KANSAS HOUSING

EMERGENCY SOLUTIONS GRANT
INCOME CALCULATION WORKSHEET
***Must be completed for all household members age 18 or older with income.**

Head of Household Name	☐ Intake/Screening	☐ 3 Month Recertification

Annual Income (listed on ESG Screening Intake) *					
Family Member	**Wages/ Salaries**	**Benefits/Pensions**	**Public Assistance**	**Other Income**	**Total**
					0
					0
					0
					0
					0
				Total Anticipated Income	0
				TOTAL Gross Annual Income	
				% AMI	
Gross Income Must be Below 30% AMI to be Eligible for Prevention:				☐ **YES**	☐ **NO**

Contract Rent	

	Gas	**Electric**	**Propane**	**Fuel Oil**	**Other**	**TOTAL**
Heating						0
Cooking						0
Hot Water						0
Water						0
Electricity						
Sewer						
Trash						
Air Conditioning						
					Total Utility Allowance	0

Gross Rent (Contract Rent + Total Utility Allowance = Gross Rent)	0

****Eligibility**

Prevention: Gross Annual Household Income at admission and recertification must be below 30% of the AMI. Yes ☐ No ☐

Household income must be verified and documented every 3 months.

Verified By: _____ Date: _____