

CASH ON HAND CERTIFICATION

One form per household is completed when certifying the amount of cash held outside of a financial institution.

Development Name: _____

Head of Household Name: _____

Unit No: _____

Certification Type: Initial Recertification (Effective Date: _____)

PLEASE COMPLETE:

HH MEMBER NAME	AMOUNT OF CASH ON HAND

Total Household Cash on Hand: \$_____

All household members age 18 or older must sign and date.

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

Applicant/Resident Signature

Date

