

## **INCOME AFFIDAVIT OF HOUSEHOLD MEMBER**

(Over 18 years of age)

The undersigned, as an essential part of an application to determine the undersigned's eligibility to participate in the City of Chicago's Home Buyer Program, hereby declares and states the following (Every household member over 18 years of age should complete this form).

## Complete and answer all questions stated below:

	My current annual income is \$
	My income is such that I was not required to file federal or state income tax returns for the tax years 20, 20
	I,, am not currently employed, nor have I been employed during the calendar years of 20, 20
	I am a full-time student or full-time homemaker or (other)
0	I acknowledge that I have been advised that the making of any false representation in this affidavit will constitute an EVENT OF DEFAULT under the Affordable Housing Program and entitles the holder of the Mortgage Loan to seek appropriate remedies.
Printed	d Name:
Signat	ure: Date
SUBSO	CRIBED AND SWORN to me thisday of, 20
——— Notary	Public
Му сог	mmission expires