



ZERO INCOME HOUSEHOLD FORM

I _____
(Name of Parent/Guardian/Head of Household)

of _____
(Address)

hereby declare that I belong to a household to which there are **NO** employed members.

Declared by the said _____
Name of Declarant Signature

in the presence of _____
Name of the Justice of the Peace

Signature of the Justice of the Peace

Affix Stamp/Seal

Dated on the _____ (Day) of _____ (Month) _____ (Year).

Name of Applicant.....TRN of Applicant.....