

## **Zero Income Verification**

l,		, do	hereby certify that I am curre	ently receiving no income from any source.
Please answer the following questions:				
			Monthly Cost	Source for Payment
Cost of supplies not covered by food stamps: Such as paper produces, cleaning supplies, etc. per month?	, personal (	care items,	\$	
Cost of utilities per month?			\$	
Do you have a telephone?  Cost of telephone per month?	□ Yes	□No	If Yes:	
Cost of medical expenses per month?			\$	
Cost of clothing per month:  Cost of purchasing clothes?  Cost of laundering clothes?				
Do you own an automobile?  Cost of insurance per month?  Cost of gasoline per month?  Cost of maintenance per month?	□ Yes	□No	\$	
Do you smoke?  Cost of cigarettes per month?	□ Yes	□No	If Yes:	
Do you have cable/satellite TV and/or internet? Cost of service per month?	□ Yes	□No	If Yes: \$	
Other Entertainment			\$	
Total Monthly Expenses			\$	
I certify that this statement is true to the best of n federal law.	ny knowlec	lge and beli	ef. I understand that false stat	ements or information are punished under
Applicant / Tenant Signature			 Date	
I have discussed this Certification of Household II expenses from information they provided.	ncome / Ex	penses with	the Applicant/Tenant and as	sisted in completing the above monthly
Manager Signature			 Date	

Penalties for Misuse of this Form Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government, HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures of improper uses of information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42.U.S.C. 208 (f) (g) and (h), Violation of these provisions are cited as violations of 42.U.S.C. 408 f, g and h.

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