



501 Tenth Street – Moundsville, WV 26041
Phone (304) 845-3141 – Fax (304) 845-3147

VERIFICATION OF ZERO INCOME

Name: _____

Address: _____

Do you receive income from any of the following sources? Please check each source if you DO NOT receive income from the source!

All information is subject to verification from third party source.

_____ Wages (including bonus/commissions, tips, fee, etc.)

_____ Unemployment Benefits

_____ Worker's Compensation

_____ Disability Payments

_____ Alimony

_____ Child Support

_____ Income from operation of a business

_____ Annuities, insurance policies, stocks, etc.

_____ Pensions, IRA, 401K

_____ Rental Income

_____ Sales from Direct Sales i.e.: Mary Kay

_____ Interest/dividends from assets

IMPORTANT NOTICE: If it is determined you have **NO** help on a regular basis you will be required to submit **ALL** receipts and most recent bills for any expenses monthly.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I also understand Title 18, Section 101, of the U.S. Code, states that a person who knowingly and willingly makes false or fraudulent statements to any Department of the U.S. or the Department of Housing and Urban Development is guilty of a felony. I understand that I may be required to periodically update this information as requested by Moundsville Housing Authority.

NOTE: Sign in presence of Notary only!

Signature of Tenant: _____ Date: _____

NOTARY ONLY

STATE OF WEST VIRGINIA

COUNTY OF _____

Before me, _____, on this day personally appeared _____,
Name of Notary Public Name of signer

to be the person(s) whose name(s) is/are subscribed to be foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, _____.
Day Month Year

Notary Public's Signature