



"Housing Opportunity for People Everywhere"

211 N. RIDGEWOOD AVENUE, SUITE 300, DAYTONA BEACH, FL 32114

AFFIDAVIT FOR REPORTING ZERO INCOME

I _____ do hereby state that I do not have any source of income at this time and that I have not had any source of income for the past thirty (30) days.

I further affirm that I have ___ have not ___ received any gifts of monies to supplement or aid in my living arrangements.

I also agree to inform the Housing Authority of any changes in my income or household size within ten (10) days as stipulated by the lease agreement. I understand it is a requirement of the Housing Authority that I report to the Management Office every ninety- (90) days until I establish an income.

I understand that by my withholding any information pertaining to my income or household change, I may be liable for prosecution under the applicable Federal, State or local fraud statutes.

Signature

Date

Sworn and subscribed before me a Notary Public was _____ on this _____ day of _____, 20 ____, who affirms the above statements to be true to the best of their knowledge.

SEAL

Notary Public

My Commission Expires: _____