



Ned Lamont
Governor

STATE OF CONNECTICUT
DEPARTMENT OF HOUSING



Seila Mosquera-Bruno
Commissioner

ATTESTATION OF COVID-19 HARDSHIP

I hereby affirm and attest that I have experienced a reduction in household income, incurred significant costs, or experienced other financial hardship due, directly or indirectly, to the novel coronavirus disease (COVID-19) outbreak. I further attest that I do not have documentation to support these circumstances, and that if I obtain documentation demonstrating the facts set forth below at any time I will promptly provide it to a UniteCT program representative.

Specifically, I have experienced (check all that apply):

- A reduction in household income
- Significant costs
- Other financial hardship

Please provide a detailed description and explanation of your circumstance. Be sure to describe how your hardship was exacerbated by the COVID-19 pandemic:

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

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Signature of Applicant/Tenant	Printed Name of Applicant/Tenant	Date

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Signature of Co-Applicant/Co-Tenant	Printed Name of Co-Applicant/Co-Tenant	Date

Title18, 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, U.S. Department of the Treasury (the Treasury) and any owner (or any employee of the Treasury or the owner) may be subject to penalties for unauthorized disclosures or 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 the Treasury 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 ** 208 (a) (6), (7) and (8). ** Violation of these provisions are cited as violations of 42 U.S.C. Section ** 408 (a) (6), (7) and (8). **