

CERTIFICATION OF ZERO INCOME

(To be completed by all adult household members with no reported income)

Applicant/Tenant: _____ **Unit #:** _____

1. I currently have no income of any kind and I do not expect this to change in the next 12 months. (If you have **ANY** income whatsoever **DO NOT** complete this form).

2. I have been living with zero income for _____ years and _____ months.

3. I hereby certify that I do not individually receive income from any of the following sources:
- a. Wages from employment (including commissions, tips, bonus, etc.)
 - b. Income from the operation of a business or Sales from self-employed resources (Avon, Mary Kay, etc.)
 - c. Rental income from real 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 from persons not living in my household
 - i. Income from driving for Uber/Lyft
 - j. Cash payments
 - k. Student financial aid
 - l. Any other source not named above

4. The reason I have no income is: _____

5. I will be using the following sources of funds to pay for:

- Rent: _____
- Utilities: _____
- Food: _____
- Clothing and laundry: _____
- Transportation: _____
- Internet/Cable/Phone: _____
- Toiletries: _____
- Credit cards/loans/bills: _____

(Signature of Tenant)

(Signature of Manager)