



**Texas General Land Office**  
**Community Development and Revitalization**  
**Declaration of Zero Income**

Applicant Information		
<b>Program:</b>	<b>Disaster:</b>	
<b>Applicant Name(s):</b>		
<b>Application ID:</b>		
<b>Applicant Physical Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b>
<b>Household Member Name</b>		
<i>A separate form must be completed for each household member over the age of 18 who is claiming zero income.</i>		
<b>Household Member Name:</b>		
<b>Household Member Confirmation</b>		
<i>Select only one.</i>		
I do not have income of any kind at present and do not expect a change in my financial or employment status during the next 12 months	<input type="checkbox"/>	
I do have income and will provide the required income documentation to the GLO.	<input type="checkbox"/>	
<b>Identification of Income Sources</b>		
I individually receive income from the following sources:		
Wages from employment (including commissions, tips, bonuses, fees, etc.)	<input type="checkbox"/>	
Income from operation of a business	<input type="checkbox"/>	
Rental income from real or personal property	<input type="checkbox"/>	
Interest or dividends from assets	<input type="checkbox"/>	
Social Security payments	<input type="checkbox"/>	
Supplemental Security Income payments	<input type="checkbox"/>	
Payments from annuities, insurance policies, retirement funds, pensions, or death benefits	<input type="checkbox"/>	
Unemployment or disability payments	<input type="checkbox"/>	
Public assistance payments (other than food stamps)	<input type="checkbox"/>	
Periodic allowances from alimony or child support	<input type="checkbox"/>	
Gifts received from persons not comprising the household	<input type="checkbox"/>	
Sales from self-employed recourses (Avon, Mary Kay, Pampered Chef, etc.)	<input type="checkbox"/>	
Any other sources not named above	<input type="checkbox"/>	
I have used and will use the following sources to pay for rent, utilities, and/or other necessities:		

### Household Member Declaration

Under penalty of perjury, I declare that the information regarding my income presented in this form is true and accurate to the best of my knowledge and belief. I understand that providing false representations herein constitutes an act of fraud and that submitting false, misleading, or incomplete information may result in my household's ineligibility to participate in the Program.

**Warning: Any person who knowingly makes a false claim or statement to HUD or causes another to do so may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729.**

### Signature

Household Member Printed Name:

Date:

Household Member Signature: