

Financial Capability Information

Providing the information requested herein is voluntary. However, be aware that sufficient information about whether or not you have the financial capability to properly manage the leased property must be provided for your proposal for it to be considered responsive. Proposer/s must provide sufficient information about their total income and available financial resources along with sufficient information about financial liabilities/obligations for the NPS to make an informed conclusion about the overall financial capability of the proposer/s.

Financial information shall be used by the Government only for the purpose of evaluating the proposal, except (i) if a Lease is awarded to the proposer as a result of or in connection with submission of the proposal, the Government shall have the right to use the information provided in the Lease, and (ii) if the same information is obtained from another source without restriction it may be used without restriction.

Applicant Information			
Name/s:			
Current address:			
City:		State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:		How long?
Previous address:			
City:		State:	ZIP Code:
Owned Rented (circle)	Monthly payment or rent:		How long?

Co-Applicant Information, if applicable and different from above			
Name:			
Current address:			
City:		State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:		How long?
Previous address:			
City:		State:	ZIP Code:
Owned Rented (circle)	Monthly payment or rent:		How long?

Employment Information			
Current employer:			
Employer address:			How long?
Phone:			
City:		State:	ZIP Code:
Position:	Hourly Salary (Please circle)		Annual income:

Co-Applicant Employment Information, if applicable			
Current employer:			
Employer address:			How long?
Phone:			
City:		State:	ZIP Code:
Position:	Hourly Salary (Please circle)		Annual income:

Other Income or Financial Resources (such as savings/checking accounts, brokerage account, side business income, etc.) If additional space is needed, attach additional copies of this form.

Source:	Amount:	Documentation available?

Financial Liability Information If additional space is needed, attach additional copies of this form.

Have you ever filed for bankruptcy? No Yes – if yes, how recent?

Loans, Credit Balances or other debts greater than \$10,000

Type or Institution:	Current Balance:	Payment:	Frequency:
Type or Institution:	Current Balance:	Payment:	Frequency:
Type or Institution:	Current Balance:	Payment:	Frequency:
Type or Institution:	Current Balance:	Payment:	Frequency:
Type or Institution:	Current Balance:	Payment:	Frequency:
Total Balance			

Non-discretionary Spending

Household (mortgage, rent, insurance)	Frequency	Amount:
Utilities	Frequency	Amount:
Transportation (auto loans, insurance,...)	Frequency	Amount:
Health Care	Frequency	Amount:
Other (child care, alimony, child support,...)	Frequency	Amount:
Total Spending		

I declare that the foregoing is true and correct.

Signature of applicant:	Date:
Signature of co-applicant:	Date: