

LEON COUNTY – DEPARTMENT OF PUBLIC WORKS
L.I.F.E. RURAL ROAD SAFETY STABILIZATION PROGRAM
HOUSEHOLD INCOME CERTIFICATION FORM

Property Owner Name: _____ Date: _____

Property Address: _____

Instructions: Circle the applicable number of persons in your household and acknowledge if the annual gross income of your household is within the associated Annual Gross Income Range. The annual gross income should be calculated based on the amount of income expected to be received collectively by all persons 18 years of age or older in your household in the coming twelve months.

Number of Persons in Household	Annual Gross Income Range*	Is <u>Total Household Income</u> within this Range?	
1	0 - \$48,160	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	0 - \$55,040	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	0 - \$61,920	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	0 - \$68,800	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5	0 - \$74,320	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6	0 - \$79,840	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7	0 - \$85,360	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8	0 - \$90,880	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby certify, under penalty of perjury, that the information I have provided is true to the best of my knowledge.

 PRINT

 OWNER'S SIGNATURE

 DATE