

City of Santa Ana CDBG Program

Statistical Information and Income Self-Certification Form

Federally funded Community Development Block Program (CDBG) participants must disclose statistical information in order to participate. The information on this application is necessary for federal reporting purposes. Please print and answer all questions completely.

First Name _____ Last Name _____ Date _____
 Address (residence) _____ City _____ Zip Code _____
 Telephone Number () _____ E-mail Address _____
 Date of Birth _____ Age _____ Gender: ☐ Male ☐ Female Did you participate in the program last year: ☐ YES ☐ NO

Ethnicity (must check one):

☐ Hispanic ☐ Non-Hispanic

Race (must check one):

☐ White ☐ Nat. Hawaiian/Other Pacific Islander ☐ Amer. Ind./Alaskan Nat. & Black
☐ Black/African American ☐ American Indian/Alaskan Nat & White ☐ Other Multi-Racial
☐ Asian ☐ Asian & White
☐ American Indian/Alaskan Native ☐ Black/African American & White

FAMILY INCOME:

Income includes wages, salaries, tips; self-employment or business income, unemployment & disability income, retirement & insurance income, public assistance, interest & dividend income, alimony, child support, gift income, armed forces income for all family members 18 years of age and older.

FAMILY INCOME TABLE* (BELOW):

1. **FIRST** select and write the number of persons in your household: _____
2. **THEN** select and write your household annual Income Category: _____

Family Income must include income for all family members 18 years of age and older.

Household Size	Extremely Low Income 0% to 30%	Low Income 31% - 50%	Moderate Income 51% - 80%	Above Moderate 81% and above
1 Person	\$0 to \$24,950	\$24,951 to \$41,550	\$41,551 to \$66,500	\$66,501 and above
2 Persons	\$0 to \$28,500	\$28,501 to \$47,500	\$47,501 to \$76,000	\$76,001 and above
3 Persons	\$0 to \$32,050	\$32,051 to \$53,450	\$53,451 to \$85,500	\$85,501 and above
4 Persons	\$0 to \$35,600	\$35,601 to \$59,350	\$59,351 to \$94,950	\$94,951 and above
5 Persons	\$0 to \$38,450	\$38,451 to \$64,100	\$64,101 to \$102,550	\$102,551 and above
6 Persons	\$0 to \$41,300	\$41,301 to \$68,850	\$68,851 to \$110,150	\$110,151 and above
7 Persons	\$0 to \$44,150	\$44,151 to \$73,600	\$73,601 to \$117,750	\$117,751 and above
8 or More	\$0 to \$47,000	\$47,001 to \$78,350	\$78,351 to \$125,350	\$125,351 and above

* FY 2019 Income limits effective 6/28/2019

Female Head of Household: ☐ YES ☐ NO

Family Size Total: _____ = Children (0-17 years of age): _____ + Adults (18+ years of age): _____

CERTIFICATION: (Please read before signing)

This organization is supported with Federal funding. According to Title 18, Section 1001 of the U.S. Code, it is a felony for any person to knowingly and willingly make false or fraudulent statement to any department of the United States Government. By signing this Document, I certify under penalty of perjury, that all the information on this application is correct to the best of my knowledge and belief, and I acknowledge that such information is subject to verification. I also acknowledge that my failure to provide necessary documents within a reasonable period of time or falsification of this information shall be grounds for my termination from the program. I authorize the release of said information to local, State and/or Federal agencies and to City Santa Ana staff within five years of this date.

Print Name (applicant) _____	Signature _____	Date _____
Print Name (parent/guardian if applicant is a minor) _____	Signature _____	Date _____
Staff Reviewer _____	Staff Signature _____	Date _____

City of Santa Ana CDBG Program Source of Income Documentation Form

Federally funded Community Development Block Program (CDBG) participants must disclose family income information and documentation. The information on this application is necessary for federal reporting purposes.

Must complete one form for each family member 18 years of age and older and submit documentation listed.

Source of Income	Yes/No	Documentation <i>If yes, please submit the most current documentation available for following:</i>
Salary, Wages, Tips	Yes No	Copies of the three (3) most current paychecks/paystubs; or Written verification of employment from employer including salary/wage information and number of hours worked each week and the last filed Federal Income Tax Returns.
Self-employed Profits	Yes No	Account records; or Most current quarterly income tax return
Unemployment Insurance	Yes No	Copy of award/benefit letter; or Copy of most recent check; or Three most recent bank statements showing deposits of award/benefit check
SSI/SSDI – Supplemental Security Income/Disability Aid	Yes No	
Pension	Yes No	
Cash Aid for Families with Children (CalWORKs)	Yes No	Award letter stating the amount of benefit; or Copy of most recent check; or Written statement from Caseworker stating the benefit amount
Alimony	Yes No	Copy of weekly or monthly check; or Court decree establishing payments; or Affidavit of child support
Child Support	Yes No	
Interest & Dividend Income	Yes No	Bank statement showing last 12 months of interest; or Investment statements indicating the amount of dividends earned
Rental Property Income	Yes No	Recent rent check; or Copy of rental agreement signed by current tenant
Other Sources of Income	Yes No	Please Describe:

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Date _____

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Signature _____

Date _____

Staff Reviewer _____

Staff Signature _____

Date _____