

APPLICANT / TENANT INCOME CERTIFICATION QUESTIONNAIRE

(*Note: A separate questionnaire MUST be completed by each adult member of the household)

NAME: _____

Unit #: _____

Property Name: _____

Initial Certification Recertification Addition of Household Member

RENTAL ASSISTANCE

	YES	NO		MONTHLY GROSS INCOME
1.	<input type="checkbox"/>	<input type="checkbox"/>	I receive Section 8 Housing Choice Voucher rental assistance. If yes, list the housing authority below Housing Authority Name: _____	Note: This is not counted as household income.
2.	<input type="checkbox"/>	<input type="checkbox"/>	I receive another form of federal or state rental assistance (not Section 8). If yes, list the housing authority or entity that provides the rental assistance below. Program Name _____ Organization providing rental assistance _____	Note: This is not counted as household income.

INCOME INFORMATION

Include all income sources, including unearned income of minors.

	YES	NO		MONTHLY GROSS INCOME
3.	<input type="checkbox"/>	<input type="checkbox"/>	I am self-employed. (List nature of self-employment). This includes but is not limited to: 1099-contractors, rideshare companies (e.g., Uber, Lyft), app-based delivery services (e.g., DoorDash, Grubhub, Shipt, etc.), other gig economy jobs, multi-level marketing companies (e.g., Mary Kay, Total Life Changes, Avon, etc.), social media income (e.g., YouTube, TikTok, etc.), etc. List types: 1) _____ 2) _____	(Use <u>net</u> income from business) \$ _____ \$ _____
4.	<input type="checkbox"/>	<input type="checkbox"/>	I have a job and receive the following types of pay. Include income earned as a seasonal worker or day laborer. Check all that apply: <input type="checkbox"/> Wages <input type="checkbox"/> Salary <input type="checkbox"/> Overtime Pay <input type="checkbox"/> Commissions <input type="checkbox"/> Tips (Reported) <input type="checkbox"/> Cash Tips (not reported or disclosed) <input type="checkbox"/> Bonuses <input type="checkbox"/> Other Compensation List the businesses and/or companies that pay you: <u>Name of Employer</u> 1) _____ 2) _____	 \$ _____ \$ _____

	YES	NO		MONTHLY GROSS INCOME
5.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I receive recurring cash contributions or gifts from persons not living with me, including but not limited to payments for rent, utilities, cell phone, transportation, etc. *Do not count birthday or holiday gifts or nonmonetary items received from a food bank or similar organization.</p> <p><u>Name of Person Providing Contribution</u></p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>
6.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I receive unemployment benefits.</p> <p>My last day of employment: _____</p>	\$ _____
7.	<input type="checkbox"/>	<input type="checkbox"/>	I receive Veteran's Administration, GI Bill, National Guard/Military benefits/income.	\$ _____
8.	<input type="checkbox"/>	<input type="checkbox"/>	I receive Social Security, Supplemental Social Security Income (SSI), or Social Security Disability Insurance (SSDI) payments.	\$ _____
9.	<input type="checkbox"/>	<input type="checkbox"/>	The household receives <u>unearned</u> income from family members aged 17 or under (example: Social Security, Trust Fund disbursements, etc.).	\$ _____
10.	<input type="checkbox"/>	<input type="checkbox"/>	I receive disability or death benefits other than Social Security.	\$ _____
11.	<input type="checkbox"/>	<input type="checkbox"/>	I receive periodic payments from lottery winnings.	\$ _____
12.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I receive Public Assistance Income (examples: TANF).</p> <p>DO NOT INCLUDE FOOD STAMPS</p>	\$ _____
13.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I receive child support payments through court order or other agreement.</p> <p>If yes, from how many persons do you receive support? __</p>	<p>(amount received)</p> <p>\$ _____</p>
14.	<input type="checkbox"/>	<input type="checkbox"/>	I receive alimony/spousal maintenance payments.	<p>(amount received)</p> <p>\$ _____</p>
15.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I receive periodic payments from trusts, annuities, inheritance, retirement funds or pensions, insurance policies, or similar periodic payments or disbursements.</p> <p>If yes, list sources:</p> <p>1) _____</p> <p>2) _____</p>	<p>\$ _____</p> <p>\$ _____</p>
16.	<input type="checkbox"/>	<input type="checkbox"/>	I receive income from real or personal property.	<p>\$ _____</p> <p>(Use <u>net</u> earned income)</p>
17.	<input type="checkbox"/>	<input type="checkbox"/>	I receive student financial assistance (Federal Pell Grants, Teach Grants, Federal Perkins Loan, or other grants scholarships, etc.	<p>\$ _____</p> <p>(amount received)</p>
18.	<input type="checkbox"/>	<input type="checkbox"/>	I am claiming zero income and will be required to complete a separate Income Status Certification form.	



ASSET INFORMATION

Include all asset sources, including assets of minors.

	YES	NO		INTEREST RATE	CASH VALUE
19.	<input type="checkbox"/>	<input type="checkbox"/>	I have a checking account(s). # of accounts held: _____ If yes, list bank(s) 1) _____ 2) _____ 3) _____	_____% _____% _____%	CURRENT BALANCE \$ _____ \$ _____ \$ _____
20.	<input type="checkbox"/>	<input type="checkbox"/>	I have a savings account(s). # of accounts held: _____ If yes, list bank(s) 1) _____ 2) _____ 3) _____	_____% _____% _____%	CURRENT BALANCE \$ _____ \$ _____ \$ _____
21.	<input type="checkbox"/>	<input type="checkbox"/>	I have a digital wallet service(s). (e.g., Apple Pay/Apple Cash, Cash App, PayPal, Venmo, etc.) # of accounts held: _____ If yes, list bank(s) 1) _____ 2) _____ 3) _____	_____% _____% _____%	CURRENT BALANCE \$ _____ \$ _____ \$ _____
22.	<input type="checkbox"/>	<input type="checkbox"/>	I have a pay card for direct deposit of benefits or prepaid debit card(s). # of cards held: _____ If yes, list bank(s) 1) _____ 2) _____ 3) _____		CURRENT BALANCE \$ _____ \$ _____ \$ _____
23.	<input type="checkbox"/>	<input type="checkbox"/>	I have a revocable trust(s). If yes, list bank(s) 1) _____ 2) _____ 3) _____	_____% _____% _____%	\$ _____ \$ _____ \$ _____
24.	<input type="checkbox"/>	<input type="checkbox"/>	I own stocks, bonds, or Treasury Bills. If yes, list sources/bank names 1) _____ 2) _____ 3) _____	_____% _____% _____%	\$ _____ \$ _____ \$ _____
25.	<input type="checkbox"/>	<input type="checkbox"/>	I hold cryptocurrency/digital currency (e.g., Bitcoin, Dogecoin, Ethereum, etc.). If yes, list bank(s) 1) _____ 2) _____ 3) _____		\$ _____ \$ _____ \$ _____
26.	<input type="checkbox"/>	<input type="checkbox"/>	I have cash on hand.		\$ _____



	YES	NO		INTEREST RATE	CASH VALUE
27.	<input type="checkbox"/>	<input type="checkbox"/>	I have Certificates of Deposit (CD) or Money Market account(s). # of accounts held: _____ If yes, list sources/bank names 1) _____ 2) _____ 3) _____	_____ % _____ % _____ %	\$ _____ \$ _____ \$ _____
28.	<input type="checkbox"/>	<input type="checkbox"/>	I have a Life Insurance Policy (exclude Term Life) having a cash value. If yes, how many? _____ If yes, name of insurance company(ies). _____		\$ _____
29.	<input type="checkbox"/>	<input type="checkbox"/>	I have received lottery winnings or other lump sum payments paid in one payment (not recurring periodic payments).		\$ _____
30.	<input type="checkbox"/>	<input type="checkbox"/>	I receive payments through a crowdfunding platform (e.g., GoFundMe).		\$ _____
31.	<input type="checkbox"/>	<input type="checkbox"/>	I have disposed of assets (i.e., gave away money/assets) for less than fair market value in the past two years. If yes, list items and date disposed: 1) _____ 2) _____ 3) _____		\$ _____ \$ _____ \$ _____
32.	<input type="checkbox"/>	<input type="checkbox"/>	I have a safe deposit box at a financial institution. Name of Institution: _____ Contents: _____ _____ _____		\$ _____
33.	<input type="checkbox"/>	<input type="checkbox"/>	I own real estate. If yes, provide description: _____ I intend to: <input type="checkbox"/> Keep <input type="checkbox"/> Sell <input type="checkbox"/> Rent <input type="checkbox"/> Give Away <input type="checkbox"/> Foreclosure		\$ _____



	YES	NO					CASH VALUE
34.	<input type="checkbox"/>	<input type="checkbox"/>	I received a federal tax refund or refundable tax credit in the past 12 months.				\$ _____ Amount Received
35.	<input type="checkbox"/>	<input type="checkbox"/>	<p>I have other non-necessary personal property, including but not limited to, recreational vehicles or boats not needed for day-to-day transportation, expensive jewelry without religious or cultural value or which does not hold family significance, collectibles such as coins or stamps, equipment or machinery that is not used to generate income for a business, or items such as gems/precious metals, antiques, artwork etc.</p> <p>Do not include necessary personal property such as, but not necessarily limited to, vehicles relied on for transportation, furniture, carpets, linens, kitchenware, common appliances, common electronics, clothing, personal effects that are not luxury items such as toys or books, wedding and engagement rings, jewelry used in religious/cultural ceremonies, medical equipment and supplies, health care-related supplies, musical instruments used by the family, personal computers or tablets, phones, professional tools of trade, educational materials, equipment to accommodate persons with disabilities, or exercise equipment</p> <p>If yes, list type below:</p> <p>1) _____</p> <p>2) _____</p> <p>3) _____</p>				<p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p>
36.	I am a Student:		<input type="checkbox"/>	Part-Time	<input type="checkbox"/>	Full-Time	

UNDER PENALTIES OF PERJURY, I CERTIFY THAT THE INFORMATION PRESENTED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. THE UNDERSIGNED FURTHER UNDERSTANDS THAT PROVIDING FALSE REPRESENTATIONS HEREIN CONSTITUTES AN ACT OF FRAUD. FALSE, MISLEADING, OR INCOMPLETE INFORMATION WILL RESULT IN THE DENIAL OF APPLICATION OR TERMINATION OF THE LEASE AGREEMENT.

Printed Name of Applicant/Tenant

Signature of Applicant/Tenant

Date

