

Self-Certification of Household Annual Income

Community Name:

Resident(s):

Address:

This section to be completed by Resident/Household (list all residents, including minors):

Household Member 1

_____	_____	_____
Last Name	First Name	Date of Birth (mm/dd/yyyy)

Household Member 2

_____	_____	_____
Last Name	First Name	Date of Birth (mm/dd/yyyy)

Household Member 3

_____	_____	_____
Last Name	First Name	Date of Birth (mm/dd/yyyy)

Household Member 4

_____	_____	_____
Last Name	First Name	Date of Birth (mm/dd/yyyy)

Household Member 5

_____	_____	_____
Last Name	First Name	Date of Birth (mm/dd/yyyy)

Household Member 6

_____	_____	_____
Last Name	First Name	Date of Birth

(mm/dd/yyyy)

Enter Gross Annual Income and Income from Assets for all household members below. Continue on separate sheet if necessary.

Types of Income include, but are not limited to: wages, salary, tips, bonuses, commissions, military pay, public assistance, Social Security/SSI, retirement benefits, VA benefits, child support, regular gifts, unemployment and some types of financial aid, as well as interest earned on assets (e.g., checking, savings, IRA). Include what is anticipated to be received in the next 12 months. All income listed must be GROSS (income before taxes and deductions).

Types of Assets include, but are not limited to balances in: checking accounts, savings accounts, cash on hand, money market accounts, certificates of deposit, stocks, bonds, 401(k) and real estate. Include annual interest from accounts in total Income from Asset.

Household Member 1

Income Source	Gross Annual Income
_____	_____

Asset Source	Asset Balance
_____	_____

Income from Asset

Household Member 2

Income Source	Gross Annual Income
_____	_____

Asset Source	Asset Balance
_____	_____

Income from Asset

Household Member 3

Income Source	Gross Annual Income
_____	_____

Asset Source

Asset Balance

Income from Asset

Household Member 4

Income Source

Gross Annual Income

Asset Source

Asset Balance

Income from Asset

Household Member 5

Income Source

Gross Annual Income

Asset Source

Asset Balance

Income from Asset

Household Member 6

Income Source

Gross Annual Income

Asset Source

Asset Balance

Income from Asset

Total Annual Household Income

A) Total Gross Annual Income: _____

B) Total Asset Balance: _____

C) Total Income from Asset: _____

I certify under penalties of perjury that the above information is complete and accurate to the best of my knowledge. I agree to provided documentation required by the property owner/management to document my/our household income.

Resident(s):

Date: