

Commonwealth Real Estate Services

18150 SW Boones Ferry Road

Portland, OR 97224

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(503) 768-4660 Fax

**55 OR OLDER HOUSING
COMMUNITIES OCCUPANCY
DETERMINATION &
AGE VERIFICATION****FORM
55B**

DATE: _____ COMMUNITY NAME: _____

RESIDENT NAME : _____

RESIDENT ADDRESS: _____ SPACE #: _____

CITY: _____ STATE: Oregon ZIP: _____

MAILING ADDRESS if different than above: _____

CITY: _____ STATE: _____ ZIP: _____

Documentation Verifying Age of Residents and Occupants – Please Print

Instructions: Indicate whether you are a Resident or Occupant and check off the document used for verifying your age.

1. ☐ RESIDENT ☐ OCCUPANT Name: _____ Date of Birth: _____☐ Driver's license _____ ☐ Passport _____ ☐ Immigration card _____☐ State ID _____ ☐ Military ID _____ ☐ Birth certificate _____☐ Any other official documents containing a birth date or a certification/affidavit signed by a member of the household age 18 years of age or older attesting that at least one person in the unit is 55 years of age or older.*Please Note Document Used:* _____2. ☐ RESIDENT ☐ OCCUPANT Name: _____ Date of Birth: _____☐ Driver's license _____ ☐ Passport _____ ☐ Immigration card _____☐ State ID _____ ☐ Military ID _____ ☐ Birth certificate _____☐ Any other official documents containing a birth date or a certification/affidavit signed by a member of the household age 18 years of age or older attesting that at least one person in the unit is 55 years of age or older.*Please Note Document Used:* _____3. ☐ RESIDENT ☐ OCCUPANT Name: _____ Date of Birth: _____☐ Driver's license _____ ☐ Passport _____ ☐ Immigration card _____☐ State ID _____ ☐ Military ID _____ ☐ Birth certificate _____☐ Any other official documents containing a birth date or a certification/affidavit signed by a member of the household age 18 years of age or older attesting that at least one person in the unit is 55 years of age or older.*Please Note Document Used:* __________
Tenant/Occupant Signature Print Name Date_____
Tenant/Occupant Signature Print Name Date_____
Tenant/Occupant Signature Print Name Date_____
Manager/Agent Signature Print Name Date

White – Resident File Yellow – Resident