



DECLARATION OF HOUSEHOLD INCOME

915 SW 3RD Ave, Ontario, Oregon 9714

Phone: (541) 889-9555

Fax: (541) 889-0768

This form **MUST** be used for:

- Household member (age 18 and over) who has **NO** income.
- Household member who has occasional irregular income such as mowing lawns, childcare, collecting cans/bottles, etc. (odd jobs)
- Household members whose income is from an informal child support agreement or alimony.
- Any miscellaneous income not reported elsewhere.
- Self-declared income

Applicant Name (please print:)

Please provide income information for **the previous calendar month**. Example If you apply in December, you need November's income. Income for the previous calendar month: _____ (**Month**)

If there was a period of no income within the calendar month, provide dates: _____ / _____ / _____ **TO** _____ / _____ / _____
Month Day Year Month Day Year

Please fill in **EVERY** adult's name that has/had **NO** income or self-declared income **and** source of income for each household member (**age 18 and over**):

Name	Amount	Source if applicable

Is anyone 18 and **currently** enrolled in high school, if **Yes**: Who? _____

If you have no income, how long have you had a zero income? _____

How is the rent paid? _____

How is food paid for? _____

How are utilities paid for? _____

If paying with savings, how much do you have left? \$ _____

What was the source of the savings? _____

I certify that the information contained herein is accurate and true to the best of my knowledge. If I have intentionally falsified any of this information, I understand that I may be liable to Oregon Housing and Community Services (OHCS) and could be fined as much as \$10,000 and/or imprisoned for as many as (5) years.

Applicant Signature: _____

Date: _____