

Housing Authority of Fort Fairfield
18 Fields Lane
Fort Fairfield, ME 04742
207-476-5771

Zero Income Checklist and Worksheet

This Checklist and Worksheet is to be completed for all families whose Total Tenant Payment equals the minimum rent, or, for all families reporting less than \$100 per month in total income. The form first lists all the cash and non-cash contributions the family is receiving and then assists PHA staff to compute the annual value of such contributions. The family is required to submit documentation of amounts claimed.

Please provide an answer for each question. You must account for how you are paying for the expenses listed below. All expenses must be accounted for, to ensure all household income has been reported. Please provide verification as stated in each section. Failure to complete this form could result in termination or denial of housing assistance, due to non-reporting of household income.

1. Food Expenses

Is the family receiving Food Stamps? Yes- No. If yes, what is the monthly value of food stamps?
\$ _____.

If no, what is the family's weekly grocery bill? \$ _____. How does the family pay the weekly grocery bill?

If someone other than a member of the applicant/tenant family contributes to groceries, who contributes?

What is the average cash weekly amount for groceries contributed from all sources? \$ _____.

This amount is income.

Does anyone contribute groceries or prepared food to the family on a regular basis? Yes-No. If yes, what is the average weekly value of groceries or prepared food contributed? \$ _____.

This amount is income.

Note: Food contributed by food banks, received from the surplus commodity program, the WIC program, or consumed at publicly or non-profit funded meals programs does not count as income. Food or cash for food contributed by private persons does count as income.

Verification: *The family should bring in at least one month's worth of grocery receipts. Check the receipts to make sure a family of that size could manage on the amount of food documented.*

2. Cleaning, Grooming and Paper Products Expenses

What is the weekly value of paper products used by the family? Include paper napkins, toilet paper, paper towels, trash bags, other paper goods, and disposable diapers. \$ _____. How does the family pay for these paper products?

If someone other than a member of the applicant/tenant family contributes to paper products, who contributes?

What is the average weekly value of cash contributions for paper products? \$ _____.
This amount is income.

Does anyone contribute paper products to the family on a regular basis? Yes-No. If yes, what is the average weekly value of paper products contributed to the family? \$ _____. **This amount is income.**

What is the weekly value of grooming products and services used by the family? Include soap, deodorant, shampoo, toothbrushes, toothpaste, dental floss, cosmetics, hair color, barber, beautician services etc. \$ _____. How does the family pay for the cost of grooming products and services?

If someone other than a member of the applicant family contributes to grooming products, who contributes?

What is the average weekly value of contributions (cash or products) for grooming products? \$ _____. **This amount is income.**

What is the weekly value of cleaning products used by the family? Include dishwashing soap, laundry detergent, and household cleaning products. \$ _____.

How does the family pay for cleaning products?

If someone other than a member of the applicant/tenant family contributes to cleaning products, Who contributes?

What is the average weekly value of cash contributions for cleaning products? \$ _____.
This amount is income.

Does anyone contribute cleaning products to the family on a regular basis? Yes-No. If yes, what is the average weekly value of cleaning products contributed to the family? \$ _____.
This amount is income.

Verification: Most families buy cleaning supplies, grooming products and paper products at the grocery store. Review the families grocery receipts to help verify amount spent.

3. Transportation Expenses

Does the family own a car? Yes-No. If yes, are there still payments due on the car? Yes-No. If yes, what is the amount of the monthly car payment? \$ _____. How does the family make the car payment?

If someone other than a member of the applicant/tenant household contributes to the car payment, who contributes?

What is the monthly amount of contribution toward the car payment? \$ _____. **This amount is income. The amount is income whether it is cash paid to the family or cash paid directly to the holder of the car note.**

If the family owns a car outright (no payments are due), what are the average monthly amounts the family pays for the following:

Gas \$ _____ Maintenance \$ _____ Insurance \$ _____ Tires \$ _____ .

How does the family pay for these auto-related expenses?

If someone other than a member of the applicant/tenant family contributes to the car's operating costs, who contributes?

What is the average monthly amount of cash or direct payment contribution to the car's operating costs? \$ _____. **This amount is income.**

Verification: The family should bring in one month's gas receipts, proof of insurance and proof of car payment (if applicable).

Note: Uninsured automobiles cannot be parked on PHA property.

If the family does not own a car, what does the family use for transportation?

How does the family pay for this transportation?

If someone other than a member of the applicant/tenant family contributes to other transportation costs, what is the average monthly amount of cash or other contribution to transportation? \$ _____. **This amount is income.**

Verification: A family without a car should provide a credible statement of the way they pay for transportation to shop, attend school, visit friends, take care of medical needs, attend church, etc.

4. Entertainment Expenses

Does the family have a cable TV connection? Yes-No. If yes, does the family have the basic minimum service or do they also have any premium channels? Yes-No. What is the average monthly cost of cable TV service? \$ _____. How does the family pay for the cable TV service?

If someone other than a member of the applicant/tenant family contributes to the cost of cable TV service, who contributes?

What is the average monthly contribution (in cash or direct payment to the cable company) for cable TV? \$ _____. **This amount is income.**

What are the average weekly costs of other types of entertainment to the family? Include the following:

Magazines \$ _____ Movies \$ _____ Video Rentals \$ _____ Club memberships
\$ _____ Sporting events \$ _____ Liquor/Beer/Wine \$ _____ Lottery tickets
\$ _____ Vacations \$ _____ Other entertainment \$ _____.

How does the family pay for the other entertainment costs?

If someone other than a member of the applicant/tenant family contributes to the cost of other entertainment, who contributes?

What is the average monthly contribution (in cash or entertainment provided) for other entertainment? \$ _____. **This amount is income.**

Verification: The family should bring in two monthly bills for cable TV, plus receipts for other entertainment costs.

5. Clothing Expenses

What are the ages and sexes of all family members?

What is the average monthly cost for clothing and shoes for the family?

How does the family pay for clothing and shoes?

If someone other than a member of the applicant/tenant family contributes to the cost of clothing, who contributes?

What is the average monthly contribution (in cash or new clothes and shoes) for clothing? \$ _____. **This amount is income.**

What is the weekly amount spent by the family for laundry/dry cleaning clothing? \$ _____

How does the family pay for cleaning its clothing?

If someone other than a member of the applicant/tenant household contributes to the cost of cleaning clothing, who contributes?

What is the average monthly contribution for clothes cleaning? \$ _____. **This amount is income.**

Note: Clothing acquired from Clothing banks or given to the family second hand is not counted as income.

Verification: The family should provide a schedule that shows when clothing and shoes are purchased and the amounts spent. Remember that children will need more clothing and shoes than adults because they are growing.

6. Smoking Expenses

Does anyone in the applicant/tenant household smoke cigarettes or cigars? Yes-No. If yes, how many packs per day, are smoked by the smokers in the household?

How does the family pay for the cost of cigarettes/cigars?

If someone other than a member of the applicant/tenant household contributes to the cost of smoking, who contributes?

What is the average monthly contribution (in cash, cigarettes or cigars) \$ _____. **This amount is income.**

Verification: The family should document the brand of cigarettes/cigars smoked and the staff will document the least expensive price for that brand in the locality to impute cost.

7. Communications Expenses

Does the family have a telephone? Yes-No. If yes, how many lines does the family have into its house/apartment?

Does the family have any special telephone services? (For example, call waiting, call forwarding, caller ID, etc.) Yes-No. Does anyone in the family have a cell phone? Yes-No.

What is the average monthly cost for telephone service? \$ _____.

How does the family pay for the cost of telephone service?

If someone other than the member of the applicant/tenant household contributes to the cost of telephone service, who contributes?

What is the average monthly contribution (in cash or direct payment of the telephone bill) for telephone service? \$ _____. **This amount is income.**

Does anyone in the family have a pager/beeper? Yes-No. If yes, how many members have beepers/pagers?

What is the average monthly cost for the beepers/pagers? \$ _____.

How does the family pay for the cost of beepers/pagers?

If someone other than a member of the applicant/tenant household contributes to the cost of beeper/pager service, who contributes?

What is the average monthly contribution (in cash or direct payment of the beeper/pager bill)? \$ _____. **This amount is income.**

Does the family have an Internet connection? Yes-No. If yes, who is the Internet provider?

What is the monthly cost of the Internet connection?

Is there a dedicated telephone line for the Internet? Yes-No. If yes, does the telephone line show on the family's telephone bill? Yes - No. If no, get a copy of the family's other telephone bill.

How does the family pay for the Internet connection?

What is the average monthly cost of the Internet connection? \$ _____ .

If someone other than a member of the applicant/tenant family contributes to the cost of the Internet connection, who contributes?

What is the average monthly contribution (in cash or direct payment to the Internet provider) for Internet services? \$ _____ . **This amount is income.**

Verification: The family should bring in at least two month's worth of bills for telephone, beeper/pager and Internet services, as applicable. Review the bills carefully to determine the average monthly cost for communications services.

8. Shelter Expenses

For applicants, what is the average monthly cost for housing and utilities? \$ _____ .

How does the applicant pay the cost of shelter?

If someone other than a member of the applicant household contributes to housing or utility costs, who contributes?

What is the average monthly contribution to shelter (housing plus utilities)?

Will the person(s) contributing toward shelter continue to do so when the applicant is admitted to public housing? Yes-No. If no, why not?

For tenants, what is the average monthly cost for housing and utilities? \$ _____ . How does the tenant pay the cost of shelter?

If someone other than a member of the tenant household makes a contribution toward the shelter cost, who contributes?

What is the value of the contribution toward shelter? \$ _____ . **This amount is income.**

Verification: Families should bring in documentation of their actual cost for housing and utilities.

9. Medical Expenses

Does the family have any unreimbursed medical expenses?

Yes or No. If yes, what is the average monthly cost of unreimbursed medical expenses? \$ _____ .

How does the family pay for unreimbursed medical expenses?

If someone other than a member of the applicant/tenant household contributes toward medical expenses, who contributes?

Such contributions are not income.

10. Miscellaneous Expenses

Listed below are a series of expenses the family might have. Indicate the monthly amount the family spends on any applicable expenses and the amounts contributed toward the expenses:

Church contributions \$ _____ Unreimbursed Educational Expenses \$ _____

Unreimbursed Child care Expenses \$ _____ Unreimbursed Job Expenses \$ _____ .

Staff use only: Review the information provided above against the observations of staff conducting the home visit/home inspection. Does the information appear to be consistent?

If not, insist that the applicant explain any variations. For example, if the applicant does not admit to having telephone or cable TV service but they have been observed in the home, press the point.

APPLICANT/TENANT CERTIFICATION

APPLICANT(S)/TENANT(S) STATEMENT

I/We certify that the information given to the Fort Fairfield Housing Authority on household composition, income, net family assets, and allowances and deductions is accurate and complete to the best of my/our knowledge and belief. I/We understand that false statements of information are punishable under Federal and State Law (17-A MRSA, Section 453). I/We also understand that false statements or information are grounds for termination of housing assistance and termination of tenancy.

I/We also will inform the Housing Authority of Fort Fairfield if our circumstances change within ten (10) days, if anyone in the household receives an income etc.

Signature of Head of Household

Date

Signature of Household Member

Date

Fraud Affidavit

Housing Authority of Fort Fairfield

Penalties for Fraud

FRAUD - Withholding information from this Agency OR providing false information to this Agency

1. Under Federal Law, FRAUD is punishable by fines up to \$10,000 AND imprisonment for up to five years.
2. If a resident submits fraudulent information to this agency OR withholds relevant information from this agency, the resident will be charged back rent, face eviction proceedings, and will be turned in for prosecution for violating a federal law.
3. Tenants will be required to pay market rent - retroactively, if applicable.

Title 17-A Maine Criminal Code, Chapter 19: Falsification in Official Matters

-453. UNSWORN FALSIFICATION

1. A person is guilty of unsworn falsification if:
 - A. He/she makes a written false statement which he/she does not believe to be true, on or pursuant to, a form conspicuously bearing notification authorized by statute or regulation to the effect that false statements made therein are punishable: [1981, C. 317, ~ 16 (amd).]
 - B. With the intent to deceive a public servant in the performance of his official duties, he (2) knowingly creates, or attempts to create, a false impression in a written application for any pecuniary or other benefit by omitting information necessary to prevent statements therein from being misleading;
2. Unsworn falsification is a Class D crime. [1975, c. 499, ~ 1 (new).]

Resident Acknowledgements}

By signing below, I confirm:

1. That I have read the penalties for submitting fraudulent information above;
2. That I understand what fraud is, and;
3. That I understand the penalties for committing fraud.

Signature and Date

X

Date

Date