

BETHLEHEM HOUSING AUTHORITY
645 MAIN STREET
BETHLEHEM, PA 18018-3899
OFFICE: (610) 865-8300 FAX: (610) 865-8318 TDD (610) 865-8333

APPLICANT/TENANT CERTIFICATION

I certify that the information I gave to the Bethlehem Housing Authority on my household composition, income, assets, allowances and deductions is accurate and complete to the best of my knowledge and belief. I understand that the information will be verified by the Bethlehem Housing Authority and submitted to the U.S. Department of Housing and Urban Development (HUD) on Form 50058.

WARNING

I understand that false statements or information are grounds for denial of housing assistance and termination of tenancy from housing assistance programs. I understand that false statements or information are punishable under state and federal law as stated below:

STATE LAW: Section 4904 (b) of Title 18 P.S. provides that a person commits a misdemeanor of the third degree if he makes a written false statement which he does not believe to be true, on or pursuant to a form bearing notice that false statements made therein are punishable by law. Any person found guilty of this provision shall be fined not more than \$2,500.00 or sentenced to a term of imprisonment for not more than one year, or both.

FEDERAL LAW: Section 1001 of Title 18 U.S.C. provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies... a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000.00 or imprisoned not more than five years or both."

I have either read the above statements or had them translated for me. I understand the statements and certify that the information I gave to the Bethlehem Housing Authority is accurate and complete to the best of my knowledge and belief.

Head of Household/Applicant

Date

Co-Head of Household/Applicant

Date

Witness

Date

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CERTIFICACION DEL APLICANTE/ARRENDATARIO

Yo certifico que la informacion dada por mi a la Autoridad de Vivienda de Bethlehem sobre mi composicion familiar, ingreso, bienes, descuentos y deducciones es exacta y completa segun mi leal saber y entender. Entiendo que la informacion sera verificada por la Autoridad de Vivienda de Bethlehem y sometida al Departamento de HUD en el formulario 50058.

AVISO

Yo entiendo que falsas declaraciones o informacion son causa para denegacion de asistencia de Vivienda, y terminacion para arrendar de cualquier programa de asistencia para vivienda. Yo entiendo que falsas declaraciones o informacion son castigadas bajo la ley estatal y Federal, declaradas abajo.

LEY ESTATAL: Seccion 4904 (b) del Titulo 18 P.S. provee que una persona comete un delito de menor cuantia de tercer grado cuando hace una declaracion falsa por escrito, cual no crea ser verdadera, en o tocante a un formulario con el aviso de que si hace declaraciones falsas seran castigados por ley. Cualquier persona que se encuentre culpable de esta provision sera multado no mas de \$2,500.00 o sentenciado a una condena no mas de un ano o ambos.

LEY FEDERAL: Seccion 1001 del Titulo 18 U.S.C. provee: "cualquiera en cualquier Asunto en la jurisdiccion de cualquier departamento o agencia de los Estados Unidos a sabiendas falsifique un hecho material o hace declaracion o representacion falsa, ficticio o fraudulente o usa escrituras o documentos falsos sabiendo lo mismo que contienen cualquier declaracion o entrada, sera mutado no mas de \$10,000.00 o sentenciado a una condena no mas de cinco anos o ambos.

Yo he leido las declaraciones antedichas o me las han traducido. Yo entiendo las declaraciones y certifico que la informacion que le he dado a la Autoridad de Vivienda de Bethlehem es exacta y completa segun mi leal saber y entender.

_____	_____
Arrendatario/Aplicante	Fecha
_____	_____
Co-Arrendatario/Aplicante	Fecha
_____	_____
Testigo	Fecha