Prince William County
Office of Housing and
Community Development
15941 Donald Curtis Drive, Suite 112
Woodbridge, VA 22191
PHONE: 703-792-7530
FAX: 703-792-4978
www.pwcgov.org/housing

ZERO INCOME WORKSHEET

Directions: This Worksheet is to be used in conjunction with the Zero Income Checklist. For each Yes answer on the Checklist complete the questions in the corresponding section.

Client Name: _____

1. Food Expenses

You have said that you receive *Food Stamps*. What is the monthly value of the Food Stamps? $ _____
You have said that you purchase groceries. What is your weekly grocery bill? $ _____
How do you pay the weekly grocery bill? _____
Does someone other than a member of the household contribute to groceries? Yes ____ No ____
If yes, who? _____
Do they contribute groceries or prepared food on a regular basis? Yes ____ No ____
What is the average weekly amount/value for groceries and /or prepared food contributed from all sources? $_____. ***This amount is income.***

Note: Food contributions by food banks, received from the surplus commodity program, the WIC program, or consumed at publicly of non-profit funded meal programs does not count as income. Food or cash for food contributed by private person does count as income.

VERIFICATION: The family should bring in at least one month's worth of grocery receipts. Check the receipts to make sure family could manage on the amount of food documented.

2. Gleaning, Grooming and Paper Products Expenses

You have said that you purchase *paper products*. How much do you spend on paper products each week? $ _____
How does the household pay for these paper products? _____
Does someone other than a member of the household contribute to paper products? Yes ____ No ____
If yes, who? _____
Do they contribute paper products on a regular basis? Yes ____ No ____
What is the average weekly amount/value of cash contribution for paper products?
$_____. ***This amount is income.***
You have said that you purchase *grooming products*. How much do you spend on grooming products and services each week? _____
How does the household pay for the cost of grooming products and services?
_____
Does anyone other than a household member contribute to grooming products? Yes ____ No ____
If yes, who? _____
Do they contribute grooming products on a regular basis? Yes ____ No ____
What is the average weekly amount/value of cash contribution for grooming products?
$_____. ***This amount is income.***

You have said that you purchase *cleaning products*. How much do you spend on cleaning products and services each week? _____
How does the household pay for the cost of cleaning products and services?
_____

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Does anyone other than a household member contribute to cleaning products? Yes ____ No ____
If yes, who? _____
Do they contribute cleaning products on a regular basis? Yes ____ No ____
What is the average weekly amount/value of cash contribution for cleaning products?
$_____. ***This amount is income.***

You have said that you or someone in your household gets their *nails* done. How much do you spend on nail services each week? _____
How does the household pay for the cost of nail services?

_____
Does anyone other than a household member contribute to nail services? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average weekly amount/value of cash contribution for nail services? $_____.
This amount is income.

You have said that you or someone in your household gets their *hair* done. How much do you spend on hair services each week? _____
How does the household pay for the cost of hair services?

_____
Does anyone other than a household member contribute to hair services? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average weekly amount/value of cash contribution for hair services? $_____.
This amount is income.

VERIFICATION: Most households buy cleaning supplies, grooming products and paper products at the grocery store. Review the households' grocery receipts to help verify amount spent.

3. Transportation Expenses

You have said that you or someone in your household *owns a car*. Are there still payments on the car?
Yes ____ No ____
If yes, what is the monthly car payments? _____ Type of Car: _____
How does the household make the car payments?

_____
Does anyone other than a household member contribute to the car payments? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly amount/value of cash contribution toward car payment?
$_____. ***This amount is income.*** *Please note this amount is income whether it is cash paid to the family or cash paid directly to the holder of the car note.*

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What are the average monthly amounts the household pays for the following *operating expenses?*
Gas $_____ Maintenance $_____ Insurance $_____ Tires $_____
How does the household make the operating expenses payments?

_____

Does anyone other than a household member contribute to the car's operating costs? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly amount/value of cash contribution to the car's operating cost?
$_____. ***This amount is income.***
VERIFICATION: The household should bring one month's gas receipts, proof of insurance and proof of car payments, etc.

If the household does *not own a car*, what does the household use for transportation? _____
How does the household pay for this transportation? _____
Does anyone other than a household member contribute to transportation costs? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly amount/value of cash contribution to transportation cost?
$_____. ***This amount is income.***
VERIFICATION: The household should bring one month's gas receipts, proof of insurance and proof of car payments, etc.

4. Entertainment Expenses

You had stated that you have *cable TV*. If yes, does the household have basic minimum or premium channels? _____
What is the average monthly cost of cable TV service? $ _____
How does the household pay for cable TV service? _____
Does someone other than a household member contribute to cable TV service? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly amount/value of cash contribution to transportation cost?
$_____. ***This amount is income.***

What are the average weekly cost of *other types of entertainment*? Include the following:
You have said that you have magazine subscriptions. What magazines do you subscribe to?

_____

Do you purchase magazines on a regular basis but do not subscribe to them? Yes ____ No ____
If yes, what magazines and how often? _____
You have said that you attend or participate in the following. How much do you spend for each monthly?

Magazines	$	Sporting Events	$	Lottery Tickets	$
Movies	$	Club Membership	$	Liquor/Beer/Wine	$
Vacations	$	Video Rentals	$	Other	$

How does the household pay for other entertainment cost? _____

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Does someone other than a member of the household contribute to entertainment costs? Yes ____ No ___
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly cash contribution or entertainment provided for your household?
$_____. ***This amount is income.***
VERIFICATION: The household should bring two month's cable TV bills and receipts for entertainment cost.

5. Clothing Expenses

You have said that you purchase *clothing*. What is the average monthly cost for clothing and shoes for your household? $ _____
How does the family pay for clothing and shoes? _____
Does someone other than a household member contribute to clothing and shoes? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or clothes/shoes provided) for clothing cost?
$_____. ***This amount is income.***

You have said that you use a *laundry mat or dry cleaners* or both. What is the monthly amount spent by the household for laundry/dry cleaning? $ _____
How much does the household pay for laundry expenses? _____
Does someone other than a member of the household contribute to the cost of laundry expenses?
Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution for clothes laundry expenses? $_____.
This amount is income.
NOTE: Clothing acquired from clothing banks or given to the family second hand are not counted as income.
VERIFICATION: The household should provide a schedule that shows when clothing and shoes are purchased and the amount.

6. Smoking Expenses

You have said that you or someone in your household smokes. Who smokes? _____
How many packs per day are smoked by the smokers in the household? _____
How does the household pay for the cost of cigarettes/cigars? _____
Does someone other than a household member contribute to the cost of smoking? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or cigarettes/cigars) for smoking? $_____.
This amount is income.

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7. Communication Expenses

You have said that you have a telephone in *the house*. How many lines does the household have? _____
Does the household have special features (call waiting, call forwarding, caller ID, etc.)? Yes ____ No ____
If yes, what special services do you have? _____
What is the average monthly cost of telephone service? $_____
How does the household pay for the cost of telephone service? _____
Does someone other than a household member contribute to the telephone costs? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or direct payment to telephone bill) for telephone?
$_____.
This amount is income.

You have said that members of our household have *cell phones*. How many cell phones does the household have? _____
Who is the service provider? _____
What is the average monthly cost for cell phone service? $_____
How does the household pay for the cost of the cell phone? _____
Does someone other than a household member contribute to the cell phone cost? Yes _____ No _____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or direct payment to service provider) for cell telephone?
$_____.
This amount is income.

You have said that members of our household have *pager or beeper*. How many pagers or beepers does the household have? _____
What is the average monthly cost for service? $_____
How does the household pay for the cost of the pager/beeper? _____
Does someone other than a household member contribute to the pager/beeper cost? Yes _____ No _____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or direct payment to service provider) for pager/beeper?
$_____
This amount is income.

You have said that you have an *internet connection* in your home. Who is the internet provider?
_____
Is there a dedicated telephone line for the internet? Yes ____ No ____
If yes, does the telephone line show on the household's telephone bill? Yes____ No ____
If no, get a copy of the households other telephone bill.

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What is the monthly cost for Internet service? $_____
How does the household pay for the cost of Internet service? _____
Does someone other than a household member contribute to Internet cost? Yes ____ No ____
If yes, who?_____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (cash or direct payment to service provider) for Internet?
$_____
This amount is income

VERIFICATION: The household should provide at least two months of bills for telephone, beeper/pager and Internet services, as applicable.

8. Shelter Expenses

You have said that you are responsible for paying your *utilities.* Please list the utilities that you are responsible to pay with the average monthly amount of the bill.

Utility	Monthly Amount	Utility	Monthly Amount	Utility	Monthly Amount
	$		$		$
	$		$		$
	$		$		$
	$		$		$

How does the household pay for utilities?_____
Does someone other than a household member contribute to utilities? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (in cash or direct payment to utility company) for utilities?
$_____
This amount is income

VERIFICATION: The household should provide at least three months of their utility bills.

9. Miscellaneous Expenses

You have said that you make contributions to your *church*. How much do you contribute on a monthly basis? $_____
How do you pay for these contributions? _____
What is the average monthly contribution to the church on your behalf? $_____
This amount is income

You have said that you or a member of your household has unreimbursed *educational* expenses.
How much are you paying for education on a quarterly basis? $_____
Does someone other than a member of your household contribute to your educational cost? Yes __ No __
If yes, who? _____

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Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution (in cash or direct payment to the school) for educational expenses? $_____
This amount is income

You have said that you have unreimbursed child care expenses. How much do you pay for child care on a monthly basis? $_____
How do you pay child care? _____
Does someone other than a household member contribute to your child care? Yes ____ No ____
If yes, who? _____
Do they contribute on a regular basis? Yes ____ No ____
What is the average monthly contribution for child care? $_____
This amount is income

I acknowledge that I have answered the above questions and that I have answered them honestly and accurately.

I understand that any information I supply must be true and complete according to 24CFR982.551(b)(4) and that the penalty for falsifying information is termination of my voucher per 24CFR982.552(c)(1)(i).

Client Signature: _____ Date:_____