

# HOUSEHOLD DECLARATION SUPPLEMENT TO REA

(REQUIRED for initial certifications only)

**Property Name:** \_\_\_\_\_ **Unit:** \_\_\_\_\_

**Applicant/Resident Name:** \_\_\_\_\_

The forms you are currently completing are for the Low-Income Housing Tax Credit or Bond Program governed by the Washington State Housing Finance Commission in compliance with Section 42 and 142 of IRS Code. These programs regulate the income limits of our rental households.

All household members over the age of eighteen must sign the forms; have their income and assets third-party verified and be on the lease.

As part of determining gross annual income, we are required to document temporarily absent household members including spouses (husband or wife), roommates, and dependants. Income of any temporarily absent household member must be included in the total household income. The income of a spouse, even if he/she will not reside in the apartment must be included when determining income, unless documentation of a legal separation is provided. Income of anyone anticipated to join the household within the initial twelve (12) months of occupancy such as a fiancé or roommate must also be counted.

\* Will anyone be residing in the unit not listed on page 1 of the *Rental Eligibility Application*?

Yes  No If "Yes," identify the person and position in the household: \_\_\_\_\_

\* Do any household members have a spouse who is not listed as a household member on page 1 of the *Rental Eligibility Application*?

Yes  No If "Yes," please share the spouse's name and income information or provide legal separation documentation.

Spouses Name: \_\_\_\_\_ Source of Income: \_\_\_\_\_

\* Will anyone be joining your household within twelve (12) months?

Yes  No If "Yes," complete the following:

Name: \_\_\_\_\_ When expected: \_\_\_\_\_ Source of Income: \_\_\_\_\_

I/We hereby declare that I/ have disclosed all current household members, the spouse of all household members, all roommates and anyone expected to join my/our household within the next twelve (12) months. I/We understand that omitting any current household members, the spouse of any household member, any roommates or anyone expected to join my/our household within the next twelve (12) months from the tenancy process is considered fraud and is grounds to terminate my/our household residency. I/We further understand that no one will be allowed to join my/our households without prior written approval.

_____ Head of Household Signature	_____ Print Head of Household Name	_____ Date
_____ Other Adult Household Member Signature	_____ Print Other Adult Household Member Name	_____ Date
_____ Other Adult Household Member Signature	_____ Print Other Adult Household Member Name	_____ Date