

CITY OF BERKELEY
RENT STABILIZATION BOARD
 2125 Milvia Street, Berkeley, CA 94704
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 E-MAIL: rent@cityofberkeley.info INTERNET: rentboard.berkeleyca.gov

DECLARATION OF HOUSEHOLD INCOME
 (for Historically Low Rent petitions only)

Note: This information is confidential and may be viewed only by rent board staff and your landlord. You are not required to send a copy of the Declaration of Household Income to your landlord; *your landlord may review the completed form in our files only after signing a confidentiality agreement.*

Property address: _____ Unit: _____
 Number of people in household: _____ Number of bedrooms in unit: _____
 Household annual gross income: \$ _____
 Is anyone in the household: Disabled? Yes _____ No _____ Over age 65? Yes _____ No _____
 Has any household member between ages 18 and 65 been claimed as a dependent on the most recent tax return of a non-household member? Yes _____ No _____

Source of Income (attach documentation to verify the amounts reported.)	Income Amount
Wages, salaries and other monetary compensation for each wage earner in the household over age 18: Attach pay stubs or verification letter from employer.	
Business Income: Attach copies of account ledgers, tax returns or similar documents.	
Interest, dividends and royalties: Attach copies of checks or bank or stock statements.	
Social Security, retirement funds, pensions and annuities: Attach copies of checks or other verification.	
Unemployment, workers' compensation or other payment in lieu of earnings: Attach copies of checks or other verification.	
Social Security Disability Income (SSDI), Supplemental Security Income (SSI) or Welfare Assistance: Attach copies of checks or other verification.	

THIS FORM MUST BE SIGNED BY ALL ADULT MEMBERS OF THE HOUSEHOLD

I declare under penalty of perjury of the laws of the State of California that the **above amounts constitute the total annual gross income received by all members of the household** over age 18.

1. Signature _____ Date _____
 Printed Name _____
2. Signature _____ Date _____
 Printed Name _____
3. Signature _____ Date _____
 Printed Name _____
4. Signature _____ Date _____
 Printed Name _____