

**City of Tampa**  
**Homeowner Hurricane Assistance**



**CERTIFICATION OF ZERO INCOME**

(To be completed by adult household members who are claiming zero income from any source, if appropriate)

Name of Applicant: \_\_\_\_\_

Name of Household Member: \_\_\_\_\_

1. I hereby certify that I do not receive income from any of the following sources:
  - a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
  - b. Income from operation of a business;
  - c. Rental income from real or personal property;
  - d. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
  - e. Unemployment or disability payments;
  - f. Public assistance payments;
  - g. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
  - h. Sales from self-employed resources (Avon, Mary Kay, Shaklee, etc.);
  - i. Any other source not named above.
  
2. Choose one:
  - ☐ I did not file taxes last year because my income was below the IRS threshold.
  - ☐ I did not file taxes last year and my income was above the IRS threshold.
  - ☐ I filed taxes last year.
  
3. Choose one:
  - ☐ Currently, I have no income of any kind and while I am seeking employment, there is no definite job offer at this time.
  - ☐ Currently, I have no income of any kind and I will not be seeking employment at this time.

**I use the following sources of funds to pay for rent and other necessities (must be filled out):**

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*Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of the application.*

\_\_\_\_\_  
Signature of Household Member

\_\_\_\_\_  
Date