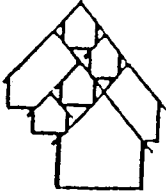


# SOUTH SHORE HOUSING



South Shore Housing Development Corporation  
169 Summer Street  
Kingston, MA 02364-1220  
(781) 422-4200; 1-800-242-0957  
FAX (781) 585-7483 \*TDD (781) 422-4200

## CERTIFICATION OF NO INCOME BY FAMILY MEMBER

\_\_\_\_\_  
Name of Family Member Certifying

I hereby certify that I am not currently employed and I do not receive any income of any kind. If I should receive income from any source in the future, I shall report it to South Shore Housing Development Corporation, (SSHDC). Furthermore, I grant authorization to SSHDC, and its staff, to contact any agencies offices, groups or organizations to obtain any information or materials which are deemed necessary to complete my application for participation or recertify my eligibility for continued participation in the Housing Assistance Payments Program.

## SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME OF SUBSIDY HOLDER

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
SOCIAL SECURITY #  
OF FAMILY MEMBER

\_\_\_\_\_  
CITY, STATE, ZIP

**WARNING:-** Section 1001 of title 18 of the U.S. Code makes it a criminal offense to make willful false statements of misrepresentation to any department or Agency of the United States as to matters within its jurisdiction.