# Public Assistance Verification

TO: (Name & address)

_____

_____

_____

RE: _____ _____ _____
Applicant/Tenant Name | Social Security Number | Unit # (if assigned)

I hereby authorize release of the requested information.

_____ _____
Signature of Applicant/Tenant | Date

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

_____
Project Owner/Management Agent

MAIL OR FAX THIS FORM TO:

## THIS SECTION TO BE COMPLETED BY PUBLIC AUTHORITY

Does the above address match your records? YES _____ NO _____

Number of Persons on Grant: ADULT(S) _____ CHILD(REN) _____

| | Monthly Amount | Full Grant | |
|---|---|---|---|
| Minnesota Families Investment Program | $ _____ | YES _____ | NO _____ |
| General Assistance | $ _____ | _____ | _____ |
| Other Assistance: Type_____ | $ _____ | _____ | _____ |

Effective date of grant: _____. If this person is not receiving the full grant, please explain why: _____
_____.

When do you anticipate the full grant will be reinstated? _____

Other known household income? NO _____ YES _____ Describe: _____

If YES, what is the monthly amount? $_____

Does this person receive child support? YES _____ NO _____

If YES, what is the monthly amount? $_____. Total amount received during the last 12 months: $_____

If NO, has every reasonable effort been made by the applicant to collect any amount which may be due, including, but not limited to, filing with the appropriate courts or agencies responsible for the enforcement of any payments?
YES _____ NO _____

Department of Social Services

Signature: _____ Date: _____
Print your name: _____ Tel. #: _____
Title: _____
Address _____
_____

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.