

## Certification of Zero Income

This form is to be completed by a household member aged 18 or older who claims no income from any source.	
Name	:
I here	by certify that:
(1) I d	o not receive income from any of the following sources:
b) c) d) e) f) g) h) i) k)	
repre used produ	There is no expected change in my income or employment status during the next 12 months*.  I am looking for employment. I have been unemployed since  I am currently a student or in an unpaid apprentice program and I am not receiving income.  The information provided above is true, complete and accurate. I understand that providing false sentations herein may constitute an act of fraud. I acknowledge the information provided is being for specific purpose of determining my household is eligible to receive the benefit of CDBG acts. I will fully cooperate with the Program Administrator and Member to obtain or provide any essary documents to confirm the information provided.
Sign	ature Date

<sup>\*</sup>If a person is expecting a change in their income or employment status during the next 12 months, income from those sources should be verified and included in calculation of income. For example, if the person has an offer of employment, or is on temporary leave of absence or laid off from their employer, income from those sources should be included in income calculation.