OAKLAND COUNTY
COMMUNITY & HOME IMPROVEMENT
SECTION 3
INCOME CERTIFICATION FORM

Name:		Date:
Address: City & State: Zip:		
Telephone Number:	FAX Number:	Email Address:

As an employee of _____, I certify that my total gross household income last year was not greater than (based on the number of persons in the family) the amount checked below.

Family Size	Section 3 Gross Household Income Limits	**CHECK ONE** (√)	
		Household Income Less Than (√)	Household Income More Than (√)
1	$39,100		
2	$44,700		
3	$50,300		
4	$55,850		
5	$60,350		
6	$64,800		
7	$69,300		
8	$73,750		

PENALTY FOR FALSE OR FRAUDULENT STATEMENT: U.S.C. title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing, or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than $10,000 or imprisoned not more than five (5) years, or both."

I agree to provide any additional documentation (if requested) that confirms the accuracy of my family size and total household income.

Owner's Name: _____

Signature: _____ Date: _____