

## WHAT TO SUBMIT TO COMPLETE YOUR REVIEW

| items below before you turn it in. If anything is missing, it will take longer to process your application.  |
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| Personal Declaration (attached): Fill out all pages (front and back) completely – check a Yes or No box for each question and provide additional information if needed. You and all household members 18 or older must sign and date the form. |
| SHA General Release of Information (attached): You and all household members 18 or older must sign and date the form.  |

## **VERIFICATION OF INCOME AND EXPENSES**

☐ Income Verification: Report all sources of income for all household members on the Personal Declaration form. Seattle Housing Authority may verify any information that you provide. See the table below for what documents to submit.

| Type of Income   | What to Submit  |
|--|---|
| Employment / Job Training  | Copies of your most recent two months of paychecks.   |
| Public Assistance (TANF or Welfare)                              | DSHS benefit letter. Only needed if the amount will change.   |
| Social Security or SSI   | Most recent benefit award letter. If you do not have a copy, you can request it from the Social Security Administration at 1-800-772-1213 or www.ssa.gov.   |
| Worker's Compensation / Labor and Industries (L&I)               | A statement from Labor and Industries, insurance company, law firm, etc., which shows your awarded amount. Must be no older than 60 days.   |
| Alimony  | A copy of the court order or a statement stating the amount and frequency.  |
| Regular Contributions or Gifts from organizations or individuals | For example, a church gives you \$20 in groceries every week or a relative pays your phone bill every month. Provide a statement from the organization or individual. Must be no older than 60 days.                            |
| Child Support  | If the child support is not paid through the Office of Support Enforcement, submit a statement from the non-custodial parent. Must be no older than 60 days.  |
| Retirement Benefits, Annuities, and Pensions                     | A statement from the account administrator verifying your gross monthly benefit. Must be no older than 60 days.   |
| Trusts   | Verification from the trust administrator of the current value of the trust, the type of trust (irrevocable or revocable), and the date and type of any disbursements in the past twelve months. Must be no older than 60 days. |
| Self-Employment /<br>Social Service Payment<br>System (SSPS)     | Complete the Self-Employment Certification form and submit a copy of all pages of your most recent tax return. If you are not self-employed, submit three months of DSHS SSPS provider and co-pay statements.                   |
| Unemployment Benefits  | No verification required.   |
| Zero Income  | If all adults in the household earn 0 income, the Head of Household must sign the Zero Income Affidavit form.   |

| Assets Verification: Verification is not required if the total value of all household assets is less than      |
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| \$50,000. Assets include, but are not limited to: checking accounts, savings accounts, certificates of deposit |
| (CD), IRAs, bonds, trust funds, stocks, 401k, insurance policies, equity in real property, or other financial  |
| investments. Assets do not include personal property, such as a personal vehicle or furniture.                 |

| Asset Amount                        | What to Submit  |
|-------------------------------------|---|
| If the household's total assets are | Account statements from the most recent 60 days showing the account |
| \$50,000 or more                    | holder's name, balance, and interest rate (if applicable).          |

☐ **Expenses:** See the table below for eligibility information and what to submit.

| Expense   | Eligibility   | What to Submit   |  |  |  |
|---|---|--|--|--|--|
| Medical Expenses<br>(insurance<br>premiums,<br>medications, etc.) | If your household's head, co-head, or spouse is age 62 or older or disabled and the household has unreimbursed out-of-pocket medical expenses that you pay. | Check <b>Yes</b> for the Medical Expenses question on the Personal Declaration and complete the enclosed Medical Expenses Declaration form.  |  |  |  |
| Child Care  | If an adult household member is employed or going to school and you pay for child care for a child under age 13.  | Check <b>Yes</b> for the Child Care Expenses question on the Personal Declaration. Submit a statement from the provider of any child care subsidy (DSHS, City of Seattle, your employer, etc.). We may contact your provider to verify your expense. |  |  |  |
| Disability<br>Assistance<br>Expenses                              | If any member of your household is disabled and you must pay out of pocket for expenses to allow them or an adult household member to work                  | Check <b>Yes</b> for the Disability Assistance Expense question on the Personal Declaration. Provide verification of the type of expense and payments you have made for the last 12 months.  |  |  |  |

## **VERIFICATION OF STUDENT STATUS**

| If an | / adults age | 18 or | older : | are students. | submit v | verification o | f their | full-time or | part-time | student status. |
|-------|--------------|-------|---------|---------------|----------|----------------|---------|--------------|-----------|-----------------|
|       |              |       |         | ,             |          |                |         |              |           |                 |

## **VERIFICATION OF IDENTITY**

Only provide verification of identity if specifically requested by you Certification Specialist. If we do not already have documentation on file, your Certification Specialist will let you know in a separate correspondence. Acceptable identification for adults is any official photo ID such as a driver's license, passport, or other official document listing the person's full name and date of birth. Acceptable identification for minors under age 18 include a birth certificate or other official document listing the minor's full name and date of birth.