



# DENSITY BONUS PROGRAM INCOME CERTIFICATION FORMS OWNER/RENTER OCCUPIED UNITS

Project Name: \_\_\_\_\_  
 Project Address: \_\_\_\_\_  
 Date of Report: \_\_\_\_\_

**This form must be used for all sales applications upon initiation of sale and annually for a seven-year period for each tenant in a rental project. The form does not apply to the cash contribution option.**

Check One:     Ownership     Rental

Unit Number or Street Address: \_\_\_\_\_

Proposed Sale Price (attach Good Faith Estimate):    \$ \_\_\_\_\_

Monthly Rent:    \$ \_\_\_\_\_    Number Bedrooms: \_\_\_\_\_    Estimated Cost of Utilities (water, sewer, electric):    \$ \_\_\_\_\_

Household Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_    Phone: \_\_\_\_\_

A. Please list all members in your household, beginning with the head of household.

Household Member Number	Name	Social Security Number	Relationship to Head of Household	Age	Sex
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

B. Please list all income received by each member of household, such as gross wages, self-employment, benefits (Social Security, VA, Unemployment, Workmen's Compensation, Pension), child support, alimony, welfare.

Household Member Number	Types of Income (If wages, please list names and addresses of employers)	Gross Monthly Income
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

C. Please list all assets of each household member, such as checking accounts, savings accounts, C.D.'s, stocks, bonds, lots.

Household Member Number	Description of Assets	Present Balance of Value	% Rate of Int. of Div. Earned Yearly
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

I hereby swear and affirm that the above information I have provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Head of Household                      Date                      Signature of Spouse

**OFFICE USE ONLY – APPLICANT SHOULD NOT COMPLETE**

Household Size: \_\_\_\_\_ Household's gross yearly income: \$ \_\_\_\_\_

VERY LOW INCOME                       LOW INCOME                       MODERATE INCOME

Checked by: \_\_\_\_\_ Date: \_\_\_\_\_