ATTACHMENT T

ASSET CERTIFICATION

PROJECT NAME:					LOG #				
APPLICANT NAME:					UNIT #				
I. SA	I. SAVINGS ACCOUNT(S)								
Banking Institu	ution	Account Nam	e	Account Nu	mber	Cu	irrent Balance	Interest Rate	
1)									
2)									
3)									
II. CHECKING ACCOUNT(S)									
Banking Institu	ution	Account Nam	e	Account Number			rage Balance 6 months)	Interest Rate	
1)									
3)									
4)									
III. INVESTMENT ASSETS (stocks, bonds, vested retirement funds, etc.)									
Financial Institution	Account Name			Account Nu	Account Number A			Interest Rate	
1)									
2)									
3)									
IV. REAL ESTATE (include the location and value of any real estate holdings sold within the last two years)									
Description/Location			Value			Income			
1)									
2)									
V. CASH SAVINGS									
I have \$ in cash savings.									
VI. OTHER INVESTMENT HOLDINGS (Gems, Coin Collections, Etc.)									
Description					Value	2			
1) 2)									
VII. LIST ANY ASSET DISPOSED OF WITHIN THE LAST TWO (2) YEARS									
Description 1)		Value	Value						
2)									
I hereby certify that I have no assets at this time, including but not limited to any of the asset types listed above.									
I DECLARE THAT THE STATEMENTS CONTAINED IN THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I have not withheld, falsified or otherwise misrepresented any information. I fully understand that any and all information I provide during this application process is subject to review by the New York City Department of Investigation (DOI), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I understand that the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of my lease (if discovery is made after the fact) and referral to the appropriate authorities for potential criminal prosecution.									

