



UPPER EAST TN HUMAN DEVELOPMENT AGENCY

Self-Declaration of Zero Income

Date: ____/____/____

I _____ certify that the following household members 18 years or older have zero income:

Name: _____ has zero income as of ____/____/____

Name: _____ has zero income as of ____/____/____

Name: _____ has zero income as of ____/____/____

Name: _____ has zero income as of ____/____/____

Name: _____ has zero income as of ____/____/____

Note:

***All household members claiming zero income, even when someone in the home has income, need to be listed on this form.**

I certify that the information above is correct. Falsifying and/or withholding income information is a federal offense and I can be convicted to a fine of \$10,000 or imprisonment for no more than five years or both under the state of Tennessee Laws.

Signature of Applicant: _____

Date: _____