

Affordable Housing Program (AHP) TurnKey (HSP, HSP+ & HOPE)

ZERO INCOME AND/OR UNEMPLOYED CERTIFICATION

HOUSEHOLD MEMBER NAME: ______

I certify the following:	
1. I am currently unemployed and am not receivi	ing income (earned or unearned).
 I do NOT receive income from any of the following sources: a. Wages from employment (including commissions, tips, bonuses, fees, etc.); b. Income from the operation of a business; c. Rental income from real or personal property; d. Unemployment or disability payments; e. Public assistance payments; f. Periodic allowances such as alimony or child support; g. Social Security payments, annuities, insurance policies, retirement funds, pension, or death benefits; h. Veteran's Benefits; i. Supplemental Security Income; j. Contracted income (Uber, LYFT, DoorDash, GrubHub, etc.); k. Regular payments (employment and non-employment) received through payment services (Venmo, CashApp, etc.); l. Any other source not named above. d. Any other source not n	
Under penalty of perjury, I certify the information presented above is true and accurate. I understand that providing false representations herein may constitute an act of fraud. I acknowledge the information provided is being used for the specific purpose of determining my household's eligibility to receive assistance through the AHP or TurnKey. I will cooperate fully with the member or project sponsor, as applicable, to provide or obtain any necessary documents to confirm the information I have provided.	
Household Member Signature	 Date
Household Member Printed Name	

Effective: January 2024