



Reynoldstown Senior Residences
Application Processing Documents

1. **Proof of Age:** Birth Certificate or Current Passport
2. **Picture ID:** Please bring/provide a copy of Drivers License or State Issued Picture ID
3. **Social Security Card:** Please bring/provide a signed copy of card for all household Members
4. **Proof of Citizenship:** Verification of eligible immigration status (if applicable)

INCOME:

- 1) **Social Security/SSI:** Current Printout or letter from Social Security Office (cannot be over 90 days old)
- 2) **Employment:** Name, Address, Contact Name & Number and fax number of employer. Last 4 check stubs or current W-2 form
- 3) **Pension/Annuity:** Name, Address, Contact Name & Number and fax number of Pension/Annuity office. Last 90 days of pension/annuity statement/letter
- 4) **Alimony:** Current divorce Decree
- 5) **Self Employed:** Last (3) three years of tax transcript
- 6) **VA Benefits:** Current letter or printout of benefits including any deductibles
- 7) **Unemployment Benefits:** Award Letter
- 8) **Child Support:** Court Order & Payment History
- 9) **Retirement Savings:** (IRA, Military/VA, Teachers, Railroad), Please provide current statement/printout

- 10) **Cash Contributions:** Must be counted as income, Please provide statement of amount(s) given on an ongoing basis for person(s) not living with applicant.

ASSETS:

- 1) **Checking Account:** Name, Address, Contact Name & Number, Fax Number and Account Number. Last (6) months of complete Bank Statements (must be in date order, ex: Jan., Feb, March, April, May and June)
- 2) **Savings Account:** Name, Address, Contact Name & Number, Fax Number and Account Number. Copy of Current Savings Statement (cannot be over 90 days old)
- 3) **CD/Stocks/Bonds:** Name, Address, Contact Name and Number, Fax Number and Account Number(s).
- 4) **Life Insurance:** Name, Address, Contact Name & Number, Fax Number and Account Number.
- 5) **Real Estate:** (For Sale): Name, Address, Contact Name & Number and Fax Number of Real Estate Agent (if applicable). Current Market Value of Home and Mortgage Statement (if applicable). (If rented to another party): Please provide proof of rental income, current market value, mortgage statement and any expenses paid for upkeep of home.

EXPENSES:

- 1) **Prescriptions:** Name, Address, Phone & Fax Number of all Pharmacies. Current printout from Pharmacy of last 12 months of Prescription Costs incurred by you.
- 2) **Medical Insurance:** Verification of any out of pocket Health Insurance costs including deductibles. Please provide Name, Address, Contact Name & Number, Fax Number and Account Number.
- 3) **Doctor/Dentist/Eye/Hospital Bills:** Name, Address, Contact Name & Number and Fax Number.

Rental Information: Name, Address, Contact Name & Number and Fax Number of Current Housing Provider and previous landlord for last 3 years.

References: One (1) personal and one (1) professional reference (cannot be related to applicant)