



SC HTF-19C Certification of Assets Disposed

SCSHFDA, 300-C Outlet Pointe Blvd., Columbia, SC 29210, (803) 896-9001 www.schousing.sc.gov

SC HTF Applicant Information:

Date: _____ SC HTF Award #: _____

SC HTF Applicant(s) Name: _____

SC HTF Property Address: _____

I/We certify that during the 2-year (24 month) period preceding the effective date of my income certification or recertification of eligibility for program participation, I/we **have** ☐ **have not** ☐ disposed of more than \$1,000 in assets for less than fair market value.

If assets were disposed of for less than fair market value, describe:

Description of Asset:	Date of Disposition:	Amount Received:
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Total: _____

Signature of Applicant(s):

_____ Date: _____

_____ Date: _____

Note: Section 101 of Title 18 of the US Code states that a person is guilty of a felony for knowingly and willing making false or fraudulent statements to any department of the United States Government.