HOME REPAIR NETWORK PROGRAM

REQUEST FOR VERIFICATION OF INCOME

The Owner of this building has applied for housing rehabilitation services through the Home Repair Network Program. This program is funded with Community Development Block Grant (CDBG) funds. Federal regulations require us to verify the sources and amounts of income of all CDBG beneficiaries.

All information is **CONFIDENTIAL** and will be used only to determine program eligibility.

Your assistance and prompt response will be appreciated.

Tenant Information

Total Number of Persons in Your Household _____

Total Household Income received over the last 12 months $_____

(Household Income is defined as income earned by all household members except those less than 18 years of age)

I HEREBY AUTHORIZE RELEASE OF THIS INCOME INFORMATION TO THE HOME REPAIR NETWORK PROGRAM.

Date: _____ Signature: _____

Please Print Name _____

Street Address _____

Apartment # _____

Please return to:

Thank You.