

KANSAS HOUSING

2020 ESG-CV

VERIFICATION OF INCOME

ESG-CV Applicant Name: _____

Instructions for Employer/Payment Source Representative: This is to certify the income received by the above named individual for purposes of participating in the ESG-CV program. This information will be used only to determine the eligibility status and level of benefit of the household. **Complete only the selected section below that includes an authorization to release information.**

Please return this form to:

Name & Title: _____ Phone: _____
Address: _____ Fax: _____
Email: _____

Employment Income

ESG-CV Applicant Release: I hereby authorize the release of the following employment information.

ESG-CV Applicant Signature: _____ Date: _____

Employer representative to complete this section:

The person named above is employed by _____ since _____.
He/she is paid \$ _____ on a _____ basis and is currently working an average of _____ hours per _____.

Additional compensation please specify (if any): _____

Probability of continued employment: _____

Authorized Employer Representative

Signature: _____ Date: _____

Name, Title: _____

Address and Phone: _____

Payments and/or Benefit Income (complete one form for each distinct source of income for person named above)

CHECK ONE: Social Security/SSI Pension /Retirement TANF
Public Assistance Unemployment Compensation Workers Compensation
Alimony Payments Foster Care Payments Child Support Payments
Armed Forces Income
Other: _____

ESG-CV Applicant Release: I hereby authorize the release of the following payment and/or benefit information.

ESG-CV Applicant Signature: _____ Date: _____

Payment source representative to complete this section:

Payments or benefits in the amount of \$ _____ are paid on a _____ basis.
The expected duration of the payments or benefits is _____.

Authorized Payment Source Representative

Signature: _____ Date: _____

Name, Title: _____

Address and Phone: _____