

Verification of Annual Income, Household Size, and Utility Allowance
by the
Section 8 Administrative Agency for Section 8 Assisted Applicants

Applicant: _____ Social Security Number: _____

Address: _____ Family Size: _____

I authorize the owner/manager of the Low-Income Housing Tax Credit property identified below to make inquiries regarding my income, household size, and utility allowance for determining occupancy within the guidelines of IRC Section 42. I further authorize the Section 8 Administrative Agency to release a copy of my signed application for rental assistance, and/or any information contained within that application which will verify my eligibility for occupancy.

Applicant Signature: _____ Date: _____

To the Section 8 Administrative Agency:

The applicant identified above has indicated that he/she is receiving Section 8 assistance from your agency. Information provided will remain confidential and will be to determine eligibility for occupancy in a Low-Income Housing Tax Credit property as required by IRC Section 42.

Owner/Manager Signature: _____ Date: _____

This is to certify that the applicant identified above is a recipient of Section 8 Rental Assistance from this Section 8 Administrative Agency.

The following information has been verified by the Agency and certified by the applicant.

Family Gross Annual Income: _____

Number of Persons in Family: _____

Monthly Utility Allowance Calculation for the Unit: _____

Signature of Certifying Official: _____

Section 8 Administrative Agency: _____

Date: _____ Contact Telephone Number: _____