



HOME and HTF Annual Recertification Resident Statement and Certification

HOME

HTF

Resident Name/Head of Household _____ Social Security Number _____

Property Name: _____

Date Resident Moved into Project: _____ Unit Number: _____

Effective Date of Annual Recertification: _____ BR Size: _____

Household Income Restriction: 30 % _____ 50% _____ 60% _____ 80% _____

Maximum HOME Rent for this Recertification: \$ _____

Maximum HTF Rent for this Recertification: \$ _____

Contract Rent in Effect for this Recertification: \$ _____

Utility Allowance: \$ _____

Household members (list): _____

HOME: Is any household member a part-time or full-time student enrolled at an institution of higher education? Yes No

HOME: If Yes, please list all household members that are part-time or full-time students enrolled at an institution of higher education.
(Additional information will be required)

I, _____, family size of _____, hereby certify that
Client Name
the total annual household income from all sources including any interest from assets such as savings, checking, CD's, IRA's, stocks, bonds (this is not all inclusive) from all members of the household is \$ _____ and that the information is complete and accurate.

I/we also understand and agree that if requested by the Participating Jurisdiction (New Hampshire Housing) and the management company, I/we must allow the management company to obtain third party verifications on all income and asset sources.

All persons 18 years and older must sign this certification.

Date:

WARNING: 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.