

## CERTIFICATION OF DEPENDENT CHILD(REN)

Household Name: \_\_\_\_\_

Date: \_\_\_\_\_

Property Name: \_\_\_\_\_

Unit # (if assigned): \_\_\_\_\_

I, \_\_\_\_\_, certify that my child(ren) reside(s) 50% or more in my household, I am not a dependent on another party's tax return and

- |                          |  |
|--------------------------|--|
| _____<br>(Name of Child) | <input type="checkbox"/> will be claimed as a dependent on either parent's tax return for this taxable year.   |
|                          | <input type="checkbox"/> will <u>not</u> be claimed as a dependent on my tax return but will be claimed on another party's tax return for this taxable year. |
|                          | <input type="checkbox"/> will not be claimed as a dependent on any tax return for this taxable year.   |
| _____<br>(Name of Child) | <input type="checkbox"/> will be claimed as a dependent on either parent's tax return for this taxable year.   |
|                          | <input type="checkbox"/> will <u>not</u> be claimed as a dependent on my tax return but will be claimed on another party's tax return for this taxable year. |
|                          | <input type="checkbox"/> will not be claimed as a dependent on any tax return for this taxable year.   |
| _____<br>(Name of Child) | <input type="checkbox"/> will be claimed as a dependent on either parent's tax return for this taxable year.   |
|                          | <input type="checkbox"/> will <u>not</u> be claimed as a dependent on my tax return but will be claimed on another party's tax return for this taxable year. |
|                          | <input type="checkbox"/> will not be claimed as a dependent on any tax return for this taxable year.   |
| _____<br>(Name of Child) | <input type="checkbox"/> will be claimed as a dependent on either parent's tax return for this taxable year.   |
|                          | <input type="checkbox"/> will <u>not</u> be claimed as a dependent on my tax return but will be claimed on another party's tax return for this taxable year. |
|                          | <input type="checkbox"/> will not be claimed as a dependent on any tax return for this taxable year.   |

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.

\_\_\_\_\_  
Signature of Applicant/Tenant

\_\_\_\_\_  
Date