



Confidential Data Application

APPLICANT NAME: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____ PHONE #: _____

	First Person	Second Person
<u>ASSETS:</u>		
Equity in Residence (Est Value less Mortgage)	\$ _____	\$ _____
Savings & CD's	\$ _____	\$ _____
Stocks & Bonds	\$ _____	\$ _____
Trusts & Estates available for use	\$ _____	\$ _____
Checking Account	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
TOTAL ASSETS	\$ _____	\$ _____

<u>MONTHLY INCOME</u>		
Social Security	\$ _____	\$ _____
Pension/Retirement Income	\$ _____	\$ _____
Interest Income	\$ _____	\$ _____
Dividends	\$ _____	\$ _____
Rental Income	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
TOTAL INCOME	\$ _____	\$ _____

I understand that prior to approving this application; St. John's may request additional information concerning my finances. I hereby declare that all statements made on this application are true and accurate to the best of my knowledge. I understand that failure to provide accurate and truthful information may result in termination of this agreement and my opportunity for residence at St. John's Meadows or Brickstone, by St. John's at any time.

Applicant Signature

Date

Applicant Signature

Date

Legal Representative Signature (if applicable)

Date