Form W-147Q (face)
Rev. 2/20/01

The CITY of NEW YORK
Human Resources Administration
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: ____ Zip Code: _____	Apt. Number: ____ 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.

Check the applicable boxes:

Rent payment method: ☐ Rent is paid directly to me.
☐ Rent is paid directly to the landlord.

I do ☐ do not ☐ share meals with the secondary tenant named above.

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