



AFFORDABLE HOUSING ALLIANCE

59 Broad Street, Eatontown, New Jersey 07724
20 Gibson Place Suite 200, Freehold, New Jersey 07728
3535 Route 66, Building 4, Neptune, NJ 07753
(732) 389 – 2204 Or (732) 982 – 8710

UTILITY ASSISTANCE Affidavit of No Income

Name: _____

Birth Date: _____

Social Security Number: _____

Current Address: _____

I, _____, do swear that I am above the age of 18 and I have no income. I am aware income is any monetary payment received. Income includes but is not limited to money received from an employer, unemployment, social security, pension, TANF, WFLNG and real estate.

I am aware I may be penalized for making false statements on the application.

Signature: _____ Date: _____

WWW.HOUSINGALL.ORG

"The Alliance mission is to improve the quality of life for all new Jersey Residents by developing and preserving affordable housing, by providing services to maintain housing affordability, by providing housing education, and by helping communities meet their legal and moral housing obligations.

