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| AHAP-370HOME BUYER INCOME CERTIFICATION 🞎 2 YRS PRIOR 🞎 APPLICATION DATE | Effective Date:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Target occupancy date:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (MM/DD/YYYY) |
| PART I - DEVELOPMENT DATA | |

Property Name:       County:      TAX PARCEL #

Address:       # 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) | Social Security  or Alien Reg. No. |
| 1 |  |  | | | HEAD | | |  | | |  |  |
| 2 |  |  | | |  | | |  | | |  |  |
| 3 |  |  | | |  | | |  | | |  |  |
| 4 |  |  | | |  | | |  | | |  |  |
| 5 |  |  | | |  | | |  | | |  |  |
| 6 |  |  | | |  | | |  | | |  |  |
| **PART III. GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)** | | | | | | | | | | | | |
| 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 IV. INCOME FROM ASSETS** | | | | | | | | | | | | |
| HH  Mbr # | (F)  Type of Asset | | | (G)  C/I | | (H)  Cash Value of Asset | | | | (I)  Annual Income from Asset | | |
|  |  | | |  | |  | | | |  | | |
|  |  | | |  | |  | | | |  | | |
|  |  | | |  | |  | | | |  | | |
|  |  | | |  | |  | | | |  | | |
| TOTALS: | | | | | | $ | | | | $ | | |
| 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)] | | | | | | | | | $ | | | |
| In the case of for-sale properties, the qualifying owner-occupant shall certify to MHDC before the end of the first year in which credits are claimed that the occupant was income eligible (incomes equal to or less than 100% of the median family income for the geographic area in which the unit is located or the statewide median family income, whichever is greater, adjusted for household size) within 90 days of the initial purchase contract or closing and for the two preceding years. At that same time, the owner-occupant shall also certify to MHDC that the cost of the unit (mortgage payment including mortgage and casualty insurance and property taxes) is projected to be in compliance with the corresponding rent limits for the household of equal size throughout the period of the LURA. Any subsequent owner-occupants during the period of the LURA must provide the same certifications upon purchase of the unit. ***Owner-Occupant Re-sale Restrictions:***During the period governed by the LURA, the sale of an AHAP-assisted unit by an owner-occupant is restricted to a subsequent owner-occupant who meets the income restriction described above. The sales price shall not exceed by more than a 5% annual appreciation the acquisition price to the original eligible owner at the time the tax credits are first claimed | | | | | | | | | | | | |
| 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 previous and current annual income. .

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 denial of application or penalties for mortgage fraud.

Signature *(Date)* Signature *(Date)*

Signature *(Date)* Signature *(Date)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PART V. DETERMINATION OF INCOME ELIGIBILITY - Current** | | | | | | |
| **RECERTIFICATION ONLY:** | | | | | | |
| TOTAL ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES:  From item (L) on page 1 | $ |  | Household Meets Income Restriction at: |  | Current Income Limit x 140%:  $ | |
| Current Income Limit per Family Size: | $ |  | 50% |  |  | |
|  |  |  | | | |  |
| Household Income at Move-in: | $ | Household Size at Move-in: | | | |  |
|  |  |  | | | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PART V. DETERMINATION OF INCOME ELIGIBILITY – 2 YRS PRIOR** | | | | | | |
| **RECERTIFICATION ONLY:** | | | | | | |
| TOTAL ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES:  From item (L) on page 1 | $ |  | Household Meets Income Restriction at: |  | Current Income Limit x 140%:  $ | |
| Current Income Limit per Family Size: | $ |  | 50% |  |  | |
|  |  |  | | | |  |
| Household Income at Move-in: | $ | Household Size at Move-in: | | | |  |
|  |  |  | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PART VI. MORTGAGE** | | | | |
| TOTAL MONTHLY MORTGAGE PAYMENT | $ |  |  | |
| MONTHLY PROPERTY TAX | $ |  | PROPERTY INSURANCE $ | |
| Taxing Authority & Parcel I.D. |  |  | Insurance Carrier | |
| MONTHLY MORTGAGE LESS MONTHLY PROPERTY TAX AND INSURANCE | $ |  | Unit Meets Rent Restriction at:  50% | |
| Monthly Maximum Mortgage Limit for this unit: | $ |  |  | |
|  |  |  | |  |
| **PART VIII. PROGRAM TYPE** | | | | |
| 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.. | | | | |

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| --- |
| **SIGNATURE OF OWNER/REPRESENTATIVE** |

|  |  |  |  |
| --- | --- | --- | --- |
| In the case of for-sale properties, the qualifying owner-occupant shall certify to MHDC before the end of the first year in which credits are claimed that the occupant was income eligible (incomes equal to or less than 100% of the median family income for the geographic area in which the unit is located or the statewide median family income, whichever is greater, adjusted for household size) within 90 days of the initial purchase contract or closing and for the two preceding years. At that same time, the owner-occupant shall also certify to MHDC that the cost of the unit (mortgage payment including mortgage and casualty insurance and property taxes) is projected to be in compliance with the corresponding rent limits for the household of equal size throughout the period of the LURA. Any subsequent owner-occupants during the period of the LURA must provide the same certifications upon purchase of the unit. ***Owner-Occupant Re-sale Restrictions:***During the period governed by the LURA, the sale of an AHAP-assisted unit by an owner-occupant is restricted to a subsequent owner-occupant who meets the income restriction described above. The sales price shall not exceed by more than a 5% annual appreciation the acquisition price to the original eligible owner at the time the tax credits are first claimed  Based on the representations herein and upon the proofs and documentation required to be submitted, the individual(s) named on this Tenant Income Certification is/are eligible under the provisions of the Land Use Restriction Agreement (if applicable), to purchase the home.. | | | |
|  |  | | |
|  |  |  |  |  |  |
| SIGNATURE OF OWNER/REPRESENTATIVE | DATE |  |  |

## INSTRUCTIONS FOR COMPLETING TENANT INCOME CERTIFICATION

*This form is to be completed by the owner or an authorized representative. 2 income certifications required*

* *the buyer’s income at application*
* *income certification that reflects buyers income 2 years prior.*

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. |
|  |  |  |
| Parcel # |  | Enter the taxing authority parcel # |
|  |  |  |
| Address |  | Enter the address of the building. |
|  |  |  |
|  |  |  |
| # 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, race/ethnicity (11=White; 12=Black/African American;13=Asian;14=American Indian/Alaska Native;15=Native Hawaiian/Other Pacific Islander; 16=American Indian/Alaska native & White; 17=Asian & White; 18=Black/African American & White; 19=American Indian/Alaska Native& Black /African American;20= Other Multi Racial) 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. |

|  |  |  |
| --- | --- | --- |
| 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 within 1 year of occupancy.

#### 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 Income Limit for the household size. |
|  |  |  |
| Household income at move-in  Household size at move-in |  | Enter the household income from the certification. On the adjacent line, enter the number of household members from the move-in certification. |
|  |  |  |
| Household Meets Income Restriction |  | Check the box for the income restriction that the household meets according to the 50% requirement |

## Part VI - Mortgage

|  |  |  |
| --- | --- | --- |
| Total Mortgage |  | Mortgage payment including Principal, Interest, Property Tax and Insurance |
|  |  |  |
| Property Tax |  | Enter the amount of Property Tax if any – Taxing Authority Name and Parcel # |
|  |  |  |
| Insurance Payment |  | Enter the amount of Insurance Payment. Insurance Carrier Name |
|  |  |  |
| Net Mortgage less Property Tax and Insurance |  |  |
|  |  |  |
| Maximum mortgage payment Limit for this home |  | 50% limit for unit size |
|  |  |  |
| Unit Meets mortgage Restriction at 50% |  | Check that the home unit meets according to what is required by the 50% restriction |

#### Part VIII – Program Type

Description of AHAP occupant qualifying factors and mortgage restrictions and resale provisions as indentified in the LURA.

In the case of for-sale properties, the qualifying owner-occupant shall certify to MHDC before the end of the first year in which credits are claimed that the occupant was income eligible at the time of the initial purchase contract and for the two preceding years. At that same time, the owner-occupant shall also certify to MHDC that the cost of the unit (mortgage payment including mortgage and casualty insurance and property taxes) is projected to be in compliance with the corresponding rent limits for the household of equal size throughout the period of the LURA. Any subsequent owner-occupants during the period of the LURA must provide the same certifications upon purchase of the unit. *Owner-Occupant Re-sale Restrictions* During the period governed by the LURA, the sale of an AHAP-assisted unit by an owner-occupant is restricted to a subsequent owner-occupant who meets the income restriction described above. The sales price shall not exceed by more than a 5% annual appreciation the acquisition price to the original eligible owner at the time the tax credits are first claimed

**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 AHAP Homebuyer Income Certification form) and ensuring such documentation is kept in the file is extremely important and should be conducted by someone well trained in AHAP credit compliance.