#  Gwa’sala-’Nakwaxda’xw Nation

P.O. Box 998 Port Hardy, BC V0N 2P0

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**GWA’SALA-’NAKWAXDA’XW BAND**

**DECLARATION OF INCOME FOR RESIDENTS OF BAND OWNED HOUSING**

**INCOME means;** the gross income before deductions in whatever form received of all members of the family of household and includes salary, wages, commissions, investment income, part-time earnings, tips, alimony and child support payments. Unemployment insurance, Social Assistance, pensions, CPP, GIC, etc. except capital gains or lump sum insurance settlements.

**Please list income from all sources of all members of your household for the year January 1, 2020 to December 31, 2020.**

**Also, staple to this sheet supporting documentation for this income such as pay stubs, T4 slips, letter from employer and/or Social Services; EI Stubs, financial statements, etc.**

**NAME RELATIONSHIP INCOME**

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 **TOTAL HOUSEHOLD INCOME FOR YEAR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Name of head of household)**

**certify that the information given here is complete and correct. I/we authorize the Gwa’sala-‘Nakwaxda’xw Band to obtain verification of this information from employers or other sources and I/we agree to provide supporting evidence of total household income to the Band upon request. I/we also acknowledge that failure to provide such evidence within the time frame established by the Band will result in the household having to pay the Lower-End-Of-Market Rent.**

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 **Signature of head of household Date**

**Received at Gwa’sala-’Nakwaxda’xw Band Housing Department**

**By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**