

ZERO INCOME AFFIDAVIT

11/21/2023 Revision

_____, hereby certify that I am of 18 years of

(Family Member with Zero Income)

age or older and <u>do not</u> receive income from <u>any</u> of the following sources:

- Wages from employment (including commissions, tips, bonuses, fees, etc.);
- Income from operation of a business;
- Rental income from real or personal property;
- Interest or dividends from assets;
- Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
- Unemployment, disability payments, worker's compensation, or severance pay;
- Public assistance payments;
- 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 dwelling)
- Periodic allowances such as alimony, child support (through the court system or not);
- Sales from self-employed resources (Avon, Mary Kay, Shaklee, etc.);
- Regular monetary gifts received from persons not living in my household;
- Any other source not named above.
- Regular monetary gifts from friends and/or family.

I understand that I must report **IN WRITING AND WITHIN 30 CALENDAR DAYS** to the Housing Authority of the City of Pittsburgh **ANY** change which affects my income and/or assets.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations here in constitute an act of fraud.

Family member with Zero Income Signature

Date

Date

Head of Household Signature

This statement is subject to the penalties of Title 18, Section 4904 of the Pennsylvania Statutes and Title 18, Section 1001 of the U.S. Code, which states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any Department or Agency of the U.S. or the Department of Housing and Urban Development.