

**TENANT INCOME CERTIFICATION
NEW HOUSEHOLD MEMBER**

New Household Member Move-In Date: _____

PART I - DEVELOPMENT DATA

Property Name: _____ County: _____ BIN #: _____
Address: _____ Unit Number: _____ # Bedrooms: _____

PART II. HOUSEHOLD COMPOSITION

| HH Mbr # | Last Name | First Name & Middle Initial | Relationship to Head of Household | Date of Birth (MM/DD/YYYY) | F/T Student (Y or N) |
|----------|-----------|-----------------------------|-----------------------------------|----------------------------|----------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

PART III. GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)

| HH Mbr # | (A) Employment or Wages | (B) Soc. Security/Pensions | (C) Public Assistance | (D) Other Income |
|--------------|----------------------------|-------------------------------|--------------------------|---------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL | \$ | \$ | \$ | \$ |

Add totals from (A) through (D), above

TOTAL INCOME(E):

\$

PART IV. INCOME FROM ASSETS

| Hshld Mbr # | (F) Type of Asset | (G) C/I | (H) Cash Value of Asset | (I) Annual Income from Asset |
|--|----------------------|------------|---|---------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTALS: | | | \$ | \$ |
| Enter Column (H) Total If over \$5,000 | | \$ _____ X | Passbook Rate 2.00% | = (J) Imputed Income |
| Enter the greater of the total of column I, or J: imputed income | | | TOTAL INCOME FROM ASSETS | |
| (K) | | | \$ | |

(L) Total Annual Household Income from all Sources [Add (E) + (K)]

\$

HOUSEHOLD CERTIFICATION & 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.

Under penalties of perjury, I/we certify that the information presented in this Certification is true and accurate to the best of my/our knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of the lease agreement.

Signature

(Date)

Signature

(Date)

Signature

(Date)

Signature

(Date)

PART V. DETERMINATION OF INCOME ELIGIBILITY FOR NEW HOUSEHOLD MEMBER

TOTAL NEW HOUSEHOLD INCOME
FROM ALL SOURCES:
From item (L) on page 1

\$

New Household Member(s)
Income Qualifies under:

- 50%
- 60%
- Over 60%

CURRENT INCOME LIMIT FOR
NEW HOUSEHOLD MEMBER(S) \$ _____

PART VI. 140 % AVAILABLE UNIT RULE DETERMINATION

| | |
|--|---|
| <p>(M) NEW HOUSEHOLD MEMBER ANNUAL INCOME FROM ALL SOURCES: From item (L) on page 1 \$ _____</p> | <p>(P) Current Household Size : _____</p> |
| <p>(N) CURRENT HOUSEHOLD ANNUAL INCOME FROM ALL SOURCES: From item (L) on page 1 of Current Tenants TIC \$ _____</p> | <p>(Q) Current Income Limit per Family Size: \$ _____</p> |
| <p>(O) Total Combined Income: \$ _____</p> | <p>(R) Current Income Limit x 140%: \$ _____</p> |
| | <p>(S) Household Income exceeds 140% <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |

PART VII. STUDENT STATUS

ARE ALL OCCUPANTS FULL TIME STUDENTS?
 yes no

If yes, Enter student explanation* (also attach documentation)

Enter 1-5 _____

*Student Explanation:
 1 TANF assistance
 2 Job Training Program
 3 Single parent/dependent child
 4 Married/joint return
 5 Previous Foster Care

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.

SIGNATURE OF OWNER/REPRESENTATIVE DATE

INSTRUCTIONS FOR COMPLETING TENANT INCOME CERTIFICATION

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

- **NEW HOUSEHOLD MEMBER FORM IS TO BE USED TO VERIFY ONLY NEW HOUSEHOLD MEMBER(S) INFORMATION. PLEASE ONLY PROVIDE CURRENT HOUSEHOLD INFORMATION WHERE REQUIRED.**

Part I - Development Data

New Household Member Initial Certification:

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

State each new household member's relationship to the head of household by using one of the following coded definitions:

| | |
|--------------------------------|-----------------------|
| 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, and student status 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 New household 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 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

- New Household Member(s) Total Annual Household Income from all Sources Enter the number from item (L).
- Current Income Limit per Family Size (New Household Member(s) only) Enter the Current Income Limit for the new household size.
- 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. If the new household member is over the 60% income and therefore does not qualify to be the last remaining household member mark the over 60% box.

Part VI – 140% Available Unit Rule Determination

- New Household Total Annual Income from all Sources Enter the number from item (L) on page one of this form in box (M)
- Current Household Total Annual Income from all Sources. Enter the number from item (L) on page one of the Current Tenants, Tenant Income Certification form in box (N)
- Current Income Limit x 140% Multiply the Current Maximum Move-in Income Limit by 140% and enter the total. Below, indicate whether the Combined New household income exceeds that total box (O). If the Gross Annual Income is greater than 140% of the current income limit after adding new household member, then the available unit rule must be followed.
- Current Income Limit Current income limit will be based on the new Family Size
- Current Household Size: Add the new household member(s) to current household.

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 must be listed in the box to the right. If none of the exemptions apply, the household is ineligible to rent the unit.

**Full time is determined by the school the student attends.*

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.