



CARIBOU HOUSING AGENCY
Housing Choice Voucher Program

25 High Street
Caribou, ME 04736
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SELF-EMPLOYMENT CERTIFICATION

Use this form to provide a summary of your self-employment and expenses from the last twelve (12) months. Please include a detailed income/expense report for this period, if possible. **Additionally, please attach a complete copy of your most recent tax return, including form 1040, and Schedule C.**

Head of Household: _____

Address: _____

City: _____ Phone Number: _____

Name of Self-Employed Person: _____

1. Did you file income taxes for your Self-Employment?

Yes

No If no, why
not? _____

2. Please state the reporting period from the following information:

From (beginning date) _____ To (ending date) _____

3. Description of Self-Employment (type of business, etc.):

4. Gross Income (total amount of income that you receive from self-employment)

Amount	Frequency (weekly/monthly)	Address where Income can be Verified (if applicable)
\$		
\$		
\$		
\$		

5. Business Expense (expenses that you incurred as a result of conducting your business)

Amount	Frequency (weekly/monthly)	Description of Expense
\$		
\$		
\$		
\$		

6. Net Income (total income minus total expenses)

\$

CERTIFICATION

I further acknowledge and understand that this Self-Certification is true, correct, and complete and will be relied upon for purposes of determining income eligibility and/or renewal of assistance for the Section 8 Housing Choice Voucher Program.

Any misstatement or false statement may result in denial/loss of rental assistance.

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentation to any Department or Agency of the United States.

x. _____
Signature of Self-Employed Person

****If you or anyone in your household is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please contact the Caribou Housing Agency.****