

SELF CERTIFICATION OF ZERO INCOME: HOUSEHOLDS

Applicants and residents who are part of any housing subsidy program through Berkshire Housing Development Corporation must provide verification of zero income. This form should be completed by every adult household member of households claiming zero income.

Applicant/Resident Name		
Applicant/Resident Address	City, State	Zip Code
unemployment, public assistance (TANF)	unemployed and do not receive any income), alimony, child support, Social Security, pens government grants, savings accounts, trust fu	sion or annuity, military
the fact that the Department of Housing Community Development (MA DHCD) wi	ed by the Berkshire Housing Development Corp and Urban Development (HUD) or the MA Dep ill be required to subsidize part or all of my m ect to investigate the validity of my applicatio	artment of Housing and onthly rental payments,
any monetary or non-monetary increase that the necessary rental adjustments ca	ed by Berkshire Housing Development Corpora in my income within 15 business days from the n be made. I have also been advised that one ust report to the office to re-verify the status of acome.	e date of the change so year from the date that
income status is accurate and complete statements or information are punisha information are grounds for termination Housing Development Corporation. Title	ven to the Berkshire Housing Development Co e to the best of my knowledge and belief. able by Federal Law. I also understand the of housing assistance and termination of tender to 18 Section 1001 of the United States Code, standard the adulent statements to any department or agent	I understand that false at false statements or ancy with the Berkshire tates that a person who
This form must be signed in the preser Notary Public.	nce of a Berkshire Housing Development Corp	poration staff person or
Signature of Applicant or Client	Date	
Signature of Notary Public		
Name of Notary Public	Date Commi	ssion Expires
Please	e return as quickly as possible.	
	e United States Code, states that a person we ents to any department or agency of the Uni	0 3

Governments is guilty of a felony.



Zero Income Questionnaire

Do you pay the following utilities:
Heat?
Hot Water?
Electric?
Cable?
Phone/Cell Phone?
Are you behind on your utilities?
Please explain how you are paying for your utilities.
Do you have children?
How are you buying groceries?
If you receive food stamps, how are you paying for non grocery items such as soap toilet paper, etc?
How are you buying baby/child supplies?
Do you own a car?
How are you paying for car insurance?
Maintenance?

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