## Self-Certification of Annual Income

APARTMENT MANAGER (PLEASE FILL IN THIS SECTION)			
APARTMENT NAME	UNIT NUMBER		NO. OF BEDROOMS
HOUSEHOLD NAME		CURRENT	THH SIZE

## THE FOLLOWING SECTIONS ARE TO BE COMPLETED ENTIRELY BY THE RESIDENT

PART 1: PEOPLE IN YOUR HOUSEHOLD		
Name of Each Person Living in the Apartment	Date of Birth	Full-Time Student*
1. (HEAD OF HOUSEHOLD)		YES NO
2.		YES NO
3.		YES NO
4.		YES NO
5.		YES NO
6.		YES NO

\*Check "Yes" if they are or will be a full-time student in the next 12 months.

## PART 2: INCOME OF EVERY PERSON LIVING WITH ME

- A. Write down the yearly income for each person living in your apartment.
- B. Include income from savings, investments, and any other assets.
- C. Initial of each adult. If income is being received by a minor, add the head of household initial next to the income amount
- D. Put "Zero (0)" for no income. See the NOTES on the next page for examples of income to enter below.

Name of Each Person Living in the Apartment	Total Yearly Income (including income from savings or investments)	This Income Is From	Initials of Each ADULT
1.			
2.			
3.			
4.			
5.			

I agree to notify management IMMEDIATELY if:

- Anyone in my household becomes a full-time student;
- My household composition changes in any way.

I certify under penalties of perjury that the above information is true and complete to the best of my knowledge. I understand that false or incomplete information is a violation of the terms of my lease and is grounds for eviction. I agree to furnish any additional income or other documentation required by the property owner/management to document my/our household income:

HEAD OF HOUSEHOLD SIGNATURE	PRINT NAME	DATE (mm/dd/yyyy)
ADULT HOUSEHOLD MEMBER #2 SIGNATURE	PRINT NAME	DATE (mm/dd/yyyy)
ADULT HOUSEHOLD MEMBER #3 SIGNATURE	PRINT NAME	DATE (mm/dd/yyyy)
ADULT HOUSEHOLD MEMBER #4 SIGNATURE	PRINT NAME	DATE (mm/dd/yyyy)
ADULT HOUSEHOLD MEMBER #5 SIGNATURE	PRINT NAME	DATE (mm/dd/yyyy)

## NOTES

**Types of Income:** Possible 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. Include amount you receive now and amount you anticipate receiving in the next 12 months. All income listed must be GROSS income (income before taxes and deductions).

**Income from Assets**: Income from assets must also be included in Total Gross Annual Income. Possible types of assets include, but are not limited to: checking accounts, savings accounts, cash on hand, money market accounts, certificates of deposit, stocks, bonds, 401(k) and real estate. Include the annual interest from these accounts in your total income.

APARTMENT MANAGER (PLEASE FILL IN THIS SECTION)					
APARTMENT NAME		UNIT NUMBER		NO. OF BEDROOMS	
HOUSEHOLD NAME				CURREN	T HH SIZE
ORIGINAL MOVE-IN DATE (mm/dd/yyyy)	EFFECTIVE DATE OF RECERTIFICATION (mm/dd/yyyy)	SIGNATURE OF MANAGEMENT REPRESENTATIVE			
TOTAL GROSS INCOME (ENTIRE HOUSEH	OLD)				
HOUSEHOLD PORTION OF RENT	UTILITY ALLOWANCE	PRINT	NAME OF MA	NAGEMEN	IT REPRESENTATIVE
SUBSIDY PORTION	SET-ASIDE %	DATE (	mm/dd/yyyy)		