Rent Certificate

Alterations on lines 1 to 14 (whiteouts, erasures, etc.) will void this rent certificate. A rent certificate with an error should be discarded and a new one completed.

Wisconsin Department of Revenue

fill in lines 5 to 14. Also: Complete the schedule at the bottom of this page if line 11d is 2 or more and each occupant did not pay an equal share of the rent. If your landlord will not sign your rent certificate, check here. → □ Complete lines 1 to 13b, and attach copies of each canceled check or money order receipt you have to verify your rent. Attach your completed rent certificate (not a photocopy) to Schedule H. A mobile home? □ Yes □ No A mobile home site? □ Yes □ No Mobile home taxes or parking permit fees, or mure you collected from this renter for 2001 \$ □ 11 and the year use the additional spaces on lines 11a and during the year use the during the year use the additional spaces on lines 11a and during the year use the during the year use the during the year use the during the ye	unicipal fees ental unit was ude amounts ates changed d 11b to show
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Complete lines 1 to 13b, and attach copies of each canceled check or money order receipt you have to verify your rent. Answer lines 11a to 11e based on the period of time this re occupied by this claimant (renter) in 2001. Do not include the collected directly from a governmental agency. If rent ra	ude amounts ates changed d 11b to show
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	d 11b to show
during the year, ase the additional spaces of fines and	ied.
1 Claimant's name the different rates and how many months each rate appli	
2 Social security number a Rent collected per month 3 Address of rental property (property must be in Wisconsin) for this rental unit, for 2001 \$	
b Number of months this	
rental unit was rented to this renter in 2001	
4 Time you actually lived here in 2001	
d. Number of occupants in this rental unit	
Landlord Fill in ALL lines 5 to 14 (SSN is optional). do not count spouse or children under 18	
Name e This renter's share of total 2001 rent (do not include rent paid for other renters) \$	
6 Telephone number 12 Value of food and services provided	
by landlord (this renter's share) \$ SSN (optional) or FEIN by landlord (this renter's share) \$	
8 Address 13a Rent paid for occupancy only – Subtract line 12 from line 11e \$	
9 a Property owner is <i>(check one)</i> : b Was heat included in the rent? \(\subseteq \) Yes \(\subseteq \) No	1
☐ Individual c If the Long-term care facility / CBRF / Nursing home box is	is checked on
Sec. 66.1201 municipal housing authority line 9a, check the method used to compute line 13a: Stendard rate (\$100 per week)	
Lang term care facility / CRDE / Nursing home	
Other Percentage formula (iiii iii percentage)%	
Unter method approved by Department of Revenue	
Yes No is true, correct, and complete to the best of my knowled	
c If 9b is answered "No" and you are a sec. 66.1201 municipal housing	
authority that makes payments in lieu of taxes, check this box. → Signature (by hand) of landlord or authorized representative	Date

Allowable Rent for Shared Living Expenses | To be completed by the claimant, if applicable.

Complete this schedule if line 11d shows more than one occupant, and each occupant did not pay an equal share of the rent. Also indicate the name(s) (and social security number, if known) of the other occupant(s). You may claim only the portion of rent that reflects the percentage of shared living expenses you paid. Divide the living expenses you paid (box 5b) by the total shared living expenses (box 5a), and multiply that percentage by the total rent (box 1a). Subtract the amount on line 12 of your rent certificate, if any, and claim only the resulting amount on line 14a or 14c of Schedule H.

Example: You and your roommate paid shared living expenses as shown below. Your landlord provided services and filled in \$300 as your share on line 12.

Shared Living Expenses	Total Paid	You Paid	Roommate Paid
Rent	\$4,800	\$4,800	-0-
Food	2,400	1,200	\$1,200
Utilities	600	-0-	600
Other	200	0-	200
Total	\$8.000	\$6.000	\$2.000

Your allowable rent paid for occupancy only is \$3,300, computed as follows:

- · Divide the living expenses you paid (\$6,000) by the total living expenses (\$8,000) = 75%
- Multiply 75% by the total rent (\$4,800) = \$3,600
- Subtract your share of services provided (\$300): \$3,600 \$300 = \$3,300

In this example, you would include \$3,300 on line 14a or 14c of Schedule H, as applicable.

Shared Living Expenses	Total Paid by All Occupants	Amount You Paid	Amount Other Occupant(s) Paid
Rent	1a)	1b)	1c)
Food	2a)	2b)	2c)
Utilities	3a)	3b)	3c)
Other	4a)	4b)	4c)
Total	5a)	5b)	5c)

Other occupant(s) – name (last, first, m.i.), social security number, if known

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COMBINE V	our allowable	reni nain inr	occupancy	oniv as	minows.

•	5b	÷	5a	=	%	6

__% x 1a_____ = _

_ - line 12 _____

Instructions for Preparing a Rent Certificate

Every claimant (renter) who files a 2001 Wisconsin homestead credit claim, Schedule H, must attach a completed 2001 rent certificate to the Schedule H, to verify the rent paid to occupy a Wisconsin "homestead" in 2001. A homestead could be a room, apartment, mobile home, house, farm, or nursing home room.

Alterations on lines 1 to 14 (whiteouts, erasures, etc.) will **void** the rent certificate. A rent certificate with an error should be discarded and a new one completed.

A rent certificate has three parts. The renter is to fill in the first part (lines 1 to 4) and, if applicable, the third part (the shared living expense schedule at the bottom of the rent certificate). The landlord is to fill in the second part (lines 5 to 14). The landlord may not charge a fee for filling in a rent certificate.

Instructions for Claimant

Fill in the information requested on lines 1 to 4. Then give the rent certificate to your landlord to complete lines 5 to 14.

After you receive the completed rent certificate from your land-lord, fill in the allowable amounts from lines 10b and 13a on lines 13, 14a, and 14c of Schedule H, as appropriate. **Note:** If line 11d is 2 or more and each occupant did not pay an equal share of the rent, fill in the schedule at the bottom of the rent certificate, titled "Allowable Rent for Shared Living Expenses." You may claim only your share of the rent paid for occupancy, as computed on the schedule.

Attach the rent certificate to your Schedule H. A separate rent certificate must be completed for each homestead you rented in 2001 if rent for each is used in computing your homestead credit. All rent certificates must be attached to one Schedule H. If you claim less than 12 months of rent and/or property taxes on Schedule H, attach a note explaining where you lived for the balance of 2001.

Instructions for Landlord/Authorized Representative

Fill in a separate rent certificate for each claimant (renter) requesting one for homestead credit. Fill in line 1 if it is not already completed. Fill in lines 5 to 14 (SSN on line 7 is optional), then give the completed rent certificate to the renter.

Lines 5 to 8 Fill in all the information requested. On line 7, SSN means social security number, and FEIN means federal employer identification number. You are not required to fill in your social security number if you choose not to do so.

Line 9a Check the appropriate box to indicate whether the property is: property owned by an individual; a municipal housing authority created under sec. 66.1201, Wis. Stats.; a long-term care facility, CBRF (community based residential facility), or nursing home; or "Other." Check "Other" if the first three choices do not apply.

Line 9b If the rental property listed on line 3 is subject to Wisconsin property taxes, check "Yes." Otherwise, check "No" and see the instructions for line 9c.

Line 9c If you checked "No" on line 9b, do not complete the rent certificate unless you are a sec. 66.1201 municipal housing authority that makes payments in lieu of property taxes. If this applies to you, check the box on line 9c.

Line 10a Check the appropriate boxes to indicate whether the rent certificate includes rent for a mobile home or for land on which a mobile home is located.

Line 10b If the renter owned the mobile home and you collected mobile home taxes, mobile home parking permit fees, or municipal fees from the renter for the period of occupancy, fill in the amount you collected on line 10b. If no amount was collected, fill in -0-.

Line 11a Fill in the rent you actually collected per month for this rental unit (apartment, room, one-half of a duplex, etc.) for 2001, for the time this renter occupied it in 2001. Include separate amounts the renter paid to you for items such as a garage, parking space, utilities, appliances, or furnishings. Do not include rent for a prior year or amounts you received directly from a governmental agency through a subsidy, voucher, grant, etc., for the unit. If the monthly rent for this unit changed in 2001, use the extra spaces to fill in each monthly rate separately.

Line 11b Fill in the number of months you rented the unit to this renter in 2001. If you filled in more than one amount on line 11a, fill in (on line 11b) the number of months each rate applied.

Line 11c Multiply line 11a by line 11b. This is the total rent collected for this unit for the period of time the unit was occupied by this renter in 2001.

Line 11d Fill in the total number of occupants in this rental unit during the rental period. **Note:** Do not count the renter's spouse or children who were under age 18 as of December 31, 2001.

Line 11e Fill in this renter's share of the total 2001 rent paid. Do not include rent paid for renters other than the renter listed on line 1 of the rent certificate, or amounts you received directly from a governmental agency.

Line 12 Fill in this renter's share of the value of food, medical, and other personal services, including laundry, transportation, counseling, grooming, recreational, and therapeutic services, you provided for this rental unit. Do not include utilities, furnishings, or appliances. If you did not provide any of the items, fill in -0- on line 12.

Line 13a Subtract line 12 from line 11e. This is the allowable rent paid for occupancy only.

Line 13b If heat **was** included for this rental unit, check the "Yes" box. If heat **was not** included for this rental unit, check the "No" box.

Line 13c If the rent certificate is for property that is a long-term care facility, CBRF (community based residential facility), or nursing home, check the appropriate box to indicate the method used to determine rent paid for occupancy only on line 13a.

Line 14 Review the rent certificate to be sure that line 1 and each of the lines 5 to 13b (and 13c, if applicable) has an entry. Sign (by hand), date, and return the rent certificate to the renter. Signature stamps, photocopied signatures, etc., are not acceptable.