

Neighborhoods

Lead Safety Compliance Early Bird Matching Grant

Occupant Income Verification

Primary Occupant Information

The primary occupant will be contacted in case additional income verification is required. They must be a legal adult.

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Primary Occupant Name	Primary Occupant Phone Number		
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Mailing Street Address	City, State, Zip Code		
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Are you a Housing Choice Voucher (HCV) recipient?	For family childcare homes, which license do you have?		
☐ Yes ☐ No	☐ Type-A ☐ Type-B ☐ N/A		
For tenants, has the owner provided you with a Lead-Paint Pamphlet and a copy of the unit's Lead-Safe Certificate?			
Yes No N/A			

Household Information

List all persons related and nonrelated who reside in the unit, including the Primary Occupant.

List all persons related and nonrelated who reside in the unit, including the Frinary Occupant.					
Name	Age	Annual Gross Income	Source(s) of Income (wages, benefits, pensions, business, child support, public assistance, etc.)	Disabled?	Full- Time Student?
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	Yes No
				☐ Yes ☐ No	☐ Yes ☐ No
				☐ Yes ☐ No	☐ Yes ☐ No

Required Document Checklist All documentation listed below must be submitted for review. First 2 pages of all occupants' most recent tax return (IRS form 1040). N/ Proof of any active Housing Choice Voucher/Section 8 status. N/A Most recent 2 pay stubs for employed occupants. N/A Documentation of unemployment, social security, disability, pensions, retiremalimony, business income, 1099s, or any other income received in the most received.	nent, dividends, child support,
Certification of Income All legal adult occupants must agree to the following and sign and date	e below:
I certify that my answers are true and complete to the best of my knowledge. If certify that I currently have no income of any kind and there is no imminent cha or employment status during the next 12 months. I understand that intentionally submitted on this application may result in being permanently banned from the I programs. I understand that I may be asked for additional income verification do	nge expected in my financial status r false or misleading information Department of Neighborhood's
Signature	Date

Tenants may return directly to:

Online: www.ToledoLeadSafe.com/match
Fax: 419-245-1192, ATTN: Stephanie Beebe, Early Bird Grant

Department of Neighborhoods, Mail:

ATTN: Stephanie Beebe, Early Bird Grant