

INCOME QUESTIONNAIRE

(Complete ONLY if a household member over 18 has zero income)

Tenant _____

Address _____

Zero Income Since _____

Please indicate if you have income from any of the following sources. You are being asked to answer each of the following questions by checking “yes” or “no”. Failure to answer honestly is FRAUD AND WILL BE REPEATED TO BY THE WATERTOWN HOUSING AUTHORITY AS SUCH.

- Check a box in each of the following columns
- All adults in the household must respond (18+)
- If you checked “receiving” please provide documentation. For information on required documentation, please see letter attached!

POSSIBLE SOURCE OF INCOME	RECEIVING	NOT RECEIVING
Wages from any work that you are doing		
T.A.F.D.C. for any member of household		
Social Security for any household member		
Unemployment		
Pensions		
Interest or Dividends payments		
Veteran’s Benefits		
Recurring Periodic Gifts		
Salary from a Family-Owned Business		
Annuities		
Income from Insurance Policies		
Income from Retirement Funds		
Disability or Death Benefits		
Workers Compensation		
Babysitting		
Severance Payments		
Alimony		
Child Support		
Rental Income		
Winnings Paid Periodically		
Family Assistance		

I understand that if I claim \$0 rent, I must complete this form every 90 days, and provide all required documentation by the date stated. Failure to do so MAY result in my loss of housing. I agree to notify Watertown Housing Authority IN WRITING immediately if the above information changes.
I swear under the pains and penalties of perjury that all of the above information is true and accurate.

 Signature _____
 Date