



Northern Circle Indian Housing Authority

694 Pinoleville Drive, Ukiah, CA 95482

◆ 707-468-1336

Fax ◆ 707-468-5615

Income Verification Form

Complete this form for each member of your household receiving income.

(Employer/Agency providing income will complete page 2)

Income For: _____ SSN: _____

SIGNATURE OF INCOME RECIPIENT

As an applicant or resident (or household member of an applicant/resident) of Northan Circle Indian Housing Authority (NCIHA), I am authorizing the release of the income information requested by NCIHA and understand it will be used for the purpose of verifying my income to determine eligibility for NCIHA programs.

Signature of Person Receiving Income

Date

To: Employer / Agency Providing Income

Company/Agency: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____

Attention: _____

Email: _____

NCIHA is required to verify the income of all household members applying for admission as tenants to the federally aided housing units operated by NCIHA, and periodically re-certify their income as teants. We are also required to verify income for those applying for income dependant programs.

We ask your cooperation in supplying information regarding the income of the person listed above. This information will be held in strict concidence and will be used only for determining eligibility for NCIHA programs.

Above is a signed authorization for release of this information to us. Please provide the information requested on page 2 of this form in either Section I or II, or attach verification. Your prompt return of this information via email, e-sign, or US mail is greatly appreciated.

I can be contacted at 707-468-1336 if you have questions or need clarification.

Thank you.

NCIHA Representative

Date

NCIHA Representative's email

Case Name-For Internal Use