

# Illinois Housing Development Authority

## Certification of Income

This SIGNED form is to be submitted to the Illinois Housing Development Authority ("Authority"); original must be retained by lender if not submitted to IHDA.

Program Name:

Borrower/Applicant name:

Co-Borrower/Co-Applicant name:

Street Address of Property:

City:

ZIP Code:

State:

The undersigned certifies that:

- 1) This Certification of Income is being delivered in connection with the undersigned's application for funds in connection with the above referenced Program.
- 2) The following individuals will occupy the property [unit] [home] listed above:

	OCCUPANT	RELATIONSHIP	AGE
A.			
B.			
C.			
D.			
E.			
F.			

- 3) The total ANNUAL household income as of the date of application is as follows:

I certify that the information above is true and complete to the best of my knowledge on the date hereof. If this Certification of Income is executed more than 90 days prior to the Closing Date of the purchase of the property [unit] [home], I agree to update and recertify the accuracy of the information in this Certificate within 90 days prior to such Closing Date.

Borrower/Applicant Signature

Date

Co-Borrower/Co-Applicant Signature

Date