Section 8 ASSET CERTIFICATION

If a households <u>combined</u> net assets exceeds the applicable Imputed Income Limitation, 3rd Party Verification will need to be completed.

(Complete only one form per household; include assets of children.)

For the following asset types, include the current Cash Value of <u>each</u> asset held by any family member and the actual income that the asset earns. *Cash value is *current* market value minus cost to convert an asset to cash, such as broker's fees, settlement costs, outstanding loans, penalties for early withdrawal, etc.*

Household Name:				l	Jnit#:
	PART I. ASSETS	DISPOSED OF FOR LES	S THAN FAIR MARKET	VALUE (FMV)	
Yes No	Within the past two (FMV).	o (2) years, I/we have s	old or given away asse	ts for below their fa	ir market value
Asset #1:		Date of Disposal:		FMV - amt received:	
Asset #2:		Date of Disposal:		FMV - amt received:	
	PART II: FE	DERAL TAX RETURN OR	REFUNDABLE FEDERAL	TAX CREDIT	
Have you recei	ved a federal tax ret	urn or refundable fede	ral tax credit in the las	t 12 months?	Yes No
			Amount of r	eturn/credit: \$	
Part III: Non-necessary Personal Property (NNPP)					
True I/we do NOT have any non-necessary personal property					
Type of Asset	(A) Cash Value*	(B) Annual Income	Type of Asset	(A) Cash Value*	(B) Annual Income
Cash on Hand	\$	N/AP	Cryptocurrency	\$	\$
Pre-paid Debit Card (including Govt. Benefits)	\$	N/AP	Money Market/ CD	\$	\$
Checking/Savings	\$	\$	Annuities	\$	\$
Checking/Savings	\$	\$	Brokerage Account	\$	\$
Savings	\$	\$	Stocks/Bonds	\$	\$
Internet based assets (Cash App, Venmo, PayPal, Crowdfunding, etc.)	\$	\$	Other:	\$	\$
Whole Life Insurance	\$	\$	Other:	\$	\$
		Non-Acco such as vehicles used for ork.), and equipment/ma		o generate income fo	r a business
Description				(A) Cash Value *	
				\$	
				\$	
				\$	
		PART IV. RE	AL PROPERTY	<u> </u>	
True	I/we do NOT have				
Description of Property			(C) Cash Value*		(D) Income
					\$
			\$ \$		
					ledge. The undersigned furthe ay result in the termination of a
Signature of Applicant/	Tenant [Date	Signature of Applica	nt/Tenant	Date

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