

MARYLAND BRIDGE SUBSIDY DEMONSTRATION PROGRAM

A recommendation of the Governor's Commission on Housing Policy

BRIDGE SUBSIDY DEMONSTRATION PROGRAM

Certification of Applicant Eligibility

I. Applicant Self-Certification

In order to participate in the Bridge Subsidy Demonstration Program the applicant must self certify the following:

1. I certify that I am a person with a disability over the age of 25 and that I have provided or will provide documentation of proof of age and disability (For example: Social Security Award Letter, birth certificate, etc.);
 2. I certify that my annual income does not exceed \$15,000 and that I have provided or will provide income documentation for all income sources (For example: W-2 Forms, paycheck stubs, Social Security Award Letter, etc);
 3. I certify that I have not been convicted of a violent or drug related crime, have never been required to register as a sex offender, and am not currently on parole, probation, or home monitoring;
 4. If accepted into the Bridge Subsidy Demonstration Program, I agree to abide by the guidelines of the public housing authority in my area. I understand that this may include agreeing to pay bills on time, maintaining a safe, clean living space, and refraining from engaging in criminal activity;
 5. I certify that I am willing to live in one of the areas that are participating in the Bridge Subsidy Demonstration Program;
 6. I certify that I will work with my designated service provider in complying with the requirements of the Bridge Subsidy Demonstration Program, including, but not limited to: co-creating a service plan, and attending tenant education and financial literacy classes;
 7. I certify that I am not currently using or abusing illegal drugs or participating in other illegal activity.
- Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge.

---Or---

- Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge except for Number __. Reason for this exemption (Attach detailed explanation if necessary):

I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in being removed from the subsidy program.

Signature of Applicant: _____

Printed Name of Applicant: _____

Date: _____

II. Certification of Service Provider responsible for Accepting Participants into the Bridge Subsidy Demonstration Program

The Service Provider, who is a signatory of the Memorandum of Understanding for the Bridge Subsidy Demonstration Program, certifies that they have reviewed the facts and circumstances of the person who is named in this document and completed the self-certification under Section I. above.

Based upon a review of the available information, I certify that the person named in this document is eligible to participate in the Bridge Subsidy Demonstration and is approved as a Participant for the Program

Signature of Service Provider: _____

Printed Name of Service Provider: _____

Date: _____