



DECLARATION OF HOUSEHOLD INCOME (DHI)

This form is to be used for the following reasons:

- Household Members 18 or older with Zero Income
- Income such as child support or alimony (non court-ordered only)
- Irregular income such as collecting cans or donating blood
- Recurring gifts from family/ friends

This form is **NOT** to be used for declaring regular wages, self-employment, social security, pensions and other forms of documentable income.

Applicant Name: _____

Date range of Income for all Household members: _____

SECTION 1 INCOME DECLARATION

Name	Source of Income	Amount Claiming
A. <i>Applicant</i>		\$
B.		\$
C.		\$
D.		\$
E.		\$
F.		\$

Comments: Used last 30 days Verified Zero Income with _____ at HSD

SECTION 2 ADDITIONAL QUESTIONS FOR HOUSEHOLDS WITH ZERO INCOME

If any household members have zero income, please answer the following (use A, B, C, D to distinguish person).

- If you have NO INCOME, how long has it been? _____
- Is your rent subsidized? Yes No ▪ How much do you pay for rent/mortgage? \$_____/mo.
- How were you able to pay for your **rent/mortgage last month**? _____
- How were you able to pay for **food last month**? _____
- How were you able to pay for **utilities last month**? _____
- If someone is paying your living expenses, how many months have they been helping? _____

I declare, under penalty of perjury, that the information I provided for this form is true and correct. If I have intentionally falsified any of this information, I understand that I may be liable to Oregon Housing and Community Services Department.

Applicant's Signature

Date