CERTIFICATION OF NO INCOME

Household Member: _____

Address: _____
_____

I will be a household member in the home being purchased, using "HOME Funds". I certify that I do not have any source of income coming into the household that is being purchased by the person(s) listed below:

Name(s) of Household Member(s)/Borrower(s):

_____
_____

Address: _____
_____

CRIMINAL AND ADMINISTRATIVE ACTIONS FOR FALSE INFORMATION

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

I understand that knowingly supplying false, incomplete or inaccurate information is punishable under federal or State law and grounds for termination of housing assistance.

I HAVE READ THE ABOVE AND UNDERSTAND MY RESPONSIBILITIES. I CERTIFY THAT THE INFORMATION I HAVE GIVEN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

_____ _____
Signature of Household Member with no income Date

Certified by: _____ _____
Signature of Lending Officer Date

_____
Printed Name