Texas Department of Housing and Community Affairs

**Under $50,000 Asset Certification**For households whose combined net assets do not exceed $50,000.

(Complete only one form per household; include assets of children.)

Head of Household Name: Unit No.:

Development Name and Address:

# Complete all that apply for 1 through 4:

1. My/our assets include (enter n/a in (A) if you do not own the respective asset):

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Source** | **(A)**  **Cash Value** | **(B)**  **Int.**  **Rate** | **(A\*B)**  **Annual Income** | **Source** | **(A)**  **Cash Value** | **(B)**  **Int.**  **Rate** |  | **(A\*B)**  **Annual Income** | |
| Savings Account(s) | $ | % | $ | Checking Account(s) | $ | % |  | $ |
| Certificates of Deposit | $ | % | $ | Money Market Funds | $ | % |  | $ |
| Stocks | $ | % | $ | Bonds | $ | % |  | $ |
| Peer to Peer (Cash App, Venmo, Paypal, etc.) | $ | % | $ | Trust Funds | $ | % |  | $ |
| Equity in Real Estate | $ | % | $ | Land Contracts | $ | % |  | $ |
| Lump Sum Receipts | $ | % | $ | Capital Investments | $ | % |  | $ |
| Bitcoin/ Cryptocurrency | $ | % | $ | GoFundMe/Crowdsourcing | $ | % |  | $ |
| Life Insurance (Excluding Term) | $ | % | $ | Pre-paid Debit Cards | $ | % |  | $ |
| Cash on Hand | $ | % | $ |  |  |  |  |  |
| Personal Property Held as an Investment | $ | % | $ | Explanation | | | | |
| Other (list): | $ | % | $ | Explanation | | | | |

PLEASE NOTE: Certain funds (e.g., Trust) may or may not be (fully) accessible to you. Include only those amounts which are accessible to you.

**(*Check either box 2 or box 3 below, not both)***

1. ❑ Within the past two (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for more than $1,000 below fair market value

(FMV). Those amounts equal a total of: $ (enter the difference between FMV and the amount you received).

1. ❑ I/we have not sold or given away assets (including cash, real estate, etc.) for less than fair market value during the past two (2) years.
2. ❑ I/we do not have any assets at this time (do not check this box if you have entered any numbers in section 1, above).

# The net family assets (as defined in 24 CFR 813.102) above do not exceed $50,000, and the annual income from the net family assets is

**$** (enter the total of all *(A\*B) Annual Income* in section 1 above). **This amount is included in total gross annual income.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Signature of Applicant/Tenant |  | Date |  | Signature of Applicant/Tenant |  | Date |
| Signature of Applicant/Tenant |  | Date |  | Signature of Applicant/Tenant |  | Date |

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