

Applicant / Resident Name: \_\_\_\_\_

Project Name: \_\_\_\_\_ Unit Number: \_\_\_\_\_

Certification / Recertification Date: \_\_\_\_\_

Means of Clarification: \_\_\_\_\_ Phone Conversation  
 \_\_\_\_\_ Person-to-Person Conversation  
 \_\_\_\_\_ Other: (please state below)  
 \_\_\_\_\_

Name of Person Supplying Information: \_\_\_\_\_

Title: \_\_\_\_\_

Date of Clarification: \_\_\_\_\_

Company / Organization: \_\_\_\_\_

Reason for Clarification:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Explanation for Clarification Given:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Name & Title of Person Receiving above information

\_\_\_\_\_  
 Date

Penalties for Misuse of this Form 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, HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures of improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42.U.S.C. 208 (f) (g) and (h), Violation of these provisions are cited as violations of 42.U.S.C. 408 f, g and h.