PUBLIC HOUSING AUTHORITY STATEMENT

(Individuals receiving assistance under Section 8 of U.S. Housing Act of 1937)

THIS SECTI	ON TO BE COMPLETED BY	MANAGEMENT AND EXEC	CUTED BY APPLICANT/TENANT
This Verification is being	delivered in connection with the	ne undersigned's eligibility for re	esidency in the following community:
Project Name: Unit Number (if assigned):			umber (if assigned):
Building Address:			
• •	•	information requested below in LIHTC) and/or HOME program	n order to determine my eligibility to rent ms.
Applicant/Tenant Signature		Return Form to:	
Printed Name of Applicant/Tenant			
Date	Social Security #		
THIS SECTION TO BE COMPLETED BY PUBLIC HOUSING AUTHORITY			
housing assistance pay building owner. Pleas Date Tenant's GROS Tenant's GROSS Mo	rments under Section 8, the Pe complete the statement below. SS Monthly Income was verification process, the undersigned is resident's annual income, as	Public Housing Authority need ow: ified: ed Public Housing Authority h	rify income for individuals receiving als to provide the following statement to the has verified the above referenced ants of Section 8, does not exceed the
I hereby certify that the	e information supplied in this s	section is true and complete to t	the best of my knowledge.
Signature:			Date:
Printed Name:	_		Phone:
Title:			

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.