

**Dauphin County Community Development Block Grant  
Income Survey Form  
Effective 6/15/2023**

**PLEASE READ INSTRUCTIONS BEFORE FILLING IN THE FORM**

Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

1. How many FAMILIES currently reside at this address? \_\_\_\_\_

**Family Detail**

Family #1: family size: \_\_\_\_\_ No. female \_\_\_\_\_ No. male \_\_\_\_\_

Family #2: family size: \_\_\_\_\_ No. female \_\_\_\_\_ No. male \_\_\_\_\_

Family #3: family size: \_\_\_\_\_ No. female \_\_\_\_\_ No. male \_\_\_\_\_

*Continue on back, if needed.*

**Total household members (All family members combined): \_\_\_\_\_ (This is the number that must be circled below on the table)**

2. Household Income:

**Step 1.** Choose the column and circle the number that matches the number of persons living at this address.

**Step 2.** Right below the **same column** where you have circled the number of the persons, choose and circle the number that is closest to your total household Income. **Do not circle multiple incomes, you must circle only one income level below the number of persons circled.**

Dauphin County Eff. 6/15/2022	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PERSON	8 PERSON
<b>Very Low</b>	Less than 34,950	Less than 39,950	Less than 44,950	Less than 49,900	Less than 53,900	Less than 57,900	Less than 61,900	Less than 65,900
<b>Extremely Low</b>	Less than 21,000	Less than 24,000	Less than 27,000	Less than 30,000	Less than 35,140	Less than 40,280	Less than 45,420	Less than 50,560
<b>Low Income</b>	Less than 55,900	Less than 63,900	Less than 71,900	Less than 79,850	Less than 86,250	Less than 92,650	Less than 99,050	Less than 105,450
<b>Above Income</b>	More than 55,900	More than 63,900	More than 71,900	More than 79,850	More than 86,250	More than 92,650	More than 99,050	More than 105,450

3. Please include the number of persons of the racial group to which you belong, if there is more than racial group, please specify the number of each racial group:

Race	Hispanic?	Race	Hispanic?
( ) American Indian or Alaska Native		( ) American Indian or Alaska Native and White	
( ) Asian		( ) Asian and White	
( ) Black or African American		( ) American Indian or Alaska Native and Black or African American	
( ) White		( ) Other ( ) Russian	

4. How many elderly (over 62) are there in the house? \_\_\_\_\_
5. Female head of household, circle the answer? **Yes** **No**
6. Number of Disabled? \_\_\_\_\_
7. Owner? \_\_\_\_\_ Renter? \_\_\_\_\_
8. This project may produce jobs. Would you like to be contacted in the event there are job openings, circle the answer? Yes \_\_\_\_\_ No \_\_\_\_\_ Phone Number \_\_\_\_\_

**Important:** The information on this form is strictly confidential and will not be released to a third party; it is not a public record.

**I hereby certify that the information provided here is true and correct, and understand any falsification of any of the information provided here could subject me to disqualification from participation and punishment under the law.**

\_\_\_\_\_  
Signature of the person providing the information

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the surveyor

\_\_\_\_\_  
Date