



Please upload this form directly to your Blaine County Housing Authority application.

AFFIDAVIT OF RETIREMENT

Name: _____

Current Age: _____

Years worked in Blaine County full-time (defined as 30+ hours a week / 1,500+ hours a year). For example, 1992-2002:

Date of retirement or switch to part-time employment: _____

Employer(s) Name(s): _____

Position(s): _____

Was your employment physically located within Blaine County, ID? ____ Yes ____ No

Was the Employer(s) business activity primarily located within Blaine County, ID? ____ Yes ____ No

Have you lived in Blaine County continuously since ending full-time employment? ____ Yes ____ No

Please provide any additional, relevant information:

I attest that the information herein is true and accurate.

Signature _____ Date _____

Upload this signed form to your Blaine County Housing Authority housing application. Please don't leave portions of this form blank. Put N/A if not applicable.

Questions? Call 208-788-6102 or email info@bcoha.org

THANK YOU!