

SELF-CERTIFICATION FORM

Head of Household Name: _____

Current Address: _____

Mailing Address: _____

Phone number: _____ Email address: _____

Form completed by: _____ Date: _____

DESCRIPTION OF SELF CERTIFICATION

I certify that all the information submitted on this self-certification is true and complete to the best of my knowledge. I understand that providing false information or failing to provide information necessary to determine my rental subsidy is grounds for termination or denial of assistance and/or could lead to owing a debt to Bloomington Housing Authority (BHA). I understand that the information submitted on this form is subject to verification through the EIV Income Validation Tool and I may be required to repay any amount of reported income discrepancies.

Signature of Head of Household

Date

Staff Member Name

WARNING: Title 18, Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willfully making false or fraudulent statements on any documents or to any agency of the United States.

