

HUD's Low – Moderate Income Guidelines

Family Size of 1 - \$47,850

Family Size of 2 - \$54,650

Family Size of 3 - \$61,500

Family Size of 4 - \$68,300

Family Size of 5 - \$73,800

Family Size of 6 - \$79,250

Family Size of 7 - \$84,700

Family Size of 8 - \$90,200

Effective 7/1/2020

**Business Eligibility Certification for Community
Development Block Grant (CDBG) Program**

Name of Business: _____

Address: _____

Eligibility: Low-Moderate Job Retained

Employee Name: _____

Employee Home Address: _____

Complete the chart by including every family member. For each family member meeting the definition of family per 24 CFR 5.403, enter the name, date of birth, and their estimated gross annual income.

	<u>Family Member Name</u>	<u>Date of Birth</u>	<u>*Gross Annual Income</u>
1	_____	_____	\$ _____
2	_____	_____	\$ _____
3	_____	_____	\$ _____
4	_____	_____	\$ _____
5	_____	_____	\$ _____
6	_____	_____	\$ _____

Total Number of Family Members: _____ **Total Family Income: \$** _____

*Gross annual income must include all sources of income (income from wages, assets, child support, SSI, unemployment, pension, etc.)

I certify that the information given on this form is true and accurate to the best of my knowledge. I am aware that there are penalties for willfully and knowingly giving false information on an application for Federal or State funds. Penalties for falsifying information may include immediate repayment of all Federal or State funds received and/or prosecution under the law. I understand that the information on this form is subject to verification.

Employee Signature: _____ Date: _____

HUD Demographic Data - Job Retained

Complete with Employee

Eligible Owner/Employee	
Race	
White	<input type="checkbox"/>
Black/African American	<input type="checkbox"/>
Asian	<input type="checkbox"/>
American Indian/Alaskan Native	<input type="checkbox"/>
Nat. Hawaiian/Other Pacific Islander	<input type="checkbox"/>
Am. Indian/Alaskan Native & White	<input type="checkbox"/>
Asian & White	<input type="checkbox"/>
Black/African American & White	<input type="checkbox"/>
Am. Indian/Alaska & Black/African	<input type="checkbox"/>
Other Multi-Racial	<input type="checkbox"/>

	Yes	No
Hispanic	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
Is the Head of Family Female?	<input type="checkbox"/>	<input type="checkbox"/>

Eligible Owner/Employee Age Range	
0-18 years	<input type="checkbox"/>
19-24 years	<input type="checkbox"/>
25-44 years	<input type="checkbox"/>
45-64 years	<input type="checkbox"/>
Over 65 years	<input type="checkbox"/>

Complete with Employee

	Yes	No
Job was retained?	<input type="checkbox"/>	<input type="checkbox"/>
Job is full-time? or	<input type="checkbox"/>	<input type="checkbox"/>
Job is part-time?	<input type="checkbox"/>	<input type="checkbox"/>
Number of hours per week:		

	Yes	No
Job has health benefits?	<input type="checkbox"/>	<input type="checkbox"/>

Indicate Position Type Retained

Manager	<input type="checkbox"/>
Professional	<input type="checkbox"/>
Technician	<input type="checkbox"/>
Sales	<input type="checkbox"/>
Office / Clerical	<input type="checkbox"/>
Craft Worker (skilled)	<input type="checkbox"/>
Operative (semi-skilled)	<input type="checkbox"/>
Laborers (unskilled)	<input type="checkbox"/>
Service Workers	<input type="checkbox"/>
Other:	<input type="checkbox"/>