

**SUPPORTING DOCUMENT FROM PUBLIC HOUSING AUTHORITY  
FOR RESIDENTS/APPLICANTS RECEIVING SECTION 8 HOUSING ASSISTANCE PAYMENTS**

In accordance with IRS Regulation 1.42-5 (b)(vii) the following is submitted as documentation to support the low-income tenant income certification for the following resident/applicant, in the case of a resident/applicant receiving housing assistance payments under Section 8, of the United States Housing Act of 1937.

**TO BE COMPLETED BY OWNER/OWNER REPRESENTATIVE**

Head of Household Name: \_\_\_\_\_

Social Security Number (last four digits) of head: \_\_\_\_\_

**TO BE COMPLETED BY PUBLIC HOUSING AUTHORITY REPRESENTATIVE**

The above named applicant/resident's annual gross household income (before deductions/allowances) has been verified by the Housing Authority as \$\_\_\_\_\_.

\_\_\_\_\_  
PHA Representative's Printed Name

\_\_\_\_\_  
PHA Representative's Title

\_\_\_\_\_  
PHA Representative's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-Mail Address



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

