

25 High Street Caribou, ME 04736 Telephone: (207) 493-4234 Fax (207) 376-0178 www.caribouhousing.org



CERTIFICATION OF ZERO INCOME

Applicant/ Participant:	Soc. Sec. No.
1.) I hereby certification that I that	I do not receive income from any of the following sources:
•	nt (including commissions, tips, bonuses, fees, overtime, etc.);
	tion of a business or from rental income from real or personal property;
c. Interest, dividends, and	other net income of any kind from assets;
d. Periodic payments rece	ived from Social Security, annuities, insurance policies, retirement funds,
pensions, disability or d	leath benefits;
e. Lump sum payment(s)	for the delayed start of a periodic payment;
	nings, such as unemployment and disability compensation, worker's
compensation and sever	
	ents (General Assistance/TANF);
	port payments (whether through the court system or not);
	y and allowances of a head of household or spouse who is a member of ther or not living in the dwelling);
j. Regular monetary gifts	or necessities from friends and/or family;
	ed (Avon, Mary Kay, Pampered Chef, etc.);
1. Any other source not na	ame above.
2.) I currently have not income of or employment during the next	any kind and there is no imminent change expected in my financial status 12 months.
3.) I will be using the following so	ources of funds to pay for rent and other necessities.
4.) I understand that I must report and/or assets, within ten (10) by 5.)	to the Caribou Housing Authority <u>any</u> change which affects my income usiness days of the change.
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	8 of the U.S. Code makes it a criminal offense to make willful false ny Department or Agency of the United States as to any matter within
Signature of Applicant/Participant	Printed Name of Applicant/Participant Date