

Declaration of No Income

Applicant/Tenant Name: _____

1. I hereby certify that I do not individually receive income from any of the following sources:

- a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
- b. Income from operation of a business;
- 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 received from persons not living in my household;
- i. Sales from self-employed resources (Avon, Mary Kay, Shaklee, etc.);
- j. Any other source not named above.

2. Choose one:

- Currently, I have no income of any kind and while I am seeking employment, there is no definite job offer at this time.
- Currently, I have no income of any kind and I will not be seeking employment at this time.

My basic living needs (shelter, food, utilities) have been with the assistance of the person indicated below or as described below:

Name: _____ Phone: _____

Address: _____

I hereby certify the information contained in the Declaration of No Income is complete and accurate to the best of my knowledge. I understand that I am signing this Declaration under Penalty of Criminal Prosecution if I knowingly give false information, which results in assistance being distributed to an individual/family who is not eligible for such assistance.

Signature

Date

Declaration of No Child Support

I, (name) _____ hereby declare that I have not received any child support for the children listed below.

For the past 12 months: From _____ through _____

For the months of: _____

Children

Last Name	First Name	Date of Birth	Social Security #

I hereby certify the information contained in the Declaration of No Child Support is complete and accurate to the best of my knowledge. I understand that I am signing this Declaration under Penalty of Criminal Prosecution if I knowingly give false information, which results in assistance being distributed to an individual/family who is not eligible for such assistance.

Signature

Date

Signature

Date