



Southwest Human Resource Agency
PO Box 264 – 1527 White Avenue – Henderson, Tennessee 38340
Telephone: 731-989-5111 – Fax: 731-989-9997

Mike Creasy
Chairman of the Board

Mike Smith
Executive Director

SELF-DECLARATION OF ZERO INCOME

Date: ____/____/____

I, _____ certify that the following household members 18 years or older have zero income:

Name: _____ has received zero income in the past thirty (30) days.

Name: _____ has received zero income in the past thirty (30) days.

Name: _____ has received zero income in the past thirty (30) days.

Name: _____ has received zero income in the past thirty (30) days.

Name: _____ has received zero income in the past thirty (30) days.

Note:

*All household members claiming zero income, even when someone in the home has income, need to be listed on this form.

I certify that the information above is correct. Falsifying and/or withholding income information is a federal offense and I can be convicted to a fine of \$10,000 or imprisonment for no more than five years or both under the State of Tennessee laws.

Applicant Signature

Date