

Self-Declaration of Zero or Unverifiable Income

Applicant Name: _____ **Date:** _____

All household members over the age of 18 must complete this form if they have no income OR their income has not yet been verified by intake worker. Check only one box and fill out information in that section.

I certify that I **do not** receive income from any sources at this time.

Applicant Signature: _____ Date: _____

I certify, under penalty of perjury, that I currently receive the income from the following source(s):

Source: _____	Amount: _____	Frequency: _____
Source: _____	Amount: _____	Frequency: _____
Source: _____	Amount: _____	Frequency: _____

Applicant Signature: _____ Date: _____

Intake Worker Certification:

I understand that third-party verification is the preferred method of certifying an applicant's income for ESG Homeless Prevention and Rapid Re-Housing assistance. I understand self-declaration is only permitted when I have attempted to but cannot obtain third party verification.

Documentation of attempt to obtain third-party verification:

Intake Worker Name: _____ Date: _____

Intake Worker Signature: _____