

ATTACHMENT T: ASSET CERTIFICATION

PROJECT NAME: BEACON MEWS _____

LOG # _____

APPLICANT NAME: _____

UNIT # _____

I. SAVINGS ACCOUNT(S)

Banking Institution	Account Name	Account Number	Current Balance	Interest Rate
1)				
2)				
3)				
4)				

II. CHECKING ACCOUNT(S)

Banking Institution	Account Name	Account Number	Average Balance (last 6 months)	Interest Rate
1)				
2)				
3)				
4)				

III. INVESTMENT ASSETS (stocks, bonds, vested retirement funds, etc.)

Financial Institution	Account Name	Account Number	Account Value	Cash Value	Interest Rate
1)					
2)					
3)					
4)					

IV. REAL PROPERTY* (include the location and value of any real estate holdings sold within the last two years)

Type (residential, commercial, vacant land, other)	Address	% Ownership	Market Value of Property	Annual Income Generated
1)				
2)				

** Real property includes shares of stock in a cooperative housing corporation and ownership includes any type of direct or indirect ownership interest (including partial ownership or ownership through LLC).*

V. Has any member of the household previously purchased any interest in residential real property (whether or not they still own it)?

Yes No

VI. CASH SAVINGS

I have \$ _____ in cash savings.

VII. OTHER INVESTMENT HOLDINGS (Gems, Coin Collections, Etc.)

Description	Value
1)	
2)	

VIII. LIST ANY ASSET DISPOSED OF WITHIN THE LAST TWO (2) YEARS

Description	Value
1)	
2)	

I hereby certify that I have no assets at this time, including but not limited to any of the asset types listed above.

I DECLARE THAT THE STATEMENTS CONTAINED IN THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I have not withheld, falsified or otherwise misrepresented any information. I fully understand that any and all information I provide during this application process is subject to review by the New York City Department of Investigation (DOI), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I understand that the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of my lease (if discovery is made after the fact) and referral to the appropriate authorities for potential criminal prosecution.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF CO-APPLICANT

NOTARY PUBLIC & DATE