



Burlington Lead Program
PO Box 441
Winooski, VT 05404
802-865-5323 (LEAD)

Self-Certification Statement of Self Employment Affidavit

Name: _____

Address: _____

AUTHORIZATION: Federal Regulations require us to verify Employment Income of all members of the household applying for participation in the Burlington Lead Program which we operate. We ask your cooperation in supplying this information. This information will be used only to determine the eligibility status and level of benefit of the household.

I, _____, certify that I am self-employed through
_____, and I estimate that my net income for the next 12 months will be
\$ _____. I also agree to provide a copy of my last year income tax return
(Form 1040).

Signature: _____ Date: _____

Signature: _____ Date: _____

WARNING: Title 18, Section 1001 of the U.S. 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.