

CERTIFICATION OF ZERO INCOME

TO BE COMPLETED BY APPLICANT / TENANT 18 YEARS OLD AND OLDER IF APPLICABLE

Tenant Name: _____ Unit #: _____
Property Name: _____ State: _____

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 operations 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 sources not named above.

2. I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next 12 months.

3. I will be using the following sources of funds to pay for the rent and other necessities:

TENANT SIGNATURE

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

Applicant / Tenant Signature _____ Date _____

ORIGINAL SIGNATURE REQUIRED / ELECTRONIC SIGNATURE NOT ACCEPTED

WARNING: SECTION 1001 OF TITLE 18 U.S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE WILLFUL, FALSE STATEMENTS OR MISREPRESENTATION OF ANY MATERIAL FACT INVOLVING THE USE OF OR OBTAIN FEDERAL FUNDS.