

Income Self-Certification Form- 80% County Median Income

AGENCY:		
PROGRAM:		
To participants	in this project:	
through federal by the Departm	resources. In order to document	Division has provided some of the financing for this project that benefits are received by the target population defined opment (HUD), we ask that you review the residency and briate description.
CHECK ONE		
A.	I/we certify that I am/we are residents of the City of Madison, and that within the past twelve months my/our household income has been less that the maximum shown for my/our household size.	
	Household Size	Maximum Annual Gross Income (Total combined income from all sources for all members of the household.)
	1	\$68,500 \$70,050
	2 3	\$78,250 \$88,050
	4 5	\$97,800 \$105,650
	6	\$105,650 \$113,450
	7 8	\$121,300 \$129,100
B.	I/we are not residents of the City of Madison.	
C.	I/we are residents of the City, but my/our household income is greater than the levels indicated above.	
interest, divider and any other	nds, commissions, rents received, source of income. I certify that t	come from all sources, including, but not limited to wages, payments from annuities, retirement plans, social security, he above information is complete and correct. I agree to ne level upon request by the agency, CDBG, or HUD.
Resident/Employee/Owner		Resident/Employee/Owner
Date		