CITY OF MORENO VALLEY COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM INCOME VERIFICATION FORM 2016

The information requested below is confidential. It is used only to track financial and social status as required for the funding of programs by the US Department of Housing and Urban Development (HUD) and administered on behalf of the City of Moreno Valley.

Client Name:			
Client Address:			
Parent Name (if clien	t is a child)		
Phone # (home):		_Work or Cell:	
 Total Annual Income Verification (Examples of Control of Contr	ersons in household: Income of ALL persons residing cation Attached? Income verification include: F	ng in household: \$ Yes No Pay Check Stubs, W2 F	
5. Race:	White Black/African American Asian Amer. Indian/Alaskan Native		Amer. Indian/Alaskan & Black
6. Gender: 7. Check all that	□ Male □ Female apply: 62 or Older Veteran Status		Disabled Female Head of Household
Head of Househ Office Use Only Confirm 2016 inc	old Signature Print N		Date

Family	(A)	(B)	(C)	(D)
Size	Extremely Low Income	Very Low Income (0-50%	Low/Mod Income (0-80%	NOT LOW/MOD
		of Median)	of Median)	
1	\$0 -\$13,450	\$0 - \$22,400	\$0 - \$35,800	\$35,801+
2	\$0 - \$16,020	\$0 - \$25,600	\$0 - \$40,900	\$40,901+
3	\$0 - \$20,160	\$0 - \$28,800	\$0 - \$46,000	\$46,001+
4	\$0 - \$24,300	\$0 - \$31,950	\$0 - \$51,100	\$51,101+
5	\$0 - \$28,440	\$0 - \$34,550	\$0 - \$55,200	\$55,201+
6	\$0 - \$32,580	\$0 - \$37,100	\$0 - \$59,300	\$59,301+
7	\$0 - \$36,730	\$0 - \$39,650	\$0 - \$63,400	\$63,401+
8	\$0 - \$40,890	\$0 - \$42,200	\$0 - \$67,500	\$67,501+

Circle the number of people in household and indicate income by circling column a, b, c, or d horizontally.

City of Moreno Valley CDBG Program Instructions for Completing the 'Income Verification Form'

CDBG Subgrantees are required to serve low to moderate income individuals.

This form is to be issued to City of Moreno Valley Subgrantees for completion by the client receiving services in order to confirm/disconfirm their low-to-moderate income status.

- 1. The client is to complete the general information at the top of the page as well as Items 1-7. The client should sign the form, as requested.
- 2. The staff member shall confirm there is or is not income documentation attached to the form by initialing the form as indicated.
- 3. Staff shall -base on the information listed by the client, and a review of the income documentation collected determine the size of the household and the client income level.
- 4. Staff is asked to circle the income range in which the client falls.