**(Agency Name)**

**Self-Declaration of Zero Income**

**Application Date: \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ certify that the following household members 18

 (Printed Applicant Name)

years or older have zero income:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ claim zero income within 30 days from the application date listed above.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ claim zero income within 30 days from the application date listed above.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ claim zero income within 30 days from the application date listed above.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ claim zero income within 30 days from the application date listed above.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ claim zero income within 30 days from the application date listed above.

**Note: All household members self-declaring zero income, even when someone in the home has income, will need to be listed on this form. Current employment separation letters must be attached to this signed 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**