□ In	HOME PROGR. CERT itial Certification   I	te: Y)				
_			DEVELOPM			
Property	Name:			Co	unty:	
Address:				Unit Nun	nber:	# Bedrooms:
		PART II. HO	USEHOLD C	OMPOSI	ΓΙΟΝ	
HH Mbr #	Last Name	First Name & Middle Initial	Relationship of House HEA	ehold	Date of Birth (MM/DD/YYYY)	Social Security or Alien Reg. No.
2						
3						
5						
6						
7						
	PART III CRO	OSS ANTICIPATED	ANNIIAI IN	ICOME (I	ISE ANNITAL A	MOLINTS)
HH Mbr #	(A) (B) Employment or Wages Soc. Security/Pen		)	(C) Public Assistance		(D) Other Income
TOTALS	\$	\$		\$		\$
	ls from (A) through (D),				INCOME (E):	\$
					, , ,	φ
11-1-13	(F)		INCOME FR		TS	T)
Hshld Mbr #	(F) Type of Asset	(G	)	OM ASSE (H) Cash Value		(I) Annual Income from Asset
	. ,	(G	)	(H)		( )
	. ,	(G	)	(H)		* /
	. ,	(G C/	) I (	(H)		Annual Income from Asset
Mbr#	Type of Asset	TOTAL	S: \$	(H)		( )
Mbr #	. ,	(G C/	S: \$	(H) Cash Value		Annual Income from Asset
Mbr #  Tota If (H)	Type of Asset	TOTAL Passbook F X 2.00	S: \$	(H) Cash Value  = (J)	of Asset	Annual Income from Asset
Mbr #  Tota If (H)	Il Cash Value is over \$5000 \$ reater of the total of column I,	TOTAL Passbook F X 2.00 or J: imputed income	S: \$ Rate % TOTAL INC	(H) Cash Value  = (J) COME FRO	Imputed Income OM ASSETS (K)	Annual Income from Asset  \$ \$ \$
Mbr #  Tota If (H)	Il Cash Value is over \$5000 \$ reater of the total of column I,	TOTAL Passbook F X 2.00	S: \$ Rate % TOTAL INC	(H) Cash Value  = (J) COME FRO	Imputed Income OM ASSETS (K)	Annual Income from Asset  \$ \$
Mbr #  Tota If (H)	Il Cash Value is over \$5000 \$ reater of the total of column I,	TOTAL Passbook F X 2.00 or J: imputed income	S: \$ Rate % TOTAL INC	(H) Cash Value  = (J) COME FRO	Imputed Income OM ASSETS (K)  Pes Add (E) and (K)	Annual Income from Asset  \$ \$ \$
Tota If (H) Enter the gr	Type of Asset  al Cash Value is over \$5000 \$ reater of the total of column I,  (L) Total	TOTAL Passbook F X 2.00 or J: imputed income  Annual Household I  HOUSEHOLD CE etermine maximum income	S: \$ Rate % TOTAL INC Income from RTIFICATIO eligibility. I/we h	(H) Cash Value  = (J) COME FRO all Source ON & SIG	Imputed Income OM ASSETS (K)  PS Add (E) and (K)  NATURES for each person(s) se	\$ \$ \$ \$ t forth in Part II acceptable verification of
Tota If (H) Enter the grant antic moving in. Under penal undersigned	Il Cash Value is over \$5000 \$ reater of the total of column I,  (L) Total  tion on this form will be used to de ipated annual income. I/we agree ties of perjury, I/We certify that	TOTAL Passbook F X 2.00 or J: imputed income  Annual Household I  HOUSEHOLD CE etermine maximum income to notify the landlord immediate the information presented	S: \$ Rate % TOTAL INC Income from RTIFICATIC eligibility. I/we hediately upon any in this Certificate	(H) Cash Value  = (J) COME FRO all Source DN & SIG	Imputed Income OM ASSETS (K)  PS Add (E) and (K)  NATURES  for each person(s) see household moving of the discount of the best	\$ \$ \$ \$ t forth in Part II acceptable verification of

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(Date)

Signature

(Date)

Signature

PART V. DETERMINATION OF INCOME ELIGIBILITY							
TOTAL ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES: From item (L) on page 1 \$	Household Meets Current 80% Median Income Limit: Income Restriction at: \$						
Current Maximum Income Limit per Family Size: \$	☐ 60% ☐ 50% Household Income exceeds 80% at recertification: ☐ Yes ☐ No						
Household Income at Move-in\$	Household Size at Move-in:						
PART	VI. RENT						
Tenant Paid Rent Utility Allowance \$	Rent Assistance:         \$           Other non-optional charges:         \$						
GROSS RENT FOR UNIT: (Tenant Paid Rent plus Utility Allowance plus Rent Assistance & non-optional charges)  \$\$\$\$	Unit Meets						
Maximum Rent Limit for this unit:\$							
PART VII. P	ROGRAM TYPE						
Mark the program(s) listed below (a. through e.) for which this household's unit will be counted toward the property's occupancy requirements. Under each program marked, indicate the household's income status as established by this certification/recertification.							
а. НОМЕ 🗆	b  (Name of Program)						
Income Status	Income Status						
□ ≤ 50% AMGI □ ≤ 60% AMGI							
□ ≤ 80% AMGI	□ □ OI**						
** Upon recertification, household was determined over-income (OI) according to eligibility requirements of the program(s) marked above.							
SIGNATURE OF OWNER/REPRESENTATIVE							
Based on the representations herein and upon the proofs and documentation required to be submitted, the individual(s) named in Part II of this Tenant Income Certification is/are eligible under the provisions of HUD's HOME Program and the Declaration of Covenants, Conditions, and Restrictions (if applicable), to live in a unit in this Project.							
SIGNATURE OF OWNER/REPRESENTATIVE DATE							

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# INSTRUCTIONS FOR COMPLETING THE TENANT INCOME CERTIFICATION (ver. 9/08)

This form is to be completed by the owner or its authorized representative.

### Part I - Development Data

Check the appropriate box for Initial Certification (move-in), Recertification (annual recertification), or Other. If Other, designate the purpose of the recertification (i.e., a unit transfer, a change in household composition, or other state-required recertification).

Move-in Date Enter the date the tenant has or will take occupancy of the unit.

Effective Date Enter the effective date of the certification. For move-in, this should be the

move-in date. For annual recertification, this effective date should be no later

than one year from the effective date of the previous (re)certification.

Property Name Enter the name of the development.

County Enter the county in which the building is located.

Address Enter the address of the building.

Unit Number Enter the unit number.

# Bedrooms Enter the number of bedrooms in the unit.

#### Part II - Household Composition

List all occupants of the unit. State each household member's relationship to the head of household by using one of the following coded definitions:

H - Head of Household S - Spouse

Enter the date of birth and social security number or alien registration number for each occupant.

If there are more than 7 occupants, use an additional sheet of paper to list the remaining household members and attach it to the certification.

#### Part III - Gross Anticipated Annual Income

## See HUD Handbook 4350.3 for complete instructions on verifying and calculating income, including acceptable forms of verification.

From the third party verification forms obtained from each income source, enter the gross amount anticipated to be received for the twelve months from the effective date of the (re)certification. Complete a separate line for each income-earning member. List the respective household member number from Part II.

Column (A) Enter the annual amount of wages, salaries, tips, commissions, bonuses and other income from

employment; distributed profits and/or net income from a business.

Column (B) Enter the annual amount of Social Security, Supplemental Security Income, pensions, military

retirement, etc.

Column (C) Enter the annual amount of income received from public assistance (i.e., TANF, general assistance,

disability, General Relief, APA, Senior Care, etc.).

Column (D) Enter the annual amount of alimony, child support, unemployment benefits, PFD, or any other

income regularly received by the household.

Column (E) Add the totals from columns (A) through (D), above. Enter this amount.

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#### Part IV - Income from Assets

See HUD Handbook 4350.3 for complete instructions on verifying and calculating income from assets, including acceptable forms of verification. (HOME program requires source documents for verification.)

From the third party verification forms obtained from each asset source, list the gross amount anticipated to be received during the twelve months from the effective date of the certification. List the respective household member number from Part II and complete a separate line for each member.

Column (F) List the type of asset (i.e., checking account, savings account, money market, whole life insurance,

real estate, etc.)

Column (G) Enter C (for current, if the family currently owns or holds the asset), or I (for imputed, if the family

has disposed of the asset for less than fair market value within two years of the effective date of

(re)certification.

Column (H) Enter the cash value of the respective asset.

Column (I) Enter the anticipated annual income from the asset (i.e., savings account balance multiplied by the

annual interest rate).

**TOTALS** Add the total of Column (H) and Column (I), respectively.

If the total in Column (H) is greater than \$5,000 you must do an imputed calculation of asset income. Enter the Total Cash Value, multiply by 2% and enter the amount in (J), Imputed Income.

Enter the greater of the total in Column (I) or (J). Column (K)

(L) Total Annual Household Income From all Sources

Add (E) and (K) and enter the total.

#### HOUSEHOLD CERTIFICATION AND SIGNATURES

After all verifications of income and/or assets have been received and calculated, each household member age 18 or older must sign and date the Tenant Income Certification. For move-in, it is recommended that the Tenant Income Certification be signed no earlier than 5 days prior to the effective date of the certification.

#### Part V – Determination of Income Eligibility

Total Annual Household Income from all Sources

Enter the number from item (L).

Current Income Limit per Family Size

Enter the Current Maximum Move-in Income Limit for the household size.

Household income at move-in Household size at move-in

Fill this in for recertifications, only. Enter the household income from the move-in certification. On the adjacent line, enter the number of household members from the

move-in certification.

Household Meets Income

Restriction at

Check the appropriate box for the income restriction that the household meets

according to what is required by the set-aside(s) for the project.

Current 80% Income Limit For recertifications only. Obtain HUD current 80% AMI Income Limit enter the

> total. Below, indicate whether the household income exceeds that total. If the Gross Annual Income at recertification is greater than 80% of the current AMI, then the owner must adjust the tenants rent in accordance with the HOME program. The unit

the tenant occupies is still considered a HOME unit.

Owners with "floating" home units must rent the next available unit of comparable

or larger size to a HOME eligible household.

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#### Part VI - Rent

Tenant Paid Rent Enter the amount the tenant pays toward rent (not including rent assistance payments

such as Section 8).

Rent Assistance Enter the amount of rent assistance, such as Section 8 HAP, if any.

Utility Allowance Enter the utility allowance. If the owner pays all utilities, enter zero.

Other non-optional charges Enter the amount of <u>non-optional</u> charges, such as mandatory garage rent, storage

lockers, charges for services provided by the development, etc.

Gross Rent for Unit Enter the total of Tenant Paid Rent plus Subsidy plus Utility Allowance plus other

non-optional charges.

Maximum Rent Limit for this unit Enter the maximum allowable gross rent for the unit. (Verify HOME Limit eff. date)

Unit Meets Rent Restriction at Check the appropriate rent restriction that the unit meets according to what is

required by the set-aside(s) for the project.

#### Part VII - Program Type

Mark the program(s) for which this household's unit will be counted toward the property's occupancy requirements. Under each program marked, indicate the household's income status as established by this certification/recertification. If the property does not participate in another other housing program, leave that section blank.

HOME If the property participates in the HOME program and the unit this household will occupy will count towards the

HOME program set asides, mark the appropriate box indicting the household's designation.

Other If the property participates in any other affordable housing program, complete the information as appropriate.

#### SIGNATURE OF OWNER/REPRESENTATIVE

It is the responsibility of the owner or the owner's representative to sign and date this document immediately following execution by the resident(s).

The responsibility of documenting and determining eligibility (including completing and signing the Tenant Income Certification form) and ensuring such documentation is kept in the tenant file is extremely important and should be conducted by someone well trained in HOME program compliance.

These instructions should not be considered a complete guide on HOME program compliance. The responsibility for compliance with federal program regulations lies with the owner of the building(s).

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