



Housing Authority of the City of Raleigh, North Carolina

Leased Housing

Priscilla B. Batts
Director of
Leased Housing

900 Haynes Street
Raleigh, NC 27604

Applications
(919) 831-6387

Section 8 HAPP
(919) 831-6620

VERIFICATION OF EMPLOYMENT (For Reporting New Hires Only)

Date: _____

Applicant/Tenant: _____

Address: _____

The individual named above has applied for tenancy or is currently participating on the Housing Choice Voucher Program. Raleigh Housing Authority is subject to Federal Regulations which require verification of information supplied by applicant/tenants regarding their annual gross income. Please complete the information requested and return as soon as possible.

Raleigh Housing Authority has provided this form to the applicant or tenant to be completed by their employer; it must be completed by the Human Resources Department or Payroll Department. This form is to be used only when the applicant or tenant can not supply four (4) current consecutive paycheck stubs and or to report new employment.

Your assistance in completing this form accurately and timely is greatly appreciated!

The applicant/tenant has consented to the release of information by their signature below or on the attached Authorization for Release Form

Applicant/Tenant Signature

Date

The following information is requested in order to project the anticipated ANNUAL GROSS INCOME reasonably expected to be received by the applicant/tenant for his/her employment over the NEXT 12-MONTH PERIOD.

Employee Position or Title: _____

Date of Hire: _____

Date of Termination: _____

1. Employee Annual Gross Pay Before Deduction/Taxes

Please provide the amount of ANNUAL gross pay including overtime pay and any salary/wage adjustments anticipated over the next 12 months:

\$ _____

2. Other Compensation

Do you reasonably expect employee to receive other compensation not included above? Yes No

If yes, please provide total ANNUAL amount of "Other Compensation" anticipated over the next 12 months (e.g. bonus, tips, commission, other):

\$ _____

3. TOTAL GROSS EARNINGS ANTICIPATED FOR THE NEXT TWELVE MONTHS (Includes all salary/wages, tips, bonuses, overtime, commissions, other): (Total of Lines 1 + 2)

\$ _____

Other remarks/comments regarding employee's income: _____

WARNING: Section 1001 of the Title 18 of the United States Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Print Name/Title of Person Supplying Information

Print Name of Firm/Organization Agency

Signature

Date