Form W-147Q LLF
Rev. 5/3/12

Human Resources Administration
Department of Social Services
Family Independence Administration

Primary Tenant's Statement Regarding Occupancy of Secondary Tenant

Primary Tenant's Name: _____	**Secondary Tenant's Name:** _____
Case Number (if any): _____	
Address: _____	Address: _____
_____ Apt. Number: _____	_____ Apt. Number: _____
Borough: _____ Zip Code: _____	Borough: _____ Zip Code: _____

I, _____, do hereby declare that I am the primary tenant of apartment _____ located at _____ _____.

I do also declare that _____ also lives on these premises.
(name of secondary tenant)

I charge $ _____ per month rent for providing shelter (heat/utilities). Attached is a copy of my lease or other documentation demonstrating that I am a legal tenant of this apartment.

Rent payment method (check the applicable boxes):

☐ Rent is paid directly to the landlord. ☐ Rent is paid directly to me.

I share meals with the secondary tenant named above:

☐ Yes ☐ No

I swear under penalty of perjury that the information I have given on this form is correct and complete to the best of my knowledge.

_____	_____	_____
Signature of Primary Tenant	Telephone	Date