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### FAMILY CHOICE OF RENT FORM

NAME: [first name last name]

ADDRESS: 98 Croix Street #[apt]

Negaunee, MI 49866

DATE OF RENT CHANGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE FLAT RENT: 1 Bd. Rm. SM - $482.00; MED - $556.00; LG. - $582.00 2 Bd. Rm. - $718.00

THE INCOME BASED RENT FOR YOUR APARTMENT IS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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#### TENANT SELECTION OF RENT

I CHOOSE (CHECK ONE)

\_\_\_\_\_\_\_ FLAT RENT OF \_\_\_Small $482.00 \_\_\_Med $556.00

\_\_\_Large $582.00 \_\_\_Two Bdrm $718.00

\_\_\_\_\_\_\_ INCOME BASED RENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_

I UNDERSTAND THAT I MAY CHANGE MY CHOICE OF RENT ACCORDING TO THE GUIDELINES I HAVE RECEIVED.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### SIGNATURE OF HEAD OF HOUSEHOLD DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### SIGNATURE OF OTHER ADULT DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

N.H.C. REPRESENTATIVE DATE