



VERIFICATION OF OUT-OF-STATE RESIDENCE

I, _____, do hereby swear or affirm that I
(Please print name)

have resided in the following state(s):

State	City	Dates Resided <small>List the month & year(s) you resided in each State</small>
<i>Example: California</i>	<i>Example: Sacramento</i>	<i>Example: April 2018 – December 2020</i>

I understand that the information given on this form will be held in confidence and will be used for the sole purpose of determining my eligibility and suitability for housing programs. The above information is full, true and complete to the best of my knowledge, and I understand that my continued eligibility may be contingent on the Housing Authority being able to formally verify this information. I understand that any falsification, misrepresentation or concealment of information by me can result in immediate termination of Housing Assistance and possible prosecution under the law. I have no objections to inquiries being made for the purpose of verifying the statements made herein.

Signature of Applicant/Tenant

Date