HOME TENANT INCOME CERTIFICATION

(Use this Form only for HOME Projects without LIHTC funding)

☐ Initial Certification ☐ Recertification ☐ Other _____

Effective Date: _____

Move-in Date: _____ (MM/DD/YYYY)

PART I - DEVELOPMENT DATA

Property Name: _____ County: _____

Address: _____ Unit Number: _____ # Bedrooms: _____

HH Mbr #	Last Name	First Name & Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YYYY)	Last 4 digits of Social Security Number or Alien Reg. No.
1					
2					
3					
4					
5					
6					
7					
8					

PART II GROSS ANNUAL INCOME

HH Mbr #	(A) Employment or Wages	(B) Soc. Security/Pensions	(C) Public Assistance	(D) Other Income
TOTALS	**$**	**$**	**$**	**$**

Add totals from (A) through (D), above **Total Income (E) =** **$**

PART III. INCOME FROM ASSETS

HH 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 _____ % **(J)**

Current Pass Book Rate:

Imputed Income (J) = **$**

Enter the greater of the total of column I, or J: imputed income **Total Income from Assets (K) =** **$**

Add (E) + (K) **Total Annual Household Income from all Sources (L) =** **$**

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.

My signature on this date certifies the accuracy of the income/assets listed above for the effective date of this Tenant Income Certification. (If signed prior to the effective date, it is my responsibility to report any changes in income or household composition in order to enable management to update the certification with accurate information.)

Resident Signature	Signature Date	Resident Signature	Signature Date
Resident Signature	Signature Date	Resident Signature	Signature Date

HOME 租户收入证明

(仅在无 LIHTC 资金的 HOME 项目中使用此表格)

☐ 初始认证 ☐ 重新认证 ☐ 其他 _____

生效日期：_____

入住日期：_____

（月/日/年）

第一部分 - 项目数据

物业名称：_____ 县：_____

地址: _____ 单元号：_____ 卧室数：_____

家庭成员编号	姓氏	名字 & 中间名首字母	与户主关系	出生日期（月/日/年）	社会保障号后4位或外国人登记号
1					
2					
3					
4					
5					
6					
7					
8					

第二部分：年度总收入

家庭成员编号	(A) 就业薪水或工资	(B) 社会保障/养老金	(C) 公共援助	(D) 其他收入
总计	**$**	**$**	**$**	**$**

将以上 (A) 至 (D) 的总和相加 **总收入 (E) =** **$**

第三部分：资产收入

家庭成员编号	(F) 资产类型	(G) C/I	(H) 资产现金价值	(I) 资产年收入
		总计	**$**	**$**

输入第**(H)**列 当前储蓄账户
总计 利率
如果超过 $5,000 $ _____ X _____ % **(J)**

估算收入 (J) = **$**

输入第 I 列总和或 J 项中的较大值：估算收入 **资产总收入 (K) =** **$**

将(E)+(K) **相加 所有来源的年度家庭总收入(L) =** **$**

家庭认证与签名

本表格上的信息将用于确定最高收入资格。我已/我们已为第二部分列出的每个人提供了当前预期年度收入的可接受证明。我/我们同意在家庭成员搬离该单元或任何新成员搬入时立即通知房东。我/我们同意在任何成员成为全日制学生时立即通知房东。

根据作伪证的处罚规定，我/我们证明本认证中提供的信息据我所知所信是真实准确的。签名人进一步理解，在此提供虚假陈述构成欺诈行为。虚假、误导性或不完整信息可能导致租赁协议终止。

本人在此日期的签名证明上述收入/资产信息在本租户收入证明生效日期是准确的。（如果在生效日期之前签署，本人有责任报告收入或家庭构成的任何变化，以便管理部门更新证明信息。）

租户签名	签名日期	租户签名	签名日期
租户签名	签名日期	租户签名	签名日期

PART IV. DETERMINATION OF INCOME ELIGIBILITY

Total Annual Household Income From all Sources:
From item (L) on page 1
$_____

Household Meets Income Restriction at:
_____ % MFI

Required HOME Rent Restriction:
☐ High HOME
☐ Low HOME
☐ Group Home

RECERTIFICATION ONLY:
Current 80% MFI Income Limit: (per family size)
$_____

Household Income exceeds 80% at recertification:
☐ Yes ☐ No

Current Income Limit per Family Size: **$**_____

Household Income at Move-in: **$**_____

Household Size at Move-in: _____

Current Household Size: _____

PART V. RENT

A) Tenant Paid Rent **$**_____

B) Utility Allowance **$**_____

C) Rent Assistance * **$**_____ ☐ TBA ☐ PBA ☐ Other: _____

D) Any Non-Optional Charges **$**_____

Gross rent for unit: **$**_____

Compare the above figure to the published Low or High HOME maximum rents for the unit.

Unit Meets Rent Restriction at:
☐ High HOME
☐ Low HOME
☐ Group Home

1. Add A, B and D if no rental assistance
2. Add A, B, C, and D if there is rental assistance paid to the property based on the household's income. (see NOTE below)

***HOME maximum published gross rents may be exceeded **only if:**
- rent assistance is project-based;
- household income is less than 50% of AMI; &
- household rent paid = 30% of adjusted income

Maximum Gross Rent Limit for this unit: (High, Low, or FMR HOME Published Rent) **$**_____

Please check required designation:
☐ Fixed Unit ☐ Floating Unit

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 I of this Tenant Income Certification is/are eligible under the provisions of CFR Part 92 (HOME Final Rule), as amended, and other recorded HOME Restrictive Agreements (if applicable), to live in a unit in this Project.

Printed Name of Owner/Representative _____ Signature of Owner/Representative _____ Signature Date _____

NOTE: Calculation of Gross Rent (HOME funds) with rental assistance does add the Utility Allowance. The subsidy payment received by the owner has reduced the tenant's portion of rent by the allowance, but the total amount of rent established for a unit is included in the subsidy payment. There is no additional reduction of rent paid to the owner by the housing authority for utility allowances.

第四部分：收入资格确定

所有来源的年度家庭总收入：来自第1页项目(L)：

$_____

家庭符合的收入限制：_____ % MFI

要求的 HOME 租金限制：

☐ 高 HOME
☐ 低 HOME
☐ 集体住宅

每个家庭规模的当前收入限额：$_____

仅限重新认证：

当前 80% MFI 收入限额：（按家庭人数）

$_____

重新认证时家庭收入超过 80%：

☐ 是 ☐ 否

入住时家庭收入：$_____

入住时的家庭规模：_____

当前家庭人数：_____

第五部分：租金

A) 租户支付租金 $_____

B) 公用事业补贴 $_____

C) 租金援助* $_____ ☐TBA ☐PBA ☐其他：_____

D) 任何非可选费用 $_____

单元总租金： $_____

1. 如果没有租金援助，将 A、B 和 D 相加
2. 如果有基于家庭收入的支付给物业的租金援助，将 A、B、C 和 D 相加
（参见下面的注释）

将上述数字与公布的该单元的低 HOME 或高 HOME 最高租金进行比较。

单元满足租金限制于：

☐高 HOME
☐低 HOME
☐集体住宅

*公布的 HOME 最高总租金**仅在**以下情况下可被超过：
- 租金援助是基于项目的；
- 家庭收入低于 AMI 的 50%；且
- 家庭支付租金 = 调整后收入的 30%

此单元的最高总租金限额：(高、低或 FMR HOME 公布租金) $_____

请勾选所需类型：

☐固定单元 ☐浮动单元

业主/代表签名

基于此处的陈述以及要求提交的证明和文件，本租户收入证明第一部分所列的个人有资格根据经修订的联邦法规汇编第 92 部分（HOME 最终规则）的规定以及（如适用）其他记录的 HOME 限制性协议居住在此项目的单元中。

业主/代表印刷体姓名 _____ 业主/代表签名 _____ 签名日期 _____

注意：在计算有租金援助的 HOME 资金项目总租金时，需要加入水电费补贴。业主收到的补贴支付已通过该补贴减少了租户承担的租金部分，但为该单元设定的总租金金额已包含在补贴支付中。住房管理局不会因为水电费补贴而额外减少支付给业主的租金。

如有疑问或对翻译的改进建议，请发送邮件至 Language.Access@HCS.oregon.gov