

2020 AFFIDAVIT OF SUBSTANTIAL LOSS OF INCOME PAGE 1

WHO SHOULD BE USING THIS FORM:

Tenants affected by the COVID-19 pandemic, who are unable to provide other objectively verifiable evidence of their COVID-19 related job or income losses may use this form as documentation to demonstrate that you are a tenant who has been financially impacted by COVID-19 and do not have any documentation from your employer on your income, reduction in work hours, or job loss. Tenants who are participating in the non-traditional economy, and who may not have traditional methods of documentation of their status as affected by COVID-19 are encouraged to use this template.

Traditional methods of documentation include paycheck stubs, bank account comparisons illustrating a decrease in income and letters from an employer regarding decrease in hours or a layoff. If a tenant does not have traditional methods of documentation, the tenant may submit this form to landlords in the place of providing the above mentioned objectively verifiable documentation.

Affidavit of Affected Tenant

Address of Residence City State Zipcode Unit # INCOME SOURCE: Check if Applicable: Job Loss Reduction of Hours Declaration Explaining Substantial Income Loss Due to COVID-19	
INCOME SOURCE: Check if Applicable: Job Loss Reduction of Hours	
Check if Applicable: Job Loss Reduction of Hours	
Job Loss Reduction of Hours	
Declaration Explaining Substantial Income Loss Due to COVID-19	





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CONSEQUENCE OF SIGNING THIS AFFIDAVIT	
By signing this Affidavit, tenant agrees that no other verifiable documentation of substantial loss of income due to COVIE)-19
are available. By signing below, I agree that the statements above are true and correct.	
Tenant Print Name:	
Tonant Signature:	