



Water Affordability Program Declaration of Zero Income

Instructions: All household members age 18 and older who have had no income in the last 30 days must sign this form. Income includes but is not limited to: wages, self-employment, Social Security, Temporary Cash Assistance (TCA) / Temporary Disability Assistance Program (TDAP) and/or unemployment. Each person declaring, they have had no income in the last 30 days is referred to as the "Declarant" and must print, sign and date the lines at the bottom of this form.

Applicant Name:

Applicant Water Bill Account Number

I certify that I have had no income of my own during the past thirty (30) days, from _____ to _____.

I swear (or affirm) that all information on this declaration is true, correct and completed to the best of my ability, knowledge and belief.

My signature below makes this statement binding.

When this form is completed by an individual other than the applicant, the signer(s) agree to report to the Mayor's Office of Family and Child Success of any changes of which he/she is aware in the financial circumstances of the applicant or in his/her relationship to the applicant.

Office Use Only: Date Received: _____ Intake Worker Signature: _____