

# SELF CERTIFICATION OF ANNUAL INCOME

(Post year 15 LIHTC properties only)

Effective Date: \_\_\_\_\_

Move-in Date: \_\_\_\_\_  
(YYYY-MM-DD)

To be completed for the second annual recertification and all subsequent recertification's

## PART I - DEVELOPMENT DATA

Property Name:	BIN #:	
BIN Address:	City:	Zip:
Unit Number:	# Bedrooms:	

## PART II. HOUSEHOLD COMPOSITION

HH Mbr#	Last Name	First Name	Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YY)	F/T Student?	SS# Last 4 Digits	Race	Ethnic	Disabled?
1				HEAD						
2										
3										
4										
5										
6										
7										

## PART III. HOUSEHOLD ANNUAL INCOME

Name	Total Gross Annual Income including Income from Assets	Signature of Adult

Total Annual Household Income from all Sources \$ \_\_\_\_\_

Household Portion of Rent: \$ \_\_\_\_\_ Utility Allowance: \$ \_\_\_\_\_ Subsidy portion: \$ \_\_\_\_\_

LIHTC Maximum Rent \$ \_\_\_\_\_

I certify under penalties of perjury that the above information is true and complete to the best of my knowledge. I understand that false or incomplete information is a violation of the terms of my lease and is grounds for eviction. I agree to furnish any additional income or other documentation required by the property owner/management to document my/our household income:

\_\_\_\_\_  
Head of Household Signature                      Print Name                      Date

\_\_\_\_\_  
Other Household Adult Signature                      Print Name                      Date

\_\_\_\_\_  
Other Household Adult Signature                      Print Name                      Date

\_\_\_\_\_  
Signature of Management Representative                      Print Name                      Date