

PO Box 7000, Leesburg, VA 20177-7000 703-737-8323 *O* | 703-771-5454 *F* | housing@loudoun.gov loudoun.gov/housing

Affordable Dwelling Unit (ADU) Program – Notarized Renewal Letter

I/We,	(Applicant) and(Co	0-
Appli	(Applicant) and(Cont(s), if applicable):	
1.	Do or Do Not (Please circle which applies to your household) receive child support or alimony. If you receive child support or alimony, please provide a copy of the official document indicating how much you receive.	
2.	Do or Do Not (Please circle which applies to your household) have any children over tage of 18 years old residing in your household. If you do, provide documentation that indicates if they are full-time students (12 credits or more) or employed.	
3.	Marital Status: (Please circle which applies to your household): a. I am not married b. I am married c. I am separated d. I am divorced	
4.	Do or Do Not (Please circle which applies to your household) receive Social Se Retirement Income. If you do, provide the allocation letter from Social Security the current monthly amount.	
5.	Current Address:	
	Contact Phone Number:	
	Sources of Income (List all Sources):	
	a b	
	c	
	d	
	e	
	f	
	σ	

List the Names, Ages and Relationships of all family members (including the Applicant and Co-Applicant) that will be living in the household:			
Name	Relationship to Applicants	Age	
Sincerely,			
Applicant Signature	Date		
Applicant Signature	Date		