



Jersey City Housing Authority
Housing Choice Voucher (Section 8) Program
 400 US Highway #1 (Marion Gardens)
 Jersey City, NJ 07306
PHONE: 201-706-4677/4678
FAX: 551-256-7736/7737
www.jcha.gov.us

FAMILY DECLARATION OF ASSETS UNDER \$5,000

Head of Household: _____

Address: _____

Last four digits of SS#: XXX-XX- _____

I, _____ confirm that my family's net assets do not exceed \$5,000.

Pursuant to the Department of Housing and Urban Development (HUD) code of federal regulations specifically:

- 24 CFR 928.516 - *For a family with net assets equal to or less than \$5,000, a PHA may accept a family's declaration that it has net assets equal to or less than \$5,000, without taking additional steps to verify the accuracy of the declaration.*

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of my rental assistance and I may be subject to a civil penalty, plus damages, under the False Claims Act (31 U.S.C 3729).

Signature: _____

Date: _____

