



Self-Employment Income Verification Form

Full Name of Applicant or Tenant _____

Present Address of Applicant or Tenant _____

I hereby certify that I, _____, received a total of
\$_____ for the following work:

I expect to earn the gross amount of \$_____ for the coming 12 months beginning
(mm/dd/yyyy) _____ ending (mm/dd/yyyy) _____ minus expenses in the
amount of \$_____ for the total amount expected to earn of \$_____ for the following
work:

**I understand that if my actual earnings are different from those reported above, that I may be
required to report any changes to the Housing Authority.**

Signature of Applicant or Tenant Date

Signature of Notary Public Date

Name of Notary Public: _____

Date Commission Expires: _____