



ZERO INCOME AFFIDAVIT

Ward 2 Residential Stability Rental & Utility Assistance Program

Name: _____

Age: _____

SSN: _____

I, _____, am a part of a household applying for rental and/or utility assistance through the **Ward 2 Residential Stability Rental & Utility Assistance Program** regulations require verification of all income from participating household's members.

Income includes but is not limited to:

- Gross wages, salaries, overtime pay, commissions, fees, tips and bonuses
- Net income from operation of a business or from rental property
- Interest, dividends and other net income of any kind for personal property
- Periodic payments received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of period receipts
- Lump sum payment(s) for the delayed start of a periodic payment
- Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay
- Public assistance
- Alimony and child support payments (whether through the court system or not)
- Regular pay, special pay and allowances of a head of household or spouse who is a member of the Armed Forces (whether or not living in the household)
- Regular monetary gifts from family and/or friends

I swear or affirm that I currently do not have any income of any kind at this time. I have not received income since _____. I do not expect to receive any income until

_____.
I understand that any misrepresentation of information or failure to disclose information requested on this form may disqualify me from participation in Ward 2 Residential Stability Rental & Utility Assistance Program and may be grounds for termination of assistance. I understand that O.C.G.A. § 16-10-20 provides that willful false, fictitious or fraudulent statements or misrepresentations concerning income, asset, or liability information relating to financial condition is a misdemeanor, punishable by fines and imprisonment.

I attest that the above information is true and correct. I also understand that it is my responsibility to report all changes to my household composition or income before re-applying for funding.

Print Name of Household Member

Signature of Household Member

Date