

CDBG-CV Self Certification Form

FY 2021

This program is made possible through the support of the City of Hagerstown's Community Development Block Grant program. CDBG is a federally funded program designed to serve low and moderate income persons. To meet the program's requirements, we need to collect statistical data which is reported to the U.S. Department of Housing and Urban Development. Names are not provided to HUD, but the statistical data is required to ensure compliance with rules and regulations for the use of these funds.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Household Income:

Total Household Income									
Household	Place a check mark in the box to the right of Household size which indicates your total household income								
Size	(Include all income sources that you would report on your federal income tax form)								
1	\$ 0 to \$16,800	<input type="checkbox"/>	\$16,800 to \$27,950	<input type="checkbox"/>	\$27,950 to \$44,700	<input type="checkbox"/>	over \$44,700	<input type="checkbox"/>	<input type="checkbox"/>
2	\$ 0 to \$19,200	<input type="checkbox"/>	\$19,200 to \$31,950	<input type="checkbox"/>	\$31,950 to \$51,100	<input type="checkbox"/>	over \$51,100	<input type="checkbox"/>	<input type="checkbox"/>
3	\$ 0 to \$21,600	<input type="checkbox"/>	\$21,600 to \$35,950	<input type="checkbox"/>	\$35,950 to \$57,500	<input type="checkbox"/>	over \$57,500	<input type="checkbox"/>	<input type="checkbox"/>
4	\$ 0 to \$23,950	<input type="checkbox"/>	\$23,950 to \$39,900	<input type="checkbox"/>	\$39,900 to \$63,850	<input type="checkbox"/>	over \$63,850	<input type="checkbox"/>	<input type="checkbox"/>
5	\$ 0 to \$25,900	<input type="checkbox"/>	\$25,900 to \$43,100	<input type="checkbox"/>	\$43,100 to \$69,000	<input type="checkbox"/>	over \$69,000	<input type="checkbox"/>	<input type="checkbox"/>
6	\$ 0 to \$27,800	<input type="checkbox"/>	\$27,800 to \$46,300	<input type="checkbox"/>	\$46,300 to \$74,100	<input type="checkbox"/>	over \$74,100	<input type="checkbox"/>	<input type="checkbox"/>
7	\$ 0 to \$29,700	<input type="checkbox"/>	\$29,700 to \$49,500	<input type="checkbox"/>	\$49,500 to \$79,200	<input type="checkbox"/>	over \$79,200	<input type="checkbox"/>	<input type="checkbox"/>
8	\$ 0 to \$31,650	<input type="checkbox"/>	\$31,650 to \$52,700	<input type="checkbox"/>	\$52,700 to \$84,300	<input type="checkbox"/>	over \$84,300	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the ethnicity of the head of household: (Hispanic is not to be considered an ethnicity)

- | | |
|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian/Alaskan Native & White |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Asian & White |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black/African American & White |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> American Indian/Alaskan Native & Black/African |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> Other Multi-racial |

Was the head of the household impacted by the COVID-19 pandemic? Yes / No (Circle one)

I certify that the information provided is correct to the best of my knowledge. If necessary, I will provide information required to verify this data (e.g. pay stubs, bank account statements, etc.)

Signature _____

Date: _____