

HOUSEHOLD MEMBERS AND RESIDENCY ATTESTATION

Application # _____

I, _____, hereby declare as follows:

I am residing at _____, and my date of birth is _____.

I understand that further clarification is necessary to determine the eligibility of my CBRAP application identified above.

This attestation is made to clarify that the number of household members currently residing at my address stated above as of _____ is _____.

☐ **The total household size consists of the following individuals, including their full name and date of birth (DOB):**

Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____
Full Name: _____	- DOB: _____

- If additional space is required to add all Household Members, attach an additional sheet. Ensure the sheet includes your name and CBRAP application number for reference

☐ **I am including acceptable proof of income, from the below list of acceptable documents, along with this attestation for any member of my household who is 18 years or older:**

- Most recent Filed Tax Return (Form 1040) – Pages 1 and 2
- Most recent W-2 tax forms
- 1099 forms for the most recent tax year
- Last paystub showing most recent income
- Most recent benefit award letter, statement, or payment detail
- Most recent profit & loss statement.

I declare under penalty of perjury, under the laws of the State of Illinois, that the statements I have made above are true and correct.

Tenant applicant Signature: _____ Date: _____