

LEAD HAZARD REDUCTION GRANT PROGRAM (Federal Lead)  
 MAINE LEAD PAINT HAZARD ABATEMENT PROGRAM (State Lead)

### INCOME RECERTIFICATION

**Project Funding:**    State Lead    Federal Lead    Healthy Homes   **DHHS Project Type:**    Single Family    Multi-Family

**Agency (CAA):** \_\_\_\_\_ **CAA Contact Name:** \_\_\_\_\_

**Agency Address:** \_\_\_\_\_ **CAA Contact Title:** \_\_\_\_\_

**CAA Contact Phone:** \_\_\_\_\_

**CAA Contact Email:** \_\_\_\_\_

<b>Applicant (Owner):</b> _____	<b>Co-Applicant:</b> _____
<b>Property:</b> _____	<b>Tenant:</b> _____
	<b>Co-Tenant:</b> _____
	<b>Unit#:</b> _____

**Date:** \_\_\_\_\_

**INSTRUCTIONS:** To be completed only if the Grant does not close within four (4) months of the Application date. Return completed and signed Income Recertification to the above-named CAA.

**1. Income Recertification must be provided for the following period:** From \_\_\_\_\_ To \_\_\_\_\_

**2. Gross Income** (Owner must provide verification of all income):

	GROSS AMOUNT	(A) Owner	(B) Co-Owner	(C) Tenant
<b>a.</b>	Wages (gross monthly) from Employment			
<b>b.</b>	Additional Monthly Income From:			
	1. Overtime			
	2. Part-Time Employment			
	3. Pensions			
	4. Veteran's Administration Compensation			
	5. Net Rental Income			
	6. Self Employment*			
	7. Child Support			
	8. Public Assistance (TANF/WIC/GA)			
	9. Social Security Benefits			
	10. Unemployment Compensation			
<b>c.</b>	<b>Other**</b>			
<b>d.</b>	<b>Gross Monthly Income</b> (Total A, B & C)			
<b>e.</b>	<b>Total</b> (Line D Multiplied by 12)			
<b>f.</b>	<b>Gross Household Income</b> (Total e(A)+e(B)+e(C):			

\*If self-employer, please provide most recent 2 years of completed tax returns including Schedule C.

\*\* Includes bonuses, dividends, interest, royalties, alimony, sick pay, disability, retirement, income from trusts, income from business activities or investments.

**3. I certify that all the information provided on this form is true and correct and I acknowledge the CAAs right to verify.**

Date: \_\_\_\_\_ Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Co-Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Co-Tenant Signature: \_\_\_\_\_