## AFFIDAVIT OF MARITAL STATUS Household Name: Unit#: Applicant/ Resident Name: Spouse's Name: If your marital status is anything other than "never married", this form is required; Part I, II, and III must be completed. Part III does not apply IF widowed. This form is optional if never married. Choose and complete the appropriate statement below: Part I: Marital Status 1. I am the widow or widower of \_\_\_\_\_\_\_, who has been deceased since \_\_\_\_\_\_. I am receiving survivor benefits such as Social Security, retirement/pension, etc. in the amount of ... I am <u>not</u> receiving survivor benefits such as Social Security, retirement/pension, etc. 2. I am currently ☐ legally separated or ☐ divorced from my spouse effective as of \_\_\_\_\_\_. (A copy of the legal separation agreement or divorce decree must be attached.) 3. I am currently, but not legally, separated from my spouse. I began the legal process on \_\_\_\_\_ (date) and I anticipate this separation to be permanent. 4. I am currently, but not legally, separated from my spouse effective \_\_\_\_\_\_ (date) and I have not begun the legal process for the following reason(s): Financial reasons Spouse's location is unknown Incarceration/ Protective Custody Other (explain): 5. Never married Part II: Financial Support I am currently receiving or anticipate receiving \$ \_\_\_\_\_ per\_\_\_\_ (frequency) from my spouse during the next 12 months. I am not currently and do not seek or anticipate receiving any compensation from my spouse during the next 12 months for the following reasons Part III: Leasing I certify that should my spouse rejoin the household within the initial lease term I will notify management immediately and that the entire household will need to be re-evaluated for eligibility. \_\_\_\_\_\_(initial) I hereby certify that the information provided above is accurate and complete to the best of my knowledge. I consent to release such information in order to comply with government regulations regarding allocation of Section 42 or Section 515 housing. I understand that providing false or misleading information under oath may subject me to criminal penalties. I fully understand the information requested and the ramifications of my breach of this agreement.

SIGNATURE OF APPLICANT/TENANT

DATE