

Boone County Housing and Redevelopment Authority  
824 Lick Creek Road  
Danville, WV (304) 369-3442

AFFIDAVIT OF ZERO INCOME

<b>NAME OF APPLICANT</b>	<b>PROJECT</b>
<b>STREET ADDRESS</b>	<b>PHONE NUMBER</b>
<b>CITY, STATE AND ZIP CODE</b>	<b>SOCIAL SECURITY NUMBER</b>

I hereby acknowledge that I do not have any income from welfare, unemployment, Veterans Administration, HUD (Department of Housing and Urban Development), relatives or friends, lottery earnings, AFDC, retirement, interest income, Social Security Administration, S.S.I., Black Lung, alimony, child support or any other source.

I also understand that pursuant to Section 1001 of Title 18, United States Code provides, "Whoever in any manner within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or make any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statements or entry, shall be fined not more than \$10,000.00 or imprisoned not more than five years, or both"

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF TENANT/APPLICANT

STATE OF \_\_\_\_\_  
SS:  
COUNTY OF \_\_\_\_\_

The above document was subscribed and sworn to, before me this \_\_\_\_\_  
Day of \_\_\_\_\_ by \_\_\_\_\_.

NOTARY PUBLIC, STATE OF  
NAME:  
MY COMMISSION EXPIRES: \_\_\_\_\_