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WEBCAST HANDOUT

Farm Work Household Certification
FARMWORKER HOUSEHOLD INITIAL CERTIFICATION
(For properties with a Commission Farmworker Housing Commitment)

Property Name: ________________________________  Unit: ________________

Head of Household Name: ________________________________

Requirement for Farmworker Household:
A Household that has earned at least $3,000 per year from Farm Work.

Farm Work Definition:
Services in connection with cultivating the soil, raising or harvesting, or in catching, netting, handling, planting, drying, packing, grading, storing, or in preserving in its unmanufactured state any agriculture or aquaculture commodity, or delivering to storage, market, or a carrier for transportation to market or to processing any agriculture or aquaculture commodity; or working in a processing plant and directly handling agriculture or aquaculture product. Certain classes of employment in food processing plants may not be eligible for housing in this property.

If your Household does NOT meet the Farmworker Household requirement described above, does your Household meet one of the “Exceptions” listed in the instructions for this form?
☐ Yes  ☐ No

List members of your household that received income from Farm Work during the previous 12 months:

<table>
<thead>
<tr>
<th>Hshld Mbr</th>
<th>Name</th>
<th>Type of Farm Work</th>
<th>Employer Name</th>
<th>Annual Farm Work Income</th>
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</table>

Total: $ __________

How much Farm Work income does your household anticipate earning in the next 12 months? $ __________

Will the primary occupation of at least one member of your Household be as a Farm Worker during the next 12 months? ☐ Yes  ☐ No

I hereby certify that the information provided above is complete and correct:

________________________________________  ____________________________  __________
Head of Household Signature  Print Head of Household Name  Date

Property manager must verify Farmworker status using employment verification(s), W-2(s) and/or tax return(s).

NOTE: Section 1001 of Title 18 of U. S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.
FARM WORK W-2 CERTIFICATION
(Use at Initial Certification)

Property Name: _____________________________ Unit: ____________

Definition of Farm Work: Services in connection with cultivating the soil, raising or harvesting, or in catching, netting, handling, planting, drying, packing, grading, storing, or in preserving in its unmanufactured state any agriculture or aquaculture commodity, or delivering to storage, market, or a carrier for transportation to market or to processing any agricultural or aquacultural commodity; or working in a processing plant and directly handling agricultural or aquacultural product.

Certain classes of employment in food processing plants may not be eligible for housing in this property.

I certify under the penalty of perjury that the attached annual income verification(s) and W-2’s represent my total earned income for calendar year ______________.

I understand that I am also required to disclose all my previous income from the past twelve months on the Rental Eligibility Application and all expected sources of income over the next twelve months to income qualify for this tax credit financed housing.

_________________ Applicant/Resident Signature _______________ Print Applicant/Resident Name _______________ Date _______________

_________________ Witness Signature _______________ Print Witness Name _______________ Date _______________
The information needed to complete this form will be found on the individual Farm Work Household Certifications completed at the time of move-in. Complete a line for each member of the household that received farm work income. See instruction sheet for specific directions including how to e-mail your completed report to WSHFC.

**FARM WORK MOVE-IN REPORT**

Property Name: ___________________________

OID/OAR#: ___________________________

No. of units at property: ___________________________

No. of units with Farm Work commitments: ___________________________

County: _____________

Reporting Period: January 1 - December 31

Prepared by: ___________________________

Telephone: ___________________________

<table>
<thead>
<tr>
<th>Unit Number</th>
<th>Household Member(s)</th>
<th>Move-In Date</th>
<th>Move-Out Date</th>
<th>Type of Farm Work</th>
<th>Employer</th>
<th>Comments</th>
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<tbody>
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Farm Work Move-In Report Instructions

**Purpose of report:** Properties who provide Commission Farm Work Commitment units need to complete this form for every Farm Work qualified household that moves-in during the calendar year. Most of the information needed to complete this report can be found on the *Farm Work Household Initial Certification and Instructions* form that is completed when a new Farm Work Household moves-in to the property. This report will provide the Commission with information about the population served by the Farm Work Commitment and their occupation. The report for the previous calendar year is due on January 31st.

**Instructions by Column on Report**

1. List each qualifying household in sequential order by Unit.* This report is for the calendar year indicated on the report (January 1 and December 31) and is due January 31 each year.

   * Some units may be listed more than once if more than one household member is involved in Farm Work. Some units may be listed more than once if more than one Farm Work household moves into the unit during the reporting year.

2. List household member(s) who are involved in Farm Work. Please use a separate line for each household member involved in Farm Work.

3. List household move-in date. mm-dd-yy

4. List household move-out date. mm-dd-yy

5. List "Type of Farm Work" for each household member that is employed in Farm Work. This entry should correspond to the information found on the *Farm Work Household Initial Certification and Instructions* form this household completed at move-in.

6. List the "Employer for each household member that is employed in Farm Work. This entry should correspond to the information found on the *Farm Work Household Initial Certification and Instructions* form this household completed at move-in.

7. List any comments you may have about the Farm Work Commitment qualification for this household or household member.

When report is completed, please save the file as your property OID# and put an FW at the end.

   ex.: 99-23M FW

E-mail your completed report to: compreport@wshfc.org

Please put your file number (ex.: 99-23M FW) in the subject line.

Please send a hard copy of this report with your Table1/PartB.