



City of Cleveland
Justin M. Bibb, Mayor

ZERO INCOME AFFIDAVIT

Department of Community Development
Bureau of Residential Improvement
601 Lakeside Avenue, Room 320
Cleveland, Ohio 44114-1070
216/664-2869 · Fax: 216/420-4006
www.clevelandohio.gov

I, _____, a resident of _____ Cleveland, Ohio _____, hereby certify that I have no source of income at this time. I understand that sources of income include, but are not limited to:

1. Wages from employment (including commissions, tips, bonuses, fees, etc.),
2. Income from operation of a business;
3. Rental income from real or personal property;
4. Interest or dividends from assets;
5. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
6. Unemployment or disability payments;
7. Cash assistance from public assistance agencies;
8. Workers compensation benefits
9. Periodic allowances such as alimony or child support
10. Monies received from friends or family members not residing in the home that I reside
11. Sales from self-employed resources;
12. Any other source not named above.

I, _____, further certify I currently have no income and there is no imminent change expected in my financial status or employment status during the next 12 months.

How will you pay for rent and utilities? _____

How will you pay for food and clothing? _____

How will you pay for medical expenses? _____

How will you pay for transportation expenses? _____

Are you the account holder on any bank account(s)? _____

I understand that this statement is being used to determine household eligibility for one or more programs administered by the City of Cleveland or its partners.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein may constitute an act of fraud.

Signature of household member

Date

Sworn before me and subscribed in my presence this _____ day of _____, 20_____.

Notary Public

Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person, who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use.