

# 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 (**Use N/A instead of leaving blanks**):

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

Tenant Signature \_\_\_\_\_ Date \_\_\_\_\_

Management Signature \_\_\_\_\_ Date \_\_\_\_\_

