# UNDER $5,000 ASSET CERTIFICATION

For households whose combined net assets do not exceed $5,000.
Complete only one form per household; include assets of children.

Head of Household Name: _____ Unit No.: _____

Development Name and Address: _____

**Complete all that apply for 1 through 4:**

1. My/our assets include (enter n/a in (A) if you do not own the respective asset):

| Source | (A) Cash Value* | (B) Int. Rate | (A*B) Annual Income | Source | (A) Cash Value* | (B) Int. Rate | (A*B) Annual Income |
|---|---|---|---|---|---|---|---|
| Savings Account(s) | $ | % | $ | Checking Account(s)*** | $ | % | $ |
| Cash on Hand | $ | N/AP | N/AP | Govt. Benefits Debit Card | $ | N/AP | $ |
| Certificates of Deposit | $ | % | $ | Money Market Funds | $ | % | $ |
| Stocks | $ | % | $ | Bonds | $ | % | $ |
| IRA Account(s) | $ | % | $ | 401(k)/403(b) Account(s) | $ | % | $ |
| Keogh Account(s) | $ | % | $ | Trust Funds | $ | % | $ |
| Equity in Real Estate | $ | % | $ | Land Contracts | $ | % | $ |
| Lump Sum Receipts | $ | % | $ | Capital Investments | $ | % | $ |
| Bitcoin/ Cryptocurrency | $ | % | $ | GoFundMe/Crowdsourcing | $ | % | $ |
| Life Insurance (Excluding Term) | $ | % | $ | | | | |
| Other Retirement/Pension Funds not named above: | $ | % | $ | Explanation _____ | | | |
| Personal Property Held as an Investment** | $ | % | $ | Explanation _____ | | | |
| Other (list): | $ | % | $ | Explanation _____ | | | |

PLEASE NOTE: Certain funds (e.g., Retirement, Pension, Trust) may or may not be (fully) accessible to you. Include only those amounts which are.

*Cash value is defined as market value minus the cost of converting the asset to cash, such as broker's fees, settlement costs, outstanding loans, early withdrawal penalties, etc.
**Personal property held as an investment may include, but is not limited to, gem or coin collections, art, antique cars, etc. Do not include necessary personal property such as, but not necessarily limited to, household furniture, daily-use autos, clothing, assets of an active business, or special equipment for use by persons with disabilities.
***Checking Account cash value should be the average in the checking account over the last six (6) months

(Check either box 2 or box 3 below, not both)

2. ❑ Within the past two (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for more than $1,000 below fair market value (FMV). Those amounts equal a total of: $_____ (enter the difference between FMV and the amount you received).
3. ❑ I/we have not sold or given away assets (including cash, real estate, etc.) for less than fair market value during the past two (2) years.
4. ❑ I/we do not have any assets at this time (do not check this box if you have entered any numbers in section 1, above).

**The net family assets (as defined in 24 CFR 813.102) above do not exceed $5,000, and the annual income from the net family assets is $_____**(enter the total of all *(A*B) Annual Income* in section 1 above). **This amount is included in total gross annual income.**

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our 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 | Date | Signature of Applicant/Tenant | Date |
|---|---|---|---|
| Signature of Applicant/Tenant | Date | Signature of Applicant/Tenant | Date |

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