

15941 Donald Curtis Drive, Suite 112 Woodbridge, VA 22191 PHONE: 703-792-7530 FAX: 703-792-4978 www.pwcgov.org/housing

# ZERO INCOME WORKSHEET

Directions: This Worksheet is to be used in conjunction with the Zero Income Checklist. For each Yes answer on the Checklist complete the questions in the corresponding section.

#### Client Name: \_\_\_\_\_

## 1. Food Expenses

You have said that you receive *Food Stamps*. What is the monthly value of the Food Stamps? \$ \_\_\_\_\_\_ You have said that you purchase groceries. What is your weekly grocery bill? \$ \_\_\_\_\_\_\_ How do you pay the weekly grocery bill? \_\_\_\_\_\_ Does someone other than a member of the household contribute to groceries? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_ If yes, who? \_\_\_\_\_\_\_ Do they contribute groceries or prepared food on a regular basis? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_ What is the average weekly amount/value for groceries and /or prepared food contributed from all sources? \$ \_\_\_\_\_\_. *This amount is income*. *Note: Food contributions by food banks, received from the surplus commodity program, the WIC program, or consumed at publicly of non-profit funded meal programs does not count as income*. *Food or cash for food contributed by private person does count as income*. **VERIFICATION:** The family should bring in at least one month's worth of grocery receipts. Check the receipts to make sure family could manage on the amount of food documented.

## 2. Gleaning, Grooming and Paper Products Expenses

You have said that you purchase *paper products*. How much do you spend on paper products each week? \$ \_\_\_\_\_

How does the household pay for these paper products? \_\_\_\_\_

Does someone other than a member of the household contribute to paper products? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute paper products on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average weekly amount/value of cash contribution for paper products?

## \$\_\_\_\_\_. This amount is income.

You have said that you purchase *grooming products*. How much do you spend on grooming products and services each week? \_\_\_\_\_

How does the household pay for the cost of grooming products and services?

Does anyone other than a household member contribute to grooming products? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute grooming products on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average weekly amount/value of cash contribution for grooming products? \$\_\_\_\_\_\_. *This amount is income.* 

You have said that you purchase *cleaning products*. How much do you spend on cleaning products and services each week?

How does the household pay for the cost of cleaning products and services?



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Does anyone other than a household member contribute to cleaning products? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_\_

Do they contribute cleaning products on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_ What is the average weekly amount/value of cash contribution for cleaning products? \$\_\_\_\_\_\_. *This amount is income.* 

You have said that you or someone in your household gets their *nails* done. How much do you spend on nail services each week? \_\_\_\_\_

How does the household pay for the cost of nail services?

Does anyone other than a household member contribute to nail services? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average weekly amount/value of cash contribution for nail services? \$\_\_\_\_\_\_. *This amount is income.* 

You have said that you or someone in your household gets their *hair* done. How much do you spend on hair services each week? \_\_\_\_\_

How does the household pay for the cost of hair services?

Does anyone other than a household member contribute to hair services? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average weekly amount/value of cash contribution for hair services? \$\_\_\_\_\_.

#### This amount is income.

**VERIFICATION:** Most households buy cleaning supplies, grooming products and paper products at the grocery store. Review the households' grocery receipts to help verify amount spent.

## 3. Transportation Expenses

You have said that you or someone in your household *owns a car*. Are there still payments on the car? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the monthly car payments? \_\_\_\_\_ Type of Car: \_\_\_\_\_ How does the household make the car payments?

Does anyone other than a household member contribute to the car payments? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly amount/value of cash contribution toward car payment?

\$\_\_\_\_\_\_. This amount is income. Please note this amount is income whether it is cash paid to the family or cash paid directly to the holder of the car note.



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What are the average monthly amounts the household pays for the following *operating expenses?* Gas \$\_\_\_\_\_ Maintenance \$\_\_\_\_\_ Tires \$\_\_\_\_\_ How does the household make the operating expenses payments?

Does anyone other than a household member contribute to the car's operating costs? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly amount/value of cash contribution to the car's operating cost? \$\_\_\_\_\_\_. *This amount is income.* 

**VERIFICATION:** The household should bring one month's gas receipts, proof of insurance and proof of car payments, etc.

Does anyone other than a household member contribute to transportation costs? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_ No \_\_\_\_

What is the average monthly amount/value of cash contribution to transportation cost?

\$\_\_\_\_\_\_. This amount is income.

**VERIFICATION:** The household should bring one month's gas receipts, proof of insurance and proof of car payments, etc.

#### 4. Entertainment Expenses

You had stated that you have *cable TV*. If yes, does the household have basic minimum or premium channels?

What is the average monthly cost of cable TV service? \$ \_\_\_\_\_

How does the household pay for cable TV service? \_\_\_\_\_

Does someone other than a household member contribute to cable TV service? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly amount/value of cash contribution to transportation cost? \$\_\_\_\_\_\_. *This amount is income.* 

What are the average weekly cost of *other types of entertainment*? Include the following: You have said that you have magazine subscriptions. What magazines do you subscribe to?

Do you purchase magazines on a regular basis but do not subscribe to them? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what magazines and how often? \_\_\_\_\_\_

You have said that	at you attend or p	participate in the fo	llowing. How	much do you spend	for each monthly?
Magazines	\$	Sporting Events	\$	Lottery Tickets	\$
Movies	\$	Club Membership	\$	Liquor/Beer/Wine	\$
Vacations	\$	Video Rentals	\$	Other	\$

How does the household pay for other entertainment cost?



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Does someone other than a member of the household contribute to entertainment costs? Yes \_\_\_\_\_ No \_\_\_\_ Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly cash contribution or entertainment provided for your household? \$\_\_\_\_\_\_. *This amount is income.* 

**VERIFICATION:** The household should bring two month's cable TV bills and receipts for entertainment cost.

## 5. Clothing Expenses

You have said that you purchase *clothing*. What is the average monthly cost for clothing and shoes for your household? \$ \_\_\_\_\_

How does the family pay for clothing and shoes?

Does someone other than a household member contribute to clothing and shoes? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_

What is the average monthly contribution (cash or clothes/shoes provided) for clothing cost? \$\_\_\_\_\_\_. *This amount is income.* 

You have said that you use a *laundry mat or dry cleaners* or both. What is the monthly amount spent by the household for laundry/dry cleaning? \$ \_\_\_\_\_

How much does the household pay for laundry expenses? \_

Does someone other than a member of the household contribute to the cost of laundry expenses? Yes \_\_\_\_\_ No \_\_\_\_

If yes, who?

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_

What is the average monthly contribution for clothes laundry expenses? \$\_\_\_\_\_\_.

#### This amount is income.

**NOTE:** Clothing acquired from clothing banks or given to the family second hand are not counted as income. **VERIFICATION:** The household should provide a schedule that shows when clothing and shoes are purchased and the amount.

## 6. Smoking Expenses

You have said that you or someone in your household smokes. Who smokes?
How many packs per day are smoked by the smokers in the household?
How does the household pay for the cost of cigarettes/cigars?
Does someone other than a household member contribute to the cost of smoking? Yes No
If yes, who?
Do they contribute on a regular basis? Yes No

What is the average monthly contribution (cash or cigarettes/cigars) for smoking? *This amount is income.* 



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# 7. Communication Expenses

You have said that you have a telephone in *the house*. How many lines does the household have? \_\_\_\_\_ Does the household have special features (call waiting, call forwarding, caller ID, etc.)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what special services do you have? \_\_\_\_\_\_

What is the average monthly cost of telephone service? \$\_\_\_\_\_

How does the household pay for the cost of telephone service?

Does someone other than a household member contribute to the telephone costs? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution (cash or direct payment to telephone bill) for telephone?

#### ↓\_\_\_\_\_ This amount is income.

You have said that members of our household have *cell phones*. How many cell phones does the household have? \_\_\_\_\_

Who is the service provider? \_\_\_\_\_

What is the average monthly cost for cell phone service? \$\_\_\_\_\_

How does the household pay for the cost of the cell phone?

Does someone other than a household member contribute to the cell phone cost? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

If yes, who? \_\_\_\_\_\_ Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution (cash or direct payment to service provider) for cell telephone?

## This amount is income.

You have said that members of our household have *pager or beeper*. How many pagers or beepers does the household have? \_\_\_\_\_

What is the average monthly cost for service? \$\_\_\_\_\_

How does the household pay for the cost of the pager/beeper?

Does someone other than a household member contribute to the pager/beeper cost? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution (cash or direct payment to service provider) for pager/beeper?

This amount is income.

You have said that you have an internet connection in your home. Who is the internet provider?

Is there a dedicated telephone line for the internet? Yes \_\_\_\_ No \_\_\_\_ If yes, does the telephone line show on the household's telephone bill? Yes\_\_\_\_ No \_\_\_\_ If no, get a copy of the households other telephone bill.



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What is the monthly cost for Internet service? \$\_\_\_\_\_

How does the household pay for the cost of Internet service? \_\_\_\_

Does someone other than a household member contribute to Internet cost? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who?\_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution (cash or direct payment to service provider) for Internet?

## This amount is income

**VERIFICATION:** The household should provide at least two months of bills for telephone, beeper/pager and Internet services, as applicable.

## 8. Shelter Expenses

You have said that you are responsible for paying your *utilities*. Please list the utilities that you are responsible to pay with the average monthly amount of the bill.

Utility	Monthly Amount	Utility	Monthly Amount	Utility	Monthly Amount
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$
	\$		\$		\$

How does the household pay for utilities?\_\_\_\_\_

Does someone other than a household member contribute to utilities? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_\_

Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution (in cash or direct payment to utility company) for utilities?

## This amount is income

**VERIFICATION:** The household should provide at least three months of their utility bills.

## 9. Miscellaneous Expenses

You have said that you make contributions to your *church*. How much do you contribute on a monthly basis? \$\_\_\_\_\_

How do you pay for these contributions?

What is the average monthly contribution to the church on your behalf? *This amount is income* 

You have said that you or a member of your household has unreimbursed *educational* expenses. How much are you paying for education on a quarterly basis? \$\_\_\_\_\_

Does someone other than a member of your household contribute to your educational cost? Yes \_\_ No \_\_ If yes, who? \_\_\_\_\_\_



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Do they contribute on a regular basis? Yes \_\_\_\_ No \_\_\_\_ What is the average monthly contribution (in cash or direct payment to the school) for educational expenses? \$\_\_\_\_\_ *This amount is income* You have said that you have unreimbursed child care expenses. How much do you pay for child care on a monthly basis? \$\_\_\_\_\_\_ How do you pay child care? \_\_\_\_\_\_ Does someone other than a household member contribute to your child care? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who? \_\_\_\_\_\_ Do they contribute on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_

What is the average monthly contribution for child care? \$\_\_\_\_\_\_ *This amount is income* 

I acknowledge that I have answered the above questions and that I have answered them honestly and accurately.

I understand that any information I supply must be true and complete according to 24CFR982.551(b)(4) and that the penalty for falsifying information is termination of my voucher per 24CFR982.552(c)(1)(i).

Client Signature:	Date:	