

CERTIFICATION OF ZERO INCOME - TC - 100 F

(One form to be completed by each adult member with no reported income from any source.)

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.
2. I am still a dependent and have never had an independent source of income.
3. I have been living with zero income for _____ years and _____ months.
4. 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 (Uber, Lyft, etc.)
 - j. Cash payments
 - k. Student financial aid
 - l. Any other source not named above

5. The reason I have no income is: _____

6. I will be using the following sources of funds to pay for (Use N/A instead of leaving blanks):
*In-Kind Donations are excluded income: i.e. Food bank, Church, etc.

Utilities:	
Food:	
Clothing and Laundry:	
Transportation:	
Internet/Cable:	
Phone:	
Toiletries	
Credit Cards/loans/bills:	

Tenant Signature _____ Date _____

Management Signature _____ Date _____

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

