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INCOME CERTIFICATION AFFIDAVIT

DATE: _____ APT. #: _____

DEVELOPMENT NAME: _____

APT SIZE/TYPE: _____

Name(s) of Resident(s): _____

Social Security Number(s): _____

ASSETS:

Bank Accounts, Stocks, Bonds, Real Estate, Cash, Lump Sum Payments Received, etc.

A: \$ _____

INCOME FROM ASSETS:

If value of assets is over \$5,000 this figure is the greater of: *(check one)*

B: \$ _____

- actual interest/dividend received
- OR
- the value of the assets multiplied by the HUD Passbook Rate (%)

**A check mark indicates which method was used to calculate asset income.*

REGULAR PERIODIC INCOME:

Employment, Social Security, Public Assistance, Worker's Compensation, Alimony, etc.

C: \$ _____

TOTAL INCOME (SUM OF B AND C):

D: \$ _____

I/We hereby certify that the figures provided above are true and complete to the best of my/our knowledge and belief. These figures are provided by verifications as a result of my/our express written consent. I/We have provided to the management company all known sources of my/our income and assets. I/We understand that providing false information or making false statements under oath may subject me/us to criminal penalties.

Signature

Date

Signature

Date

Subscribed and sworn to before me under oath this _____ day of _____, _____
Year

Signature of Notary Public

Notary Public, State of _____ My commission expires _____, _____
Year

OFFICE USE ONLY:



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

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