

UNDER \$5,000 ASSET CERTIFICATION

For households whose combined net assets do not exceed \$5,000. Complete only one form per household; include assets of children.

Household Name: _____ Unit No. _____

Development Name: **Laguna Housing Development & Management Enterprise** City: _____

Complete all that apply for 1 through 4:

1. My/our assets include:

Cash Value	Int. Rate	Annual Income	Source	Cash Value	Int. Rate	Annual Income	Source
\$		\$	Savings Accts.	\$		\$	Checking Acct.
\$		\$	Cash	\$		\$	Safety Deposit Box
\$		\$	Cert. Of Deposit	\$		\$	Money Market Funds
\$		\$	Stocks	\$		\$	Bonds
\$		\$	IRA Accounts	\$		\$	401K Accounts
\$		\$	Keogh Accounts	\$		\$	Trust Funds
\$		\$	Equity in real estate	\$		\$	Land Contracts
\$		\$	Lump Sum Receipts	\$		\$	Capital Investments
\$		\$	Life Insurance Policies (excluding Term)				
\$		\$	Other Retirement/Pension Funds not named above:				
\$		\$	Personal property held as an investment**:				
\$		\$	Other (list):				

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

*Cash value is defined as market value minus the cost of converting the asset to cash, such as broker's fees, settlement costs, outstanding loans, early withdrawal penalties, etc.

**Personal property held as an investment may include, but is not limited to, gem or coin collections, art, antique cars, etc. Do not include necessary personal property such as, but not necessarily limited to, household furniture, daily-use autos, clothing, assets of an active business, or special equipment for use by the disabled.

2. 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 their fair market value (FMV). Those amounts* are included above and are equal to a total of:
 \$_____ (*the difference between FMV and the amount received, for each asset on which this occurred).
3. 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.
4. I/we do not have any assets at this time.

The net family assets (as defined in 24 CFR 813.102) above do not exceed \$5,000 and the annual income from the net family assets is \$_____. This amount is included in total gross annual income.

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Applicant/Tenant	Date	Applicant/Tenant	Date
STATE OF NEW MEXICO)		
)ss.		
COUNTY OF _____)			

Subscribed and sworn to before me this _____ day of _____, 19____.

Notary Public

My Commission Expires:
