

# DCC-90C RESIDENCE-HOUSEHOLD VERIFICATION INSTRUCTIONS

**\*\*The applicant is to have the DCC-90C Residence-Household Verification completed by someone outside of his/her household who is familiar with the applicant's living arrangements**

**\*\*This form may also be completed by someone living inside the home of the applicant as long as he/she is the landlord and not included in the applicant's household size. This could include a client living with and paying rent to a parent**

**The individual completing this form needs to complete the highlighted areas.**

## TO WHOM IT MAY CONCERN:

The above-named person stated you are familiar with his/her situation.  
PLEASE ANSWER THE QUESTIONS IN THE MARKED [ ] SECTION(S) TO THE BEST OF YOUR ABILITY.

### RESIDENCY

This is to certify that Jane Doe lives 123 Main Street Apt #3  
(Recipient's Name) (Address)  
Richmond KY 40475 in Madison with telephone # 859-000-0000  
(City) (State) (ZIP) (County)

HOUSEHOLD COMPOSITION [ ] UNKNOWN

### List all household members

HOUSEHOLD MEMBERS	RELATIONSHIP TO APPLICANT
Lisa Doe	Daughter
Robert Doe	Son
George Doe	Spouse

Are you related to a household member? [ ] Yes [ **X** ] No Are you the manager/landlord? [ ] Yes [ **X** ] No

I hereby certify that the information contained in this form is true and correct to the best of my knowledge. I understand that if I give false information or withhold information I may be subject to prosecution for fraud.

SIGNATURE OF PERSON

PROVIDING INFORMATION Nancy Wilson DATE 8/11/2011

ADDRESS 625 Main Street PHONE 859-111-1234

CITY Lexington STATE KY ZIP 40511