INSTRUCTIONS

In the certification below, identify the household member who meets the proof of citizenship or proof of “qualified alien” requirement. To complete this form, check box a response for each question outlined below.

NY RISING RESPECTS YOUR PRIVACY and does not intend to provide any information regarding your household income to any outside parties which are not critical to the income verification process, including credit bureaus, federal or state tax agencies or any private lenders.


I certify that, as of the date of my application, at least one member of my qualifying household is either a:

______ U.S. Citizen OR
______ “Qualified Alien”

Qualified aliens are defined in 8 U.S.C. § 1641 and include:

1. Legal permanent residents, often referred to as “green card holders” (8 U.S.C. §1641(b)(1))
2. Refugees pursuant to the Immigration and Naturalization Act (INA) §207 (see 8 U.S.C. §1641(b)(3))
3. Individuals granted asylum pursuant to INA §208 (see 8 U.S.C. §1641(b)(2))
4. Individuals granted a “withholding of deportation” pursuant to former INA §243(h) (repealed 4/1/97), or persons granted a “withholding of removal” pursuant to the successor provision INA §241(b)(3) (8 U.S.C. §1641(b)(5), which governs removal/exclusion proceedings commenced after April, 1997)
5. Parolees for a year or more under INA §212(d)(5) (8 U.S.C. §1641(b)(4))
7. Cuban or Haitian entrants (8 U.S.C. §1641(b)(7))
8. Battered spouses and children of US Citizens or legal permanent residents, who have pending or approved “VAWA self-petitions” or I-130 family petitions (8 U.S.C. §1641(c))

AND

______ An applicant has provided one of the following sources of documentation:
• Birth Certificate
• US Passport
• New York State Enhanced Driver’s License
• Social Security Card
• Certificate of Naturalization
• Certificate of Citizenship
• Public records should include the applicant’s name, date of birth, and place of birth. Examples include:
  i. Baptism certificate
  ii. Hospital birth certificate (often shows baby’s footprints)
  iii. U.S. Census record
  iv. Early school records
  v. Family Bible record
  vi. Doctor’s records of post-natal care
  vii. Court Records
• Permanent Resident Card/Green Card

AND

_______ The applicant is the legal guardian, custodian, or caretaker of the aforementioned US Citizen or “qualified alien” and that the applicant will continue to serve as the guardian, custodian, caretaker of the same so that the benefit may be facilitated to an eligible beneficiary.

By executing this Eligibility Certification, I, a representative of a household, acknowledge and understand that Title 18 United States Code Section 1001: (1) makes it a violation of federal law for a person to knowingly and willfully (a) falsify, conceal, or cover up a material fact; (b) make any materially false, fictitious, or fraudulent statement or representation; or (c) make or use any false writing or document knowing it contains a materially false, fictitious, or fraudulent statement or entry, to any branch of the United States Government; and (2) requires a fine, imprisonment for not more than five years, or both, for any violation of such Section.

By executing this Eligibility Certification, I, applicant, acknowledge and understand that Section 189 of the New York State Finance Law: (1) makes it a violation of state law to knowingly present or cause to be presented to any employee, officer or agent of the State of New York (including any division or public benefit corporation) (a) a false or fraudulent claim for payment or approval; or (b) to use or cause to be made or use a false record or statement to get a false or fraudulent claim paid or approved by the State of New York. Persons who violate this Section may be liable for a civil penalty of not less than $6,000 and not more than $12,000, plus three times the amount of all damages, including consequential damages, sustained because of their action as well as costs incurred to recover any such penalties or damages.

OWNER(S):

__________________________________________
Signature Date

__________________________________________
Print Name

__________________________________________
Signature Date

MHCR ZD_01

FEBRUARY 1, 2017 _ VERSION 1.0