

REQUIRED DOCUMENTS FOR YOUR RECERTIFICATION

You must provide verification of the following information for all members of your family. Verification documents must be dated within 30 days of the date they are provided to PAPMC.

- **Income/Benefit/ Expense Received:** If anyone in your household receives income/benefits from the source listed, you must provide the documentation/information listed in the column “What to Send to PAPMC”.
- **What to Send to PAPMC:** Review the information in this column to identify the documents/information you are required to provide for the income/benefit received. For example, if you are employed, you must send the correct number of paystubs for the frequency with which you are paid.
- **Where to Obtain Verification:** The information in this column provides resources to assist you in obtaining the documentation required by PAPMC.
- **If you have questions regarding acceptable verification, please contact your Property Manager or email PublicHousing.Answers@pha.phila.gov being sure to include your name and client number**

Income/Benefit/Expense Received	What to Send to PAPMC	Where to Obtain Verification
Employment Income (including Military Pay)	<ul style="list-style-type: none"> • Consecutive (in a row) paystubs dated within the past 30 days for all adult family members except where identified below: <ul style="list-style-type: none"> ○ 6 paystubs for weekly pay (ex. Paystubs dated 1/03/2020, 1/10/2020, 1/17/2020, 1/24/2020, 1/31/2020, and 2/7/2020); ○ 4 paystubs for bi-weekly pay (ex. paystubs that are in a row 1/10/2020, 1/24/2020, 2/7/2020, and 2/21/2020) ; ○ 2 paystubs for monthly pay (ex. January 2020 and February 2020) • W-2 forms and tax returns for seasonal employment. • Original letter from the employer, which must include: <ol style="list-style-type: none"> 1. Dates of employment 2. Income information to accurately calculate income, including gross salary and/or hours worked per pay period (including overtime) • Documentation of other income the family expects to receive from employment such as tips, commissions, bonuses, etc. 	<ul style="list-style-type: none"> • Paystubs in your possession. You may print paystubs from employer on-line payroll records. • The Work Number www.theworknumber.com; many employers provide your pay schedule on this website. • The employer.
Self-Employment or Income from a Business	<ul style="list-style-type: none"> • Prior year’s tax return (including Schedule C) • Business financial statements • 6 consecutive weekly statements and 6 weeks of expenses (ex.: Uber, Lyft, DoorDash) 	<ul style="list-style-type: none"> • Tax returns provided by the family member
Termination of Employment	<ul style="list-style-type: none"> • If you or a family member reported employment at the last recertification and is no longer employed, provide a letter of termination from the employer. • The letter of termination must state the date of termination. 	<ul style="list-style-type: none"> • Provide your termination letter from the employer

PHILADELPHIA ASSET AND PROPERTY MANAGEMENT CORPORATION (PAPMC)

Income/Benefit/Expense Received	What to Send to PAPMC	Where to Obtain Verification
Social Security or Supplemental Security Income (SSI)	<ul style="list-style-type: none"> • Benefit letter from the Social Security Administration (SSA). • The benefit letter must be dated within 30 days from the date it is provided to PHA. 	<ul style="list-style-type: none"> • Call the Social Security Administration at 1-800-772-1213 or log onto the SSA's website www.ssa.gov. Click on "My Social Security".
Public Assistance (TANF or Welfare)	<ul style="list-style-type: none"> • Benefit letter from the Department of Human Services (DHS). 	<ul style="list-style-type: none"> • If the family's case number is known, https://www.dpwtxns.state.pa.us • The family may call the DHS Helpline at 1-800-692-7462 (TTY/TTD at 1-800-451-5886) or log onto the "My COMPASS" website www.compass.state.pa.us
State Supplement Program (SSP) This is the State paid portion of your SSI benefit	<ul style="list-style-type: none"> • Benefit letter from the Department of Human Services (DHS). 	<ul style="list-style-type: none"> • If the family's case number is known, https://www.dpwtxns.state.pa.us • COMPASS Report • The family may call the DHS Helpline at 1-800-692-7462 (TTY/TTD at 1-800-451-5886) or log onto the "My COMPASS" website www.compass.state.pa.us
Unemployment or Worker's Compensation	<ul style="list-style-type: none"> • Provide documentation of unemployment compensation i.e. unemployment benefit letter or statement from the PA Dept. of Labor and Industry. • Worker's compensation benefit letter 	<ul style="list-style-type: none"> • To obtain a benefit letter, the family may access the online database: https://www.paclaims.state.pa.us/uccc/LoginBenefitStatus.asp <ul style="list-style-type: none"> ○ The family member will need their Social Security number and PIN to log in. ○ If the family member has not registered for online access to the PA Department of Labor and Industry, registration is available at: https://www.paclaims.state.pa.us
Veteran's Benefits	<ul style="list-style-type: none"> • Benefit letter from the U.S Department of Veteran's Affairs (VA) stating benefits. 	<ul style="list-style-type: none"> • The family may access the online system via https://www.benefits.va.gov/pension
Court-Ordered Child Support/ Alimony	<ul style="list-style-type: none"> • Transaction Log from the Pennsylvania Child Support website (6 months). 	<ul style="list-style-type: none"> • Access your transaction log via: https://www.humanservices.state.pa.us/cs/ws/
Non-Court Ordered Child Support/ Alimony	<ul style="list-style-type: none"> • Documentation of child support and/or alimony payments. Examples include (but are not limited to): <ul style="list-style-type: none"> ○ Copies of checks/money orders from parent providing payments (6 for weekly, 4 for bi-weekly, or 2 for monthly); ○ Signed and dated letter from the person who is providing the child support or alimony payments. 	<ul style="list-style-type: none"> • Person who is providing the child support or alimony payments.
Retirement Benefits, Annuities, or Pensions	<ul style="list-style-type: none"> • Provide benefit letter or statement indicating amount and frequency of payments. 	<ul style="list-style-type: none"> • Human Resources department of company providing the benefits
Regular Contributions, Support or Gifts, or Payments on Behalf of a Family Member	<ul style="list-style-type: none"> • If any family member regularly receives any contributions, gifts, or payments on their behalf by organizations or persons outside of the household, copies of checks or evidence of payment, such as a signed and dated letter from the person who is providing the contributions, support or gifts. 	<ul style="list-style-type: none"> • Person who is providing the contributions, support or gifts.

**PHILADELPHIA ASSET AND
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Income/Benefit/Expense Received	What to Send to PAPMC	Where to Obtain Verification
Trust Funds	<ul style="list-style-type: none"> Account statements or financial statements completed by a financial institution or broker. 	<ul style="list-style-type: none"> Agency who is holding the funds, i.e., bank or other financial institution.
Zero Income Individual	<ul style="list-style-type: none"> Each adult in the family who is zero income is required to complete, sign, and date the Zero Income Questionnaire and Self Certification Form and the Unemployed/Non-Employed Affidavit. A zero income individual is one who does not receive any income, contributions, and/or benefits on his/her own behalf or on behalf of another individual in the family. Zero income individuals must report changes in income or benefits, within 15 calendar days of the change. 	<ul style="list-style-type: none"> Zero income family member.
Zero Income Family*	<ul style="list-style-type: none"> If no family member receives any income, all adult household members must complete a Zero Income Questionnaire and Self Certification Form and a Unemployed/Non-Employed Affidavit. If there are children in the family and both parent/legal guardians do not live in the household: verification from Family Court that child support is not paid. Verification of termination of earned income, unemployment benefits and/or other unearned income or benefits, if applicable. Zero income households must report changes in income or benefits, within 15 calendar days of the change. 	<ul style="list-style-type: none"> All adults in the zero income family.
Assets	<ul style="list-style-type: none"> Checking Account: 6 months of bank statements Savings Account: Current bank statement with the current balance Prepaid Debit Cards (ACCESS, EPPI, Direct Express): ATM Balance receipt reflecting current balance Current IRA, pension, mutual fund, stock or investment account statements Current Life insurance policy statement (only whole life insurance is an asset) Real estate: most recent mortgage statement, tax assessment for the property, appraisal for the property, realtor information if applicable 	<ul style="list-style-type: none"> Statements and records from the financial institution where the asset is held Mortgage statement from the bank holding the mortgage
Unreimbursed Medical Insurance Premiums: only if the head of household, co-head and/or spouse is elderly (at least 62 years of age) or disabled	<ul style="list-style-type: none"> Benefit letter showing deduction of health insurance premiums and/or insurance bills indicating premiums paid. 	<ul style="list-style-type: none"> Company providing the insurance.

PHILADELPHIA ASSET AND PROPERTY MANAGEMENT CORPORATION (PAPMC)

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Full-Time Student Status for Adults (18 years old or older) Other Than the Head of Household, Spouse, or Co-Head	<ul style="list-style-type: none"> • School records, transcripts, letter from the school administration verifying full-time student status. 	<ul style="list-style-type: none"> • School administration office.
Child Care Expenses	<ul style="list-style-type: none"> • Contracts with provider, receipts showing payments • Canceled checks 	<ul style="list-style-type: none"> • Child care provider

*A zero income family is one where no family member receives any income, contributions and/or benefits on their own behalf or on behalf of another individual in the family. This includes, but is not limited to:

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| <ul style="list-style-type: none"> • Employment Income • Unemployment or Worker's Compensation • Public Assistance (TANF) • Social Security, SSI, SSP • Child Support • Alimony • Pension or Annuity | <ul style="list-style-type: none"> • Veteran's Benefits • Gifts or Contributions, i.e., assistance in paying for utilities, groceries or any other household expenses • Military Pay • Government Grants • Trust Funds |
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