## ATTACHMENT T: ASSET CERTIFICATION

o Initial Co	ertificat	ion o Rec	ertificatio	n o Othe	er:		Effective	Date:			 (MM / DD / Y	(YYY)	
PROPER	TY NA	AME:							LOG#_			,	
PROPERTY NAME:								UNIT #					
I.E.A.B. GI				S ACCOUN				t Exp					
sanking Instit		Account Na		Account Ho		Account I		-	rent Balan		Interest	Annual	
)											Rate	Income	!
)													
)													
ll anking Instit		Account Na		Account Ho		OUNT(S) ( Account I			re Cash, F rent Balan	се	II, Crowdso Interest Rate	Annual Income	
)													
)													
			T 4005	TO (-11-		16							
11	II. I	etc.)	II ASSE	TS (stocks,	mutua	ıı tunas, vi	rtuai curi	rency	, bonas, v	wnoie	e lite insura	ince, trusts	5,
Financial Institution		Account Na		count older	Acco Numb		Account Value	t	Cash Value		Interest Rate	Annual Income	
1) 2)													
3) 4)												-	
H	Has an	<b>/ears)</b> y member of		(include the usehold previ ☐ No									
Type (reside		t land				%		Morl	et Value	Ann	ual Income		
other)	vacan	t ianu,	Addres	ss			nership		roperty		erated		
2)												Ⅎ຺຺຺	
				s of stock in a cluding partial						inclu	des any type	of direct or	
١	/. (	OTHER NON	I-NECE	SSARY PER	SONAL	. PROPER	ΓΥ (as de	efined	l by HUD i	in 24	CFR § 5.60	<b>)3</b> )	
Description						Va	lue						
1) 2)												-	
V	/I.	LIST ANY A	SSET [	DISPOSED C	F FOR	LESS THA	N FAIR I	WARK	(ET VALU	E WI	THIN THE	_ L <b>AST TW</b> O	) (2)
Description						Va	lue						
1) 2)													
	/II. (	CASH SAVII	NGS										
1	have	\$			in c	ash saving	S.						
		fication (2025)				J	Page 1 o	of <b>2</b>		NYC <b>HDC</b>	Department of		

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## VIII. TOTAL INCOME FROM ASSETS / NO ASSETS

☐ The total household assets (as defined in 24 CFF collected and properly documented. Annual incor		
☐ The total household assets (as defined in 24 C household assets is included in total gross annual inc	CFR 5.603) listed above do not excee	
☐ I hereby certify that I have no assets at this tin	ne, including but not limited to any	of the asset types listed above.
I/WE THE UNDERSIGNED, CERTIFY UNDER PENALTY AND CORRECT TO THE BEST OF MY KNOWLEDGE. In understand that any and all information I/we provide durill Investigation (DOI), a fully empowered law enforcement at that the consequences for providing false or knowingly disqualification of my application, the termination of my lepotential criminal prosecution.	we have not withheld, falsified, or otherwing this certification process is subject to agency which investigates potential fraud in incomplete information in an attempt to	ise misrepresented any information. I/we fully review by the New York City Department of in City-sponsored programs. I/we understand to qualify for this program may include the
SIGNATURE OF APPLICANT	DATE	-
SIGNATURE OF CO-APPLICANT	DATE	-
SIGNATURE OF CO-APPLICANT	DATE	-
SIGNATURE OF CO-APPLICANT	DATE	-



Commented [RA(1]: Marketing Agent should Insert the current HUD-published asset threshold