ANNUAL INCOME CERTIFICATION/RECERTIFICATION (TO BE COMPLETED BY OWNER/MANAGEMENT)





| TENANT INCOME CERTIFICATION ☐ Initial Certification ☐ Recertification ☐ Other | | | | | | - Mo | ove-in Date | : | |
|--|-----------------------------------|--------------------------------|--------------|--------------|--------------|---------------|---------------------------|---------------------------------|--|
| | | PAR | T I DI | EVELOPME | ENT DA | | M/DD/YYYY |) | |
| Property | Name: | | | _ | Т | ГС #: | | | |
| | | | | City: Sta | | | | | |
| | | | | | Unit Number: | | | | |
| | | - | | | | | | | |
| HH Mbr# | Last Name | First Name & Middle Initial | | | | Gender M/F | Date of Birth (MM/DD/YYYY | F/T Student | Last 4 Digits of Social Security or Alien Reg. No. |
| 2 | | | | пеар | ' | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| НН | (A) | RT III. GROSS AN | NNUAL (B) | INCOME (| USE A | NNUAL A | AMOUNTS | S) | (D) |
| Mbr # | Employment or Wages Soc. Security | | | | | tance | Other Income | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| TOTALS | | | | | | | | | |
| Add totals from (A) through (D), above TOTAL INCOME (E): | | | | | | | | | |
| | | PART | Γ IV. IN | COME FRO | M AS | SETS | <u> L</u> | | |
| HH Mbr# | (F) Type of Asset | | (G) C/I | (H) | | | t | (I) Annual Income from Asset | |
| | V , | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| TOTALS: Enter Column (H) Total Passbook Rate if over \$50,000 \$ X Currently 0.45 % = (J) Imputed Income | | | | | | | | | |
| Enter the g | greater of the total of colum | n I, or J: imputed inco | me T | TOTAL INCO | ME FR | ROM ASSI | ETS (K) | | |
| | (L) Total | Annual Household | d Incom | e from all S | ources | [Add (E | (K) + (K) | | |

| | PART V. DET | TERMINATION OF IN | COME ELIGIBI | LITY | | |
|--|--|--|--|---|--|--|
| | HOLD INCOME ALL SOURCES: tem (L) on page 1 | | Household Meets Income Restriction at: | RECERTIFICATION ONLY: Current Income Limit x 140%: | | |
| Current Income Limi | t per Family Size: | | ☐ 60% ☐ 50% ☐ 40% ☐ 30% ☐ Other% | Household Income exceeds 140% at recertification: ☐ Yes ☐ No | | |
| Household Inc | ome at Move-in: | Household Size at Move-in: | | | | |
| PART VI. RENT | | | | | | |
| | nant Paid Rent Utility Allowance | Rent Assistance: Other non-optional charges: | | | | |
| (Tenant paid rent plus Uti | ENT FOR UNIT: lity Allowance & optional charges) | Unit Meets Rent Restriction at: 60% 50% 40% 30%% | | | | |
| Maximum Rent I (as of recertificati | cimit for this unit: on effective date) | | | | | |
| | | PART VII. STUDENT | STATUS | | | |
| ARE ALL OCCUPANTS FUL ☐ Yes ☐ No | L TIME STUDENTS? | | student explanation* tach documentation) | *Student Explanation: 1 TANF assistance 2 Job Training Program 3 Single parent/dependent child 4 Married/joint return 5 Former Foster Child | | |
| | | 1-5 | | | | |
| Mark the program(s) listee | | PART VIII. PROGRA | | unted toward the property's occupancy | | |
| 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. | | | | | | |
| | | c. Tax Exempt □ Income Status | d. AHDP □ Income Status | e. Other \(\tau\) | | |
| See Part V above. | | □ ≤ 50% AMGI | | | | |
| ** Upon recertification, household was determined over-income (OI) according to eligibility requirements of the program(s) marked above. | | | | | | |
| PART IX. HOUSEHOLD DEMOGRAPHIC Hill Base Ethnisity Displied? | | | | | | |
| HH Race Code Code 1 2 3 4 5 6 7 | Disabled? (Y/N) 1 2 3 4 5 6 | Race Code White Black/African Americ American Indian/Alas Asian Native Hawaiian/othe Other | ka Native | Ethnicity Code Hispanic or Latino Not Hispanic or Latino | | |
| Choose Not to Disclose | | | | | | |

| | HOUSEHOLD CERTI | FICATION & SIGNATURES | | |
|---|---|---|--|--|
| 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. I/we agree to provide upon request source documents evidencing the income and other information disclosed above. I/we consent and authorize the disclosure of such information and any such source documents to the City, County or IHDA and HUD and any agent acting on their behalf. I/we understand that the submission of this information is one of the requirements for tenancy and does not constitute an approval of my application, or my acceptance as a tenant. | | | | |
| | | | best of my/our knowledge and belief. The g or incomplete information may result in the | |
| Signature | (Date) | Signature | (Date) | |
| Signature | (Date) | Signature | (Date) | |
| | SIGNATURE OF OV | VNER/REPRESENTATIVE | | |
| Income Certification is/are eligible | under the provisions of Section 42 on 1602 Program requirements (if | ation required to be submitted, the ind of the Internal Revenue Code, as amen applicable) to live in a unit in this Pro | | |
| SIGNATURE OF OWNERRED RE | DAIL DAIL | | | |

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).

TC # Enter the Tax Credit Identification Number for the development.

Property 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. Indicate the anticipated income from all sources received by the family head and spouse (even if temporarily absent) and by each additional member of the family age 18 or older. 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 .06% and enter the amount in (J), Imputed Income.

 $Row\left(K\right) \hspace{1cm} \text{Enter the greater of the total in Column (I) or (J)}$

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 | For recertifications, only. Enter the household income from the move-in |
| | Page 5 of 7 |

Household size at 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.

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

Part IX – Household Demographic

Please ask applicant/resident(s) to provide their demographic information and disability status.

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.