

Please return to:  
The Summit at Cross Creek  
100 Cross Creek Court  
Central, SC, 29630  
Phone: 864-639-2209  
Fax: 864-639-2211

### Verification of Employment

Date: \_\_\_\_\_ Regarding: \_\_\_\_\_  
To \_\_\_\_\_ SSN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Attention: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_ (employer name) to release the information requested below regarding my employment status and compensation.

\_\_\_\_\_  
Applicant Signature Date

The above individual has made application for residency to our community. This individual lists your company as the current or anticipated employer. For the applicant to be eligible to apply for housing, this form must be completed by an authorized associate of your office. All information provided by you will be held in strict confidence. We appreciate your prompt attention to this verification. If you have any questions, please feel free to contact us at the number listed above.

**Please complete the following. If a section does not apply, please mark none or**

**\$0.00.**

Date of hire: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_  
Current rate of regular pay: \$\_\_\_\_\_ per (circle one) hour, week, month, year  
Number of regular pay hours normally worked each week: \_\_\_\_\_  
Does this employee receive regular overtime each week (circle one): Yes No  
If yes, # of overtime hours worked per week: \_\_\_\_\_  
If yes, current rate of overtime pay: \$\_\_\_\_\_  
Does this employee receive regular bonus pay, incentive pay, commission, tips, etc.?  
Yes or No  
If yes, amount \$\_\_\_\_\_ per week/month/year If yes, what type? \_\_\_\_\_  
Do you anticipate change in the rate of pay? Yes or No  
If yes, amount \$\_\_\_\_\_ per hour, week, month, year  
If yes, anticipated date of increase: \_\_\_\_\_

Comments:  
I hereby certify that the above information I have provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of person who completed form Printed name and Title

\_\_\_\_\_  
Telephone Number Date Completed