



**HUD EMERGENCY HOMEOWNERS' LOAN PROGRAM –  
SPOUSE AFFIDAVIT, NO W-2 EARNINGS**

**NOTICE:** Completion of this No W-2 Earnings Affidavit is a condition of participation in the Emergency Homeowners' Loan Program (EHLN) for any EHLN Pre-Applicant or Co-Applicant who files their taxes jointly if: (1) the spouse with whom the Pre-Applicant or Co-Applicant filed jointly did not have any W-2 earnings the year used to determine the Pre-Applicant's Pre-Event Income; and (2) that spouse is not listed on the Pre-Applicant's 1<sup>st</sup> lien mortgage loan documents. **Please read the Privacy Act Statement on page 2 before completing this No W-2 Earnings Affidavit.**

The Department of Housing and Urban Development is prohibited by statute, regulation, and/or program rules from providing EHLN emergency assistance on behalf of any person who does not meet minimum program requirements. No person required to complete this affidavit shall be eligible to receive emergency assistance under the Emergency Homeowners' Loan Program if such person cannot certify to all of the statements included in this document.

Name of EHLN Pre-Applicant: \_\_\_\_\_

Last four digits of EHLN Pre-Applicant's Social Security Number: \*\*\*-\*\*-\_\_\_\_\_

Name of Co-Applicant (if completing this affidavit): \_\_\_\_\_

Last four digits of Co-Applicant's Social Security Number (if completing this affidavit):

\*\*\*-\*\*-\_\_\_\_\_

**I certify, under penalty of perjury, that my spouse, with whom I jointly filed my (year) \_\_\_\_\_ Federal tax return, did not have any W-2 earnings in that tax year.**

**By signing below, I understand that any false statement made in this No W-2 Earnings Affidavit, or otherwise made by me in connection with the application to participate in the EHLN may result in fines or imprisonment of up to five (5) years, or both, under 18 U.S.C. § 1001, that I may also be subject to civil and/or administrative penalties or sanctions, and that HUD may pursue any available penalty, civil or criminal, to the fullest extent of the law.**

**By signing below, I certify, under penalty of perjury, that, to the best of my knowledge and belief, the information I have provided in this affidavit is true, complete, and correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

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**PRIVACY ACT STATEMENT**

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Purpose: By signing this No W-2 Earnings Affidavit, you are authorizing HUD, directly or through its agents, to request income information from such sources necessary to verify your income, employment status and such other information necessary to ensure that your income should not be included when determining whether you are eligible for the federal benefits to be derived under the EHLF.

Uses of Information to be Obtained: HUD is required to protect the income and employment information it obtains in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. HUD may disclose information (other than tax return information) for certain routine uses, such as to other government agencies for law enforcement purposes or unemployment/income verification purposes. Any persons engaging in unauthorized disclosures or improper uses of information obtained for the purposes described above may be subject to penalties.