☐ Initial Cartification ☐ Pagartification ☐ Other Move-in Da							te:		
<u>ы</u> 11	nuai Cerunicauon 🗀 N				ENT DAT	(MM/DD/YYY	(Y)		
PART I - DEVELOPMENT DATA Property Name: County:					ounty:	BIN#	:		
Address						nber:			
ridaress	·	DADEH	HOUGH	•			ii Bedrooms		
НН		First Name & Mi		EHOLD C Relationship		Date of Birth	F/T Student	Social Security No	
Mbr #	Last Name Initial		date	of Household		(MM/DD/YYYY)	(Y or N)	or Alien Reg. No.	
1				HEAD					
2									
3									
4									
5									
6									
7									
НН	(A)	III. GROSS AN	(B)	INCOME	(USE AN	NUAL AMOUN	TS)	(D)	
Mbr #	Employment or Wages	Soc. Se	Soc. Security/Pensions		(C) Public Assistance		Other Income		
	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2								
TOTALS	¢	•			¢		\$		
TOTALS \$ \$ \$ Add totals from (A) through (D), above					\$ TOTAL INCOME (E):				
Add tota	als from (A) through (D), a	ibove			TOTAL	INCOME (E).	\$		
		PART		COME FR					
Hshld Mbr #	(F) Type of Asset		(G) C/I				(I) Annual Income from Asset		
IVIOI #	Type of Asset		C/1	Casii value of Asset		Aimuai income from Asset			
		TO	TALC.	¢			¢		
			ΓΟΤΑLS: \(\) assbook Rate				\$		
	f over \$5000 \$	X) Imputed Income	\$		
Enter the g	greater of the total of column I, o	or J: imputed incom	me T	OTAL INC	OME FRO	OM ASSETS (K)	\$		
	(L) Total Ann	ual Household	Income	from all S	Sources [A	Add (E) + (K)]	\$		
		HOUSEHOLI) CERT	IFICATIO	N & SIG	NATURES			
The information on this form will be used to determine maximum income eligibility. I/we have provided for each person(s) set forth in Part II acceptable verification of current anticipated annual income. I/we agree to notify the landlord immediately upon any member of the household moving out of the unit or any new member moving in. I/we agree to notify the landlord immediately upon any member becoming a full time student.									
undersigned	alties of perjury, I/we certify that the diffurther understands that providing of the lease agreement.								
Signatur	e.	(Date)		Si	gnature			(Date)	

(Date)

Signature

(Date)

Signature

PART V. DETERMINATION OF INCOME ELIGIBILITY												
				RECERTIFICATION ONLY:								
TOTAL ANNUAL HOUSE	EHOLD INCOME			Current Income Limit x 140%:								
FROM	ALL SOURCES:											
From i	tem (L) on page 1 \$			\$								
				Household Income exceeds 140% at								
				recertification:								
	- u aı a			☐ Yes ☐No								
Current Income Limi	t per Family Size: \$											
Household In	come at Move-in: \$		Household Size at Move-in:									
		PART VI. REN	T									
	\$	TIME VIVILLE	12									
	Tenant Paid Rent		Rent Assistance: \$									
-	Utility Allowance \$		Other non-optional charges:	\$								
GROSS R	ENT FOR UNIT:		Unit Meets Rent Restriction at:									
(Tenant paid rent plus Uti	ility Allowance &											
other non-	-optional charges) \$											
		_										
Maximum Rent I	Limit for this unit: \$											
	D	ART VII. STUDENT	CTATIC									
	1	ARI VII. STUDENT	SIATUS									
				*Student Explanation:								
ARE ALL OCCUPANTS FUI	LL TIME STUDENTS?		student explanation*	1 TANF assistance								
		(also a	ttach documentation)	2 Job Training Program								
□ yes □ no				3 Single parent/dependent child								
		Enter		4 Married/joint return								
		1-4										
	т	A DE VIII DOCCDA	N. (DY/DE)									
		PART VIII. PROGRA										
				oward the property's occupancy								
requirements. Under each p	orogram marked, indicate t	he household's income sta	ntus as established by this cer	tification/recertification.								
	L. HOLE E		1 41100 [
a. Tax Credit □	b. HOME □	c. Tax Exempt □	d. AHDP □	e [Name of Program]								
See Part V above.	Income Status	Income Status	Income Status	(Name of Program)								
See Ture Vulsove.	$\square \leq 50\%$ AMGI	□ 50% AMGI	□ 50% AMGI	Income Status								
	□ ≤ 60% AMGI	□ 60% AMGI	□ 80% AMGI	<u> </u>								
	□ ≤ 80% AMGI	□ 80% AMGI	□ OI**									
	□ OI**	□ OI**		□ OI**								
** Upon recertification	household was determine	 ed_over-income (OI) accor	 ding to eligibility requiremen	its of the program(s) marked above.								
opon recertification	, nousenora was acterimine	ou over meome (or) ueeor	ding to ongionity requiremen	ns of the program(s) marked toove.								
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 Section 42 of the Internal Revenue Code, as amended, and the Land Use Restriction												
Agreement (if applicable), to live in a unit in this Project.												
5 (
SIGNATURE OF OWNER/RI	EPRESENTATIVE	DATE										

INSTRUCTIONS FOR COMPLETING TENANT INCOME CERTIFICATION

This form is to be completed by the owner or an 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 (or equivalent) in which the building is located.

BIN # Enter the Building Identification Number (BIN) assigned to the building (from

IRS Form 8609).

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

A - Adult co-tenant O - Other family member
C - Child F - Foster child(ren)/adult(s)
L - Live-in caretaker N - None of the above

Enter the date of birth, student status, 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 - 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, etc.).

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

regularly received by the household.

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

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.

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, 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.

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

Row (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 <u>must</u> 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 Move-in Income Limit for the household size.

Household income at move-in Household size at move-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

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 Income Limit x 140% For recertifications only. Multiply the Current Maximum Move-in Income Limit by

140% and enter the total. Below, indicate whether the household income exceeds that total. If the Gross Annual Income at recertification is greater than 140% of the

current income limit, then the available unit rule must be followed.

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, if any.

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

Other non-optional charges Enter the amount of non-optional 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 Utility Allowance and other non-optional

charges.

Maximum Rent Limit for this unit Enter the maximum allowable gross rent for the unit.

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 - Student Status

If all household members are full time* students, check "yes". If at least one household member is not a full time student, check "no".

If "yes" is checked, the appropriate exemption <u>must</u> be listed in the box to the right. If none of the exemptions apply, the household is ineligible to rent the unit.

Part VIII - 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 the HOME, Tax-Exempt Bond, Affordable Housing Disposition, or other housing program, leave those sections blank.

Tax Credit See Part V above.

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.

Tax Exempt If the property participates in the Tax Exempt Bond program, mark the appropriate box indicating the household's

designation.

AHDP If the property participates in the Affordable Housing Disposition Program (AHDP), and this household's unit will

count towards the set-aside requirements, 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 tax credit compliance.

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

^{*}Full time is determined by the school the student attends.