ATTACHMENT T: ASSET CERTIFICATION

☐ Initial Certification Recertification Other:_____ **Effective Date:** _____
(MM / DD / YYYY)

PROPERTY NAME: **FOREST HILLS MHA APARTMENTS** LOG # _____

HEAD OF HOUSEHOLD NAME: _____ UNIT # _____

I. CHECKING/SAVINGS ACCOUNT(S) (Incl. EBT Cash, Direct Express cards, etc.)

Banking Institution	Account Name	Account Holder	Account Number	Current Balance	Interest Rate	Annual Income
1)						
2)						
3)						
4)						

II. NONTRADITIONAL ELECTRONIC ACCOUNT(S) (Venmo, Square Cash, Paypal, Crowdsourcing, etc.)

Banking Institution	Account Name	Account Holder	Account Number	Current Balance	Interest Rate	Annual Income
1)						
2)						
3)						
4)						

III. INVESTMENT ASSETS (stocks, mutual funds, virtual currency, bonds, whole life insurance, trusts, etc.)

Financial Institution	Account Name	Account Holder	Account Number	Account Value	Cash Value	Interest Rate	Annual Income
1)							
2)							
3)							
4)							

IV. REAL PROPERTY* (include the location and value of any real estate holdings sold within the last two years)

Has any member of the household previously purchased any interest in residential real property (whether or not they still own it)?

☐ Yes ☐ No

Type (residential, commercial, vacant land, other)	Address	% Ownership	Market Value of Property	Annual Income Generated
1)				
2)				

** Real property includes shares of stock in a cooperative housing corporation and ownership includes any type of direct or indirect ownership interest (including partial ownership or ownership through LLC.)*

V. OTHER NON-NECESSARY PERSONAL PROPERTY (as defined by HUD in 24 CFR § 5.603)

Description	Value
1)	
2)	

VI. LIST ANY ASSET DISPOSED OF FOR LESS THAN FAIR MARKET VALUE WITHIN THE LAST TWO (2) YEARS

Description	Value
1)	
2)	

VII. CASH SAVINGS

I have $_____ in cash savings.

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VIII. TOTAL INCOME FROM ASSETS / NO ASSETS

☐ The total household assets (as defined in 24 CFR 5.603) listed above exceed $_51,600__. **Verification of all assets has been collected and properly documented.** Annual income from total household assets is included in total gross annual income.

☐ The total household assets (as defined in 24 CFR 5.603) listed above do not exceed $_51,600_____. Annual income from total household assets is included in total gross annual income.

☐ **I hereby certify that I have no assets at this time, including but not limited to any of the asset types listed above.**

I/WE THE UNDERSIGNED, CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I/we have not withheld, falsified, or otherwise misrepresented any information. I/we fully understand that any and all information I/we provide during this certification process is subject to review by the New York City Department of Investigation (DOI), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I/we understand that the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of my lease (if discovery is made after the fact), and referral to the appropriate authorities for potential criminal prosecution.

SIGNATURE OF APPLICANT	DATE
SIGNATURE OF CO-APPLICANT	DATE
SIGNATURE OF CO-APPLICANT	DATE
SIGNATURE OF CO-APPLICANT	DATE