

INCOME STATUS CERTIFICATION

Applicant/Tenant Name: _____ Unit #: _____

Property Name: Fountain Place

This form to be completed by the Applicant/Tenant

Answer all of the following: Mark each statement as True or False as it applies to you and complete the other information indicating sources and amounts of each as applicable.

TRUE FALSE

1. ☐ ☐ I have never been employed.
2. ☐ ☐ I am unemployed. My most recent work end date is: _____ I worked at: _____
3. ☐ ☐ I have applied for Unemployment Benefits. Date applied: _____
Benefits are expected to start on: _____
If NOT; Explain: _____

4. ☐ ☐ I am receiving Unemployment benefits. My gross weekly benefit amount is: \$ _____

5. ☐ ☐ I receive income from the following Benefits sources-fill in the gross monthly amount for each:

	VA Pension:	\$
	Social Security (all forms):	\$
	Disability:	\$
	Child Support/Alimony:	\$
	Other:	\$

6. ☐ ☐ I receive income from the following Assistance sources-fill in the gross monthly amount for each:

	TANF:	\$
	Family/Friends:	\$
	Other:	\$
	Other:	\$

7. ☐ ☐ I have income from a source not listed above. I receive \$ _____ per month from: _____

8. ☐ ☐ I have no income from any source and other household members pay for all my expenses.

9. ☐ ☐ I have no income from any source and other person/s or entities **outside my household** pay for expenses on my behalf-
Fill in the amount paid for each item and the person or entity that makes the payment:

	Rent:	\$	Paid by:
	Utilities:	\$	Paid by:
	Phone:	\$	Paid by:
	Household supplies:	\$	Paid by:
	Transportation	\$	Paid by:
	Other non-food items:	\$	Paid by:
	Other:	\$	Paid by:

10. ☐ ☐ I have no income from any source and no other person or entity pays for expenses on my behalf.
Explain how expenses are paid: _____

11. ☐ ☐ I have secured new employment at: _____
(Attach a copy of offer letter or other documentation from employer supporting this information).
This employment will begin on: _____
My gross monthly income will be: \$ _____

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 understands that providing false representations herein constitutes an act of fraud. Providing false, misleading or incomplete information may result in the termination of a lease agreement.

Printed Name of Applicant/Tenant _____

Applicant's/Tenant's Signature _____

Date _____

NOTE: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.