

### Affidavit Certifying Household Income

Name	Social Security #	Gender	Age	Income	
<b>Total</b>					

I certify that I have declared all members of my household presently residing in my place of residence and have provided all sources and amounts of income for all persons living in my household to Southeast Energy Assistance.

I also understand that, "A person who knowingly and willfully falsifies, conceals or covers up a material fact, or makes a false, fictitious or fraudulent statement" is subject to punishment, fine and imprisonment by federal and state agencies.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please circle below to indicate if you have or have not received LIHEAP and if there is a smoker in the home.**

LIHEAP assistance YES/NO

Smoker in home YES/NO