

**STATE RENTAL ASSISTANCE PBA PROGRAM  
CERTIFICATION OF ZERO INCOME**

I \_\_\_\_\_ certify that I do not receive earned income, benefits or dividends of any kind. I understand that it is my responsibility to provide information concerning any income received by my household and that this information must be reported promptly to a representative of the State Rental Assistance Program.

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Name of Head of Household or Member

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Signature

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Date of Signature

Warning: Section 1001 of Title 18 of the United States 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.