

SC State Housing Finance and Development Authority

Certification of Self-Employment

Dear Sir/Madam: _____

As an applicant/participant in the HUD Section 8 Housing Choice Voucher Program, you are required to provide information concerning self-employment by you or anyone in your household. This income will be used for eligibility and rent calculation purposes. Please complete this form and return it directly to the Housing Program Coordinator (HPC) listed below. Your prompt cooperation in supplying the requested information is appreciated. If you have any questions, please do not hesitate to contact the HPC.

Mailing Address:

SC State Housing Finance & Development Authority
Voucher Program - _____ County HPC
300-C Outlet Pointe Blvd.
Columbia, SC 29210

Phone: (803) 896- _____
Fax: (803) 551- _____

Your Name: _____ Type of Business: _____

Name of Business: _____ Business Phone: (_____) _____

Mailing Address : _____ Fax: (_____) _____

_____ Taxpayer ID# _____

Business income counted toward income eligibility and subsidy determination is net income from the operation of a business or profession. Federal definitions for determining business income are on the back side of this document.

Please note that State Housing Authority reports all of the information you provide to the U.S. Department of Housing and Urban Development (HUD). In certain instances, HUD and the Internal Revenue Service (IRS) share information on income reported to HUD and the IRS. If there is a discrepancy between what is reported to HUD and to the IRS, you may be subject to audit. State Housing Authority encourages you to retain all business receipts and file taxes with the IRS.

Date business began: _____

Anticipated net business income: _____

Frequency of anticipated net income: _____ Monthly _____ Quarterly _____ Annually

Last year's business income: _____

Number of months each year that your business operates: _____

Do you expect to continue this business? _____ Yes _____ No

List all adult household members who participate in this business: _____

CONTINUED ON REVERSE SIDE

_____ Attached is a SIGNED, completed copy of my most recent federal income tax return (with appropriate schedules).

OR

_____ This is a new business. (Provide a Profit and Loss Statement, if this is available).

PROVIDE ONLY THE ABOVE REQUESTED INFORMATION. DO NOT PROVIDE BUSINESS RECEIPTS TO STATE HOUSING AUTHORITY.

I hereby certify under penalty of perjury that the statements I have made on this form are true and accurate to the best of my knowledge:

Self-Employed Household Member

Date

Head of Household

Date

DEFINITIONS

Annual income includes net income from the operation of a business or profession.

- Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income.
- An allowance for depreciation of assets used in a business or profession may be deducted, based on straight line depreciation, as provided in Internal Revenue Service regulations. No other allowances for depreciation are permitted.
- Any withdrawal of cash assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family.
- Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family.
- Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income.

If using a Telecommunications Device for the Deaf (TDD), please call: (803) 896-8831.

Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000 or imprisoned for not more than five years, or both.