the Chickasaw Nation Department of Community Services / Housing Division Post Office Box 788 / Ada, OK 74821-0788 / (580) 421-8800 / Fax: (580) 421-8885	Bill Anoatubby Governor
Zero Income Verification	
This form is to be completed by all adults 18 or older living in the household who do not have inc	ome.
Answer the questions below either yes or no:	
I,, do certify that I do not have income from an	ny source.
Include the following:	
Income from performing odd jobs (yard maintenance, house cleaning, babysitting, etc.) \Box Yes	□ No
Income received from relatives or friends to aid in maintaining my household. \Box Yes \Box No	
Income received from child support or alimony. Yes No	
Income from unemployment, Social Security, welfare (DHS), Veterans Administration or Worker Compensation.	'S
Income from grants and scholarships. \$	
Income received from employment or retirement. \$	
Please state how you pay for everyday expenses (rent, utilities, food, etc.)	
Should my income status change, I will notify the Chickasaw Nation Housing Division immediate proper verification can be obtained.	ly so that
I acknowledge that any misrepresentation of income, assets or family composition used from my to determine eligibility may result in termination of participation in the program, or I may be requi difference between the total tenant's payment paid and the amount which should have been paid	red to pay the

Applicant/tenant signature

Date

Housing division representative signature

Date