



# No or Low Income Self-Declaration

Name (please print) \_\_\_\_\_

How has your household paid for housing in the past month (rent, mortgage, HOA or lot fees)?

\_\_\_\_\_

How has your household paid for utilities in the past month (electric and heat)?

\_\_\_\_\_

How has your household paid for food in the past month)?

\_\_\_\_\_

| Current Status:  | Yes or No | Required Documentation or Forms  |
|--|-----------|--|
| Unemployed?<br>If yes, list most recent employer:<br>Employer: _____<br>Date employment ended: ___/___/___   | Y N       | If job ended in the last 60 days, provide: <ul style="list-style-type: none"> <li>• Employer Verification Form or</li> <li>• Termination letter or proof of final pay</li> </ul> |
| Unemployment Compensation?<br>If yes, check one: <input type="checkbox"/> Receiving benefits<br><input type="checkbox"/> Applied or benefits are pending<br><input type="checkbox"/> Benefits ended on ___/___/___ | Y N       | <ul style="list-style-type: none"> <li>• If Yes, please request and complete a NHES Verification Form</li> </ul>   |
| Receiving SNAP/Food Stamps?  | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide DHHS benefit letter</li> </ul>  |
| Receiving State Cash Assistance  | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide DHHS benefit letter</li> </ul>  |
| Receiving City/Town Welfare?   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide letter from City/Town</li> </ul>  |
| Utility Disconnect?<br>Disconnect date ___/___/___   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide disconnect notice</li> </ul>  |
| Overdue rent, Heat included?   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide Landlord Form</li> </ul>  |
| Eviction, Heat included?   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide Demand for Rent letter</li> </ul>   |
| Receiving Child Support?<br>Amount: _____ Frequency: _____   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, provide Proof of amount received</li> </ul>   |
| Support from Family/Friends?<br>(not in Household)   | Y N       | <ul style="list-style-type: none"> <li>• If Yes, please request and complete a Financial Support Form</li> </ul>   |
| Other outside financial help?  | Y N       | <ul style="list-style-type: none"> <li>• If Yes, complete Financial Support Form</li> </ul>  |
| Living off Savings/Credit Cards?   | Y N       |  |

*Additional documentation may be required.*

I have given a true and complete statement of facts necessary to allow determination of eligibility. I understand that if I knowingly give inaccurate or incomplete information about my household, I am breaking the law and can be prosecuted for fraud, conviction resulting in possible imprisonment and/or fine.

Signature \_\_\_\_\_ Date \_\_\_\_\_