



# HOME Tenant Based Rental Assistance

## Affidavit in Verification of Self-Employment

The affiant(s) (Name) \_\_\_\_\_ of (Address) \_\_\_\_\_ being first duly sworn deposes and says that \_\_\_\_\_ is self-employed, said occupation being \_\_\_\_\_ . The affiants' place of business is located at: \_\_\_\_\_ .

I sign the declaration under penalty of perjury and with full knowledge of the repercussions of willfull falsification and false swearing under Georgia law.

### STATEMENT OF INCOME FROM BUSINESS

#### Instructions:

1. Opposite GROSS INCOME insert total amount earned during the past 12 months or shorter period.
2. Add all expenses incurred in the performance of this business and subtract the total of these EXPENSES from the gross income.
3. Insert the result in the space NET INCOME.

**A. GROSS INCOME:** \$ \_\_\_\_\_ period covered by GROSS income shown.

Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

#### **B. EXPENSES:**

- |   |          |
|---|----------|
| 1. Cost of goods and material                       | \$ _____ |
| 2. Rent (business location only)                    | \$ _____ |
| 3. Heat, light, water, phone, etc. (business only)  | \$ _____ |
| 4. License fees                                     | \$ _____ |
| 5. Other (specify)                                  | \$ _____ |
| 6. Number of employees                              | \$ _____ |
| 7. Employee's salaries (other than self and family) | \$ _____ |
| 8. Owner's salary (self and family only)            | \$ _____ |

**WARNING:** Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any department or agency of the United States or to any matter within its jurisdiction.



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### Affidavit in Verification of Self-Employment - continued

<b>C. GROSS INCOME</b>	\$ _____
TOTAL EXPENSES	\$ _____
NET INCOME	\$ _____
<b>D. Total amount of income taxes paid as of _____</b>	\$ _____
Federal Taxes	\$ _____
State Taxes	\$ _____
City Taxes	\$ _____
TOTAL TAXES:	\$ _____

ATTACH MOST RECENT COPY OF YOUR FEDERAL TAX RETURN.

PLEASE RETURN TO:

The above information is correct to the best of my knowledge, and I agree to notify DCA regarding any change in this information when it occurs.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In witness whereof, this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

My commission expires \_\_\_\_\_ (Notary Public) \_\_\_\_\_

[Seal]

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