

CERTIFICATION OF ZERO INCOME

(To be completed by adult household members who are claiming zero income from any source.)

Household Name: _____

Building Address/Unit No.: _____

Development Name: _____

1. I hereby certify that I do not individually receive income from any of the following sources:

- a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
- b. Income from the operation of a business;
- c. Rental income from real estate or personal property;
- d. Interest or dividends from assets;
- e. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
- f. Unemployment or disability payments;
- g. Public assistance payments;
- h. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
- i. Income from self-employed resources (Avon, Mary Kay, Tupperware, Uber, Lyft, etc.);
- j. Any other source not named above.

2. I currently have no income of any kind and there is no change expected in my financial status or employment status within the next 12 months.

3. I will be using the following sources of funds to pay for rent and other necessities: _____

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Applicant/Tenant

Printed Name of Applicant/Tenant

Date