

# SELF-EMPLOYMENT INCOME AFFIDAVIT

Use this form for any applicant or resident who receives income as a business owner, independent contractor, sole proprietorship, cash pay, odd jobs, etc.

**Applicant/Tenant:** \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**Anticipated Gross Annual Income:** \$ \_\_\_\_\_

**Anticipated Annual Business Expenses:** \$ \_\_\_\_\_

**Anticipated Annual Profit:** \$ \_\_\_\_\_

**Previous Year Profit (or Loss):** \$ \_\_\_\_\_

**Cash Withdrawals from Business:** \$ \_\_\_\_\_

Do you file tax returns?      **YES** Taxpayer ID# \_\_\_\_\_      **NO**

*If YES please submit tax returns with the most recent schedule C*

*If NO please state why:* \_\_\_\_\_

- *If tax returns were not filed, please submit a profit/loss report for each month since the business started*
- *Please include documents such as invoices, receipts, written business plan, or accountant statement of business income.*

*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.*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

