



# County of Fairfax, Virginia

To protect and enrich the quality of life for the people, neighborhoods and diverse communities of Fairfax

## NO INCOME AFFIDAVIT

\_\_\_\_\_ FTHB Passport # \_\_\_\_\_  
Head of Household, Last Name, First Name (Print)

I \_\_\_\_\_ (Print Last Name, First Name), do hereby swear or affirm that I do not have any income from any source.

I \_\_\_\_\_ (Print Last Name, First Name), do hereby swear or affirm that \_\_\_\_\_ (Print Last Name, First Name) is a member of my family, resides with me, and does not have income from any source.

Income may include, but is not limited to the following:

- Wages, Public Assistance (TANF, General Relief, Social Security; SSI, etc);
- Child Support, alimony, or regular monetary gifts from family or friends, etc;
- Assets (real estate, stocks, inherited property, etc);
- Income from interest on savings, checking, Christmas club and another bank accounts;
- IRAs, Certificates of Deposit, Money Market Funds, Credit Union, etc;
- U.S. Saving Bonds, Stocks or bonds of any kind;
- Pension, annuities, retirement funds, etc (This includes benefits you receive from any beneficiary of a Life Insurance or retirement plan);
- Whole Life Insurance;
- Real Estate Property, Earned Income Tax Credit, etc; or
- Any other income including tips, sold property, babysitting, etc.

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public

State of \_\_\_\_\_

My Commission expires \_\_\_\_\_

**NOTE: THIS AFFIDAVIT IS ONLY VALID FOR 30 DAYS**

F:\Users\RELSHARE\Homeownership\First-Time Home Buyer Program\Resales of 30 yr Properties\ (C) Drawing Winner Process and Open House\No Income Affidavit rev 01.07.2021

**Department of Housing and Community Development**  
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