## **RE-CERTIFICATION NOTICE**

Date:

\_\_\_\_\_

\_\_\_\_\_

Dear \_\_\_\_\_,

The government requires that we periodically review your income and family composition to determine if you are still eligible to receive housing assistance.

## **NOTE:** The USDA Rural Development in Nebraska has an agreement with the Department of Labor to provide wage and benefit matching information for the purpose of detection of fraudulent statements regarding income.

To complete our review of your income and family composition, you must meet with

	(manager) at	
	(location) to supply the required informati	ion. This
interview is scheduled for	(time) on	(date).

To help in processing your re-certification, please, please bring the following information with you to the interview:

- 1. The name and address for all employers of household members.
- 2. Your Social Security number for identification purposes.
- 3. All bank and savings account numbers.
- 4. The name and address of the source of any income from assets.
- 5. The name and address of any pension or benefit plans.
- 6. Any other information that will assist with verifying the present income received by all tenants residing in your apartment unit.

If the above time is inconvenient for you, please contact the management immediately. Failure to respond to this notice will result in an increase in your rent to \$\_\_\_\_\_ and the termination of your lease agreement.

Sincerely,

"This institution is an equal opportunity provider."



