

ATTENTION LANDLORD: This side of the rental/agreement form only: *If you waive the fee you must include gross income verification for previous Three months. We must receive the income verification along with the rental agreement.*

Waiver of 10% contribution fee due to owner's annual income within 200% of official poverty Line defined by the U.S. Department of Health and Human Services. **You must include your income verification.**

AFFIDAVIT

STATE OF MISSOURI)

)

COUNTY/CITY OF)

)

_____)

_____ (name), first being duly sworn, on his/her oath states:

1. I am the owner/landlord of _____,
_____ (address of home being assisted). For the year of _____ (year), my income was at or below two hundred percent (200%) of the official poverty Guidelines as defined by U.S. Department of Health and Human Services.

2. Due to my income falling at or below two hundred percent (200%) of the official poverty Guidelines; I qualify for a waiver of the ten percent (10%) cash contribution to the **EAST MISSOURI ACTION AGENCY INC.** (local Weatherization Assistance Program (WAP) Sub-grantee) for the weatherization at _____,
_____ The address of the home being assisted).

I certify under penalty of perjury that the foregoing is true and correct.

Date: _____ Signature: _____

_____ (signature of affiant)

Subscribed and sworn to before me this day of; _____ (date), _____ (year).

SEAL _____ (official signature)

Notary Public

My commission expires: _____

(Date)



EAST MISSOURI ACTION AGENCY, Inc.

(A Community Action Agency)

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WEATHERIZATION ASSISTANCE PROGRAM

Funded by the American Recovery and Reinvestment Act of 2009 and the U.S. Department of Energy

