



# Clermont Metropolitan Housing Authority

65 South Market Street | Batavia, Ohio 45103

513.732.6010 | Fax 513.732.6520

www.clermontmha.org

## SELF DECLARATION OF ZERO (\$0) INCOME (ONLY FILL OUT IF HOUSEHOLD REPORTED ZERO INCOME)

Because you have reported zero (\$0) household income, Clermont Metropolitan Housing Authority (CMHA) is required to see what resources, *if any*, are being used to meet the family's current needs. Please note: CMHA **may not** make an adjustment to your rent until ALL questions have been answered.

Print Head of Household Full Name \_\_\_\_\_

Last 4 of Head of Household's SSN \_\_\_\_\_

1. When did your household income become zero (\$0) income? \_\_\_\_\_
2. Does your family have car payment(s)?  yes  no **How much is paid monthly?** \_\_\_\_\_  
How does your family pay for gasoline? \_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_  
How does your family pay for insurance? \_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_  
How does your family pay for maintenance/tires? \_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_  
If the family does not own a car, what is used for transportation? \_\_\_\_\_  
How does your family pay for transportation? \_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_
3. Does your family pay a portion of the rent?  yes  no **How much is paid monthly?** \_\_\_\_\_  
How does your family pay for this? \_\_\_\_\_
4. Does your family pay for any utilities?  yes  no **Estimated monthly amount \$** \_\_\_\_\_  
How does your family pay for this? \_\_\_\_\_
5. Does your family have a home phone or a cell phone?  yes  no Which?  home  cell  both  
How does your family pay for this? \_\_\_\_\_ **How much is paid monthly?** \_\_\_\_\_
6. Does your family have internet, cable, digital, or satellite services?  yes  no  
How does your family pay for this? \_\_\_\_\_  
\_\_\_\_\_ **How much is paid monthly?** \_\_\_\_\_
7. Does your family have any rental agreements for furniture, appliances, and electronics?  yes  no  
How does your family pay for this? \_\_\_\_\_  
\_\_\_\_\_ **How much is paid monthly?** \_\_\_\_\_
8. How does your family purchase toiletries, paper products, cleaning supplies, laundry costs, etc.?  
How does your family pay for these purchases and services? \_\_\_\_\_  
\_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_



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9. Does your family have credit card payments?  yes  no

How does your family pay for these? \_\_\_\_\_ **How much is paid monthly?** \_\_\_\_\_

10. Does your family own any pets?  yes  no

If yes, how does your family pay for the expenses associated with owning a pet (food, vet bills, etc)?

\_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_

11. Does your family have entertainment expenses?  yes  no

If yes, how does your family pay for the expenses associated with entertainment (Amazon, Hulu, Netflix, vacations, church tithes, vape/cigarettes, alcohol, etc)? \_\_\_\_\_

\_\_\_\_\_ **How much is paid monthly?** \_\_\_\_\_

12. How does your family pay for shoes and clothing? \_\_\_\_\_

\_\_\_\_\_ **Estimated monthly amount \$** \_\_\_\_\_

13. Does any household member currently have income? yes  no

If yes, list household member: \_\_\_\_\_ Source of income: \_\_\_\_\_

If yes, list household member: \_\_\_\_\_ Source of income: \_\_\_\_\_

If yes, list household member: \_\_\_\_\_ Source of income: \_\_\_\_\_

By signing below, I/we are agreeing that I/we **must** report to CMHA all sources of income for all household members in writing within thirty (30) calendar days. I/we understand my family **must** complete this Questionnaire whenever requested by CMHA for as long as my household income remains at \$0. I/we certify the above information to be correct and any misrepresentation of household income may result in termination of my/our assistance and/or lease, as permitted by Federal Regulations and/or State and Local law.

Signature of Head of Household

Date

\_\_\_\_\_

\_\_\_\_\_

Signature of Spouse/Cohead/Other Adult

Date

\_\_\_\_\_

\_\_\_\_\_

**PENALTIES FOR MISUSING THIS CONSENT:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208(a) (6), (7) and (8). Violations of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).