CERTIFICATION OF ZERO INCOME

(To be completed by adult household members who are claiming zero income from any source, if appropriate.)

Household Name: ___________________________ Unit No. ___________________________

Development Name: ___________________________ City: ___________________________

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.

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

Under penalty of perjury, I certify that the information presented in this 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.

_________________________  ___________________________  _________________
Signature of Applicant/Tenant          Printed Name of Applicant/Tenant    Date

Certification of Zero Income (March 2009)