, answer number 2.
   - If the tenant pays for electricity (nonheat), gas/oil (nonheat), garbage removal, answer number 3.
   - If the tenant pays for a land phone or a cell phone, answer number 4.
   (Check unknown if you do not know if the tenant pays for a land or cell phone.)

D. Head of Household Information: The head of household who is the primary tenant or homeowner must print their name, sign and date this section.

NOTE: The requester should complete the Requester Use Only box when the completed form is returned.
Shared Housing Verification

Part I

Requester Name ____________________________

Return the completed form by ___/___/______

Part II

Name of head of household sharing expenses with the person named in Part III.

Street Address ____________________________________________

City/Town _______ ZIP _______

Date person named in Part III moved in: ___/___/______

This Shared Housing Verification form explains how you and the other people living at your address share the costs for rent, utilities, and food. Section IV, below, must be completed by the head of household.

Part IV (TO BE COMPLETED BY THE HEAD OF HOUSEHOLD)

A. Household Information

1. Is anyone in your family related to the person named in Part III? ☐ Yes  ☐ No
2. Do you purchase and prepare meals together? ☐ Yes  ☐ No
3. Name of all household members, including the person named in Part III ________________________________________________

B. Rental Information (for person living with you)

The person living/sharing with you:

1. Gets meals provided? ☐ Yes  ☐ No  If yes, how many meals per week? ______
   Amount paid per week for these meals is $________

2. Rents a room? ☐ Yes  ☐ No
3. Pays rent in the amount of $______ per ☐ month  ☐ week  ☐ other _________(specify)

C. Utility Information (for person living with you)

1. No Separate Utilities: All utilities are included in the rent.  ☐ Yes
2. Heating/Cooling: Does the person living/sharing with you pay for either of the following SEPARATE from rent? ☐ heating (seasonally) ☐ air conditioning (seasonally)
3. Nonheating: Does the person living/sharing with you pay for any of the following utilities SEPARATE from rent? ☐ electricity (nonheat) ☐ gas/oil (nonheat) ☐ water/sewerage ☐ trash/garbage removal ☐ other ______________________ (specify)
4. Telephone: Does the person living/sharing with you pay for a telephone (may include a cell phone)? ☐ Yes  ☐ No  ☐ Unknown

D. Head of Household Information

Name of Head of Household ____________________________

Signature of Head of Household ____________________________

Date ____________________________

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