Additional Employment - Tax Credit Household Eligibility Application (HEA) (Optional – Use only if more space is needed for Page 5 of the HEA form)

PROPERTY NAME					UNIT	UNIT NUMBER		NO. OF BEDROOMS
HOUSEHOLD (HH) NAME						CURRENT HH SIZE		
PART 3: CURRENT EMPLOYMENT INFORMATION (ADDITIONAL EMPLOYMENT)								
HH #	HOUSEHOLD MEMBER NAME		JOB TITLE			D		DATE HIRED (mm/dd/yyyy)
EMPLOYER NAME			CONTACT PERSON			EMPLOYER EMAIL ADDRESS		
EMPLOYER ADDRESS		CITY STAT		STATE	ZIP CODE		EMPLOYER PHONE #	
SALAI	SALARY PAY FREQUENCY Hourly Weekly Every 2 weeks Twice a month \$ Monthly Yearly Other:							WORK HOURS PER WEEK
HH # HOUSEHOLD MEMBER NAME				JOB TITLE				DATE HIRED (mm/dd/yyyy)
EMPLOYER NAME				TACT PERSON		EMPLOYER EMAIL ADDRESS		
EMPLOYER ADDRESS		CITY ST.		STATE	ZIP CODE		EMPLOYER PHONE #	
			/eekly Every 2 weeks Twice a mont Yearly Other:			month	WORK HOURS PER WEEK	
HH #	HOUSEHOLD MEMBER NAME			JOB TITLE		1		DATE HIRED (mm/dd/yyyy)
EMPLOYER NAME			CONTACT PERSON			EMPLOYER E		MAIL ADDRESS
EMPLOYER ADDRESS			СІТҮ	CITY STA		ZIP CODE		EMPLOYER PHONE #
SALARY PAY FREQUENCY Hourly S Monthly		Hourly W	Weekly Every 2 weeks Twice a month Yearly Other:				WORK HOURS PER WEEK	