



# Assisted Living Housing Application

**RETURN TO:** Jones-Harrison Assisted Living, 3700 Cedar Lake Ave., Minneapolis, MN 55416      Application Received \_\_\_\_\_

How did you hear about Jones-Harrison? \_\_\_\_\_

Applicant's Name(s) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Email \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_  Cell  Home

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      2nd Applicant's Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

SSN \_\_\_\_\_      2nd Applicant's SSN \_\_\_\_\_

## PRIMARY CONTACT

Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State / ZIP \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_

## SECONDARY CONTACT

Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State / ZIP \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Desired Occupancy Date     Immediately     1-3 Months     Within 1 Year     Other \_\_\_\_\_

Apartment Preference     Studio     One-bedroom     One-bedroom + Den     Two-bedroom  
 Lake View     Closer to Elevator     Garden View  
 The Garden Memory Care

I / We certify that all the information contained in this **Application and Financial Statement** is accurate and complete to the best of my / our knowledge. I / We authorize Jones-Harrison to verify this information and / or obtain this information as needed.

\_\_\_\_\_  
*Signature of Applicant or Representative*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Applicant or Representative*

\_\_\_\_\_  
*Date*

.....

**FOR OFFICE USE ONLY**

Units Toured \_\_\_\_\_

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CURRENT SOURCE OF INCOME

Source	Monthly Income	Expected Duration
1. Social Security	_____	_____
2. Pensions - Retirement	_____	_____
3. Rentals	_____	_____
4. Interest	_____	_____
5. Other	_____	_____
<b>TOTAL INCOME</b>	_____	_____

## CURRENT ASSETS

### Real Estate

Location - City, State	Remaining Mortgage Balance	Market Value
A. _____	_____	_____
B. _____	_____	_____
C. _____	_____	_____

### Investments (stocks / bonds, trusts, portfolios, etc.)

Source	Latest Market Value
A. _____	_____
B. _____	_____
C. _____	_____

### Financial Institution Accounts and All Other Income or Assets

Name	Amount
A. _____	_____
B. _____	_____