Last Name	First Name & Initial	Other* PART I. DEVEL County: Unit Nu PART II. HOUSEHO Middle Relat O	OPMENT DATA	Move-in Date: BIN # BIN # Bedroo N Date of Birth (MM/DD/YYYY)	ms:		
Last Name	P First Name & Initial	County: Unit Nu PART II. HOUSEHO Middle Relat Niddle Relat	Umber:	BIN # BIN # Bedroo N Date of Birth (MM/DD/YYYY)	: ms: F/T Student (circle one) FT / PT / NAP FT / PT / NAP	Last 4 Digits of Social Security No.	
Last Name	P First Name & Initial	County: Unit Nu PART II. HOUSEHO Middle Relat Niddle Relat	Umber:	#Bedroo	ms:	Security No.	
Last Name	P First Name & Initial	Coss Annual Inco (B) Social	umber: DLD COMPOSITIOI tionship to Head of Household Me (Use Annuz	#Bedroo	ms:	Security No.	
Last Name	P First Name & Initial	PART II. HOUSEHO	OLD COMPOSITION tionship to Head of Household OME (USE ANNUA	N Date of Birth (MM/DD/YYYY)	F/T Student (circle one) FT / PT / NAP	Security No.	
Last Name	First Name & Initial	Middle Relat	tionship to Head f Household OME (USE ANNUA	Date of Birth (MM/DD/YYYY)	(circle one) FT / PT / NAP	Security No.	
Last Name	ART III. GRC	DSS ANNUAL INCO (B) Social	ome (Use Annua	(MM/DD/YYYY)	(circle one) FT / PT / NAP	Security No.	
(A)	ART III. GRO	DSS ANNUAL INCO (B) Social	ome (Use Annua	AL AMOUNTS) (C)	FT / PT / NAP		
(A)		(B) Social		(C)	FT / PT / NAP	(D)	
(A)		(B) Social		(C)	FT / PT / NAP	(D)	
(A)		(B) Social		(C)	FT / PT / NAP FT / PT / NAP FT / PT / NAP	(D)	
(A)		(B) Social		(C)	FT / PT / NAP FT / PT / NAP	(D)	
(A)		(B) Social		(C)	FT / PT / NAP	(D)	
(A)		(B) Social		(C)		(D)	
(A)		(B) Social		(C)		(D)	
	Sect	Social	Public		((D)	
	Seci	urity/Pensions		///////////////////////////////////////		(D) Other Income	
					`		
	\$		\$		\$		
				Total Income	(E): \$		
		PART IV	. Assets				
e from Non-necessary Perso					ts has been veri	fied as <i>LESS</i> than or	
					(F) \$		
Part IVB	B. INCOME FR	OM ASSETS - GRE	ATER THAN <u>IMPUTE</u>	D INCOME LIMITATI	<u>on</u>		
rom Non-necessary Persona	al Property (N	NNPP) and Real Pr	operty has been ve	erified as GREATER	than the Imput	ed Income Limitation.	
(G)	(H)	(1)	(1)	(1) (K)		(L)	
Type of Asset	C/D	NNPP / Real/	Cash Value	of Asset A	A/I Annual Income from Asset		
		Tax Relief					
		F	tor Total Income	from all Accete (NA) Ć		
	0				IVI) Ş		
	Ρ.	ART V. IOTAL HO	DUSEHOLD INCOM	IE			
Total Annual	Household	Income from Al	ll Sources [Add (E	E) + (F) OR (E) + (N	√I)] \$		
	Hous	SEHOLD CERTIFIC	ATION & SIGNATU	IRE(S)			
ated annual income. I/we agree	e to notify the	e landlord immediat	tely upon any memb	er of the household		-	
er understands that providing f						-	
	Date		Signature			Date	
	e from Non-necessary Perso PART IVE from Non-necessary Persona (G) Type of Asset Total Annual n this form will be used to deter ated annual income. I/we agre h. I/we agree to notify the landl f perjury, I/we certify that the	e from Non-necessary Personal Property EC Enter PART IVB. INCOME FR from Non-necessary Personal Property (I (G) (H) Type of Asset C/D P Total Annual Household HOUS n this form will be used to determine maximur ated annual income. I/we agree to notify the n. I/we agree to notify the landlord immediat f perjury, I/we certify that the information p er understands that providing false represent i the lease agreement.	PART IVA. INCOME FROM ASSETS - LESS THA e from Non-necessary Personal Property (NNPP), Real Pro <i>EQUAL</i> to the Imput Enter Total of ACTUA PART IVB. INCOME FROM ASSETS - GREA from Non-necessary Personal Property (NNPP) and Real Pr (G) (H) (I) Type of Asset C/D NNPP / Real/ Tax Relief G/D (H) (I) NNPP / Real/ Tax Relief G/D (H) (I) NNP / Real/ Tax Relief G/D (H)	e from Non-necessary Personal Property (NNPP), Real Property, and Federal EQUAL to the Imputed Income Limitati Enter Total of ACTUAL INCOME earner PART IVB. INCOME FROM ASSETS – GREATER THAN IMPUTE from Non-necessary Personal Property (NNPP) and Real Property has been ver (G) (H) (I) Type of Asset C/D NNPP / Real/ Cash Value GO (C/D NNPP / Real/ Cash Value Tax Relief Cash Value Enter Total Income PART V. TOTAL HOUSEHOLD INCOME Total Annual Household Income from All Sources [Add (E HOUSEHOLD CERTIFICATION & SIGNATU In this form will be used to determine maximum income eligibility. I/we have provided for ated annual income. I/we agree to notify the landlord immediately upon any memb h. I/we agree to notify the landlord immediately upon any memb for understands that providing false representations herein constitutes an act of fraud it lease agreement.	PART IV. ASSETS PART IVA. INCOME FROM ASSETS - LESS THAN OR EQUAL TO IMPUTED INCOME LIMIT e from Non-necessary Personal Property (NNPP), Real Property, and Federal Tax Refunds/Credi EQUAL to the Imputed Income Limitation Enter Total of ACTUAL INCOME earned from all Assets PART IVB. INCOME FROM ASSETS – GREATER THAN IMPUTED INCOME LIMITATI (G) (I) (G) (I) Colspan="2">Colspan="2"Colsp	PART IV. Assets PART IVA. INCOME FROM ASSETS - LESS THAN OR EQUAL TO IMPUTED INCOME LIMITATION e from Non-necessary Personal Property (NNPP), Real Property, and Federal Tax Refunds/Credits has been veri <i>EQUAL</i> to the Imputed Income Limitation Enter Total of ACTUAL INCOME earned from all Assets (F) \$ PART IVB. INCOME FROM ASSETS – GREATER THAN IMPUTED INCOME LIMITATION rom Non-necessary Personal Property (NNPP) and Real Property has been verified as <i>GREATER</i> than the Impute (G) (H) (I) (J) (K) Annual (G) (H) (I) (J) (K) Annual (G) (H) (I) (J) (K) Type of Asset A/I Annual C/D NNPP / Real/ Cash Value of Asset A/I Annual Enter Total Income from all Assets (M) \$ PART V. TOTAL HOUSEHOLD INCOME Total Annual Household Income from All Sources [Add (E) + (F) OR (E) + (M)] \$ HOUSEHOLD CERTIFICATION & SIGNATURE(S) In this form will be used to determine maximum inc	

Date

Signature

Date

PART VI. DETERMINATION OF INCOME ELIGIBILITY											
			RECERTIFICATION ONLY:								
	SOURCES: \$	Designated Income Restriction:			Designated Income Limit x 140% (170% for Deep Rent Skewing): \$						
From Part V. Current Income Limit per F	-	 80% 60% 40% 	□ 60% □ 50%			(Designated Income Limit: 20-50 properties use 50%; 40-60 properties use 60%; Average Income Test properties use 60% for all units with income designations that are 60% or Iower and actual unit designation for units at 70% and 80%)					
Household Income a	t Move-in: \$	- 20%				income at recertification:					
Household Size a	t Move-in:	_			🗌 Yes 🗌 N	0					
PART VII. RENT											
Tenant Rent: \$ Unit Meets Rent Restriction at:											
Utilit	y Allowance:	\$			80% 70%						
Renta	al Assistance:	\$			60% 50%						
Other non-optional / mar	\$		Γ	40% 30	%						
Gross Rent for Unit (See Instructions): \$%											
Is the source of Rental Assistance Federal? Yes No If No, what is the source of the assistance?											
 HUD Multi-Family Project-Based Rental Assistance (PBRA) HUD Section 8 Moderate Rehabilitation HUD Project-Based Voucher (HCV-tenant based) HUD Project-Based Voucher (PBV) USDA Section 521 Rental Assistance Program HOME Tenant Based Rental Assistance (TBRA) Other Federal Rental Assistance 											
PART VIII. STUDENT STATUS											
Are all occupants Full-T	If Yes, enter Student Explanation* and attach documentation			Student Explanation: 1. TANF assistance 2. Previously in state foster care system							
Yes	No	Enter 1-5:			 Job Training Program Single parent/dependent child Married/joint return 						
PART IX. PROGRAM TYPE											
Mark the program(s) lister requirements. Under each											
a. Housing Credit 🗌	b. HOME		c. Tax-exempt Housing Bond d		onal HTF 🗌	e 🗌					
See Part VI above.	Income Status:	Income Statu			tatus:	Income Status:					
	 ≤ 50% AMGI ≤ 60% AMGI ≤ 80% AMGI OI** 	≤ 60% AN	 ≤ 50% AMGI ≤ 60% AMGI ≤ 80% AMGI OI** 		Poverty Line 6 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 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.											

Owner/representative Signature