



ORLANDO HOUSING AUTHORITY

**SECTION 3 RESIDENT OR EMPLOYEE HOUSEHOLD INCOME VERIFICATION**

Any individual who is seeking to be certified as a Section 3 resident and who is not a public housing resident, or not in a federally assisted housing program, or not a recipient public assistance program shall attest to their total current gross annual household income, **and provide the name and date of birth of each household member.** All additional household income earned by household members, excluding children under 18, and/or provided through public or private assistance, child support, bank or investment earnings must be included, where indicated below.

I, \_\_\_\_\_, (Individual's Full Name) do solemnly swear that the information I have provided below is true.

Number of family members: \_\_\_\_\_.

My total current gross annual household is: \_\_\_\_\_.

The source(s) of my total **annual** household income is/are:

	<b>Head of Household</b>	<b>Spouse</b> (If Applicable)	<b>Other Adult Members age 18 &amp; Over</b> (If Applicable)	<b>Other Adult Members age 18 &amp; Over</b> (If Applicable)	<b>Other Adult Members age 18 &amp; Over</b> (If Applicable)	<b>Other Adult Members age 18 &amp; Over</b> (If Applicable)
Gross Earnings						
TANF						
Child Support						
Bank Income						
Other Income (list)						
1.						
2.						
3.						

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

