SELF-EMPLOYMENT CERTIFICATION	
TENANT/APPLICANT:	DATE:
PROPERTY NAME:	
Business Name	
Business Address	
Date Business Opened	
Have operations been continuous?	Yes No No
Type of Business	
income tax return for the prior calendar \$ I certify that the complete to the best of my knowledge. I and may be subject to criminal penalties Check all that apply:	anation of how anticipated income was calculated if less than tax return
I hereby certify that the information provide	ed is true and complete to the best of my knowledge.
,, p.o p.o	1
SIGNATURE OF APPLICANT/TENAN	T DATE