

# TENANT INCOME CERTIFICATION

Move in  
  Initial Certification  
  Recertification  
  Self-Certification  
 Unit Transfer - Previous Unit #: \_\_\_\_\_  
  Other Cert.: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Move-in Date: \_\_\_\_\_  
 (MM-DD-YYYY)

## PART I - DEVELOPMENT DATA

Property Name:	County:	BIN #:
BIN Address:	City:	Zip:
Unit Number:	# Bedrooms:	Square Footage:

## PART II - HOUSHOLD COMPOSITION

Family Mbr.	Last Name	First Name & Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YYYY)	Student Status FT=FULLTIME PT=PARTTIME N/A=NOT A STUDENT	Disabled (Y or N)
1			HEAD			
2						
3						
4						
5						
6						

## PART III. GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)

Family Mbr #	(A) Employment or Wages	(B) Soc. Security/Pensions	(C) Public Assistance	(D) Other Income
<b>TOTALS</b>	\$	\$	\$	\$

Add totals from (A) through (D), above TOTAL INCOME (E): \$ \_\_\_\_\_

## PART IV. INCOME FROM ASSETS

Family Mbr #	(F) Type of Asset	(G) C= Current D=Disposed	(H) Cash Value of Asset	(I) A=Actual I=Imputed	(J) Annual Income from Asset

Enter TOTALS from Column (H): \$ \_\_\_\_\_

If the total cash assets in Column (H) exceeds \$50,000, List "I" in Column (I) and impute assets without actual annual income using the HOTMA Annual Inflation Factor published on the HUD website.

Enter TOTALS from Column (J) - TOTAL INCOME FROM ASSETS (K): \$ \_\_\_\_\_

[Add (E) + (K)] TOTAL ANNUAL HOUSEHOLD INCOME (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.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Date)

**PART V. DETERMINATION OF INCOME ELIGIBILITY**

		<b>RECERTIFICATION ONLY:</b>	
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:	\$ _____	<input type="checkbox"/> 80% <input type="checkbox"/> 70% <input type="checkbox"/> 60%	Household Income exceeds 140% at recertification: <input type="checkbox"/> Yes <input type="checkbox"/> No
Household Income at Move-in:	\$ _____	<input type="checkbox"/> 50% <input type="checkbox"/> 40% <input type="checkbox"/> 30%	
Household Size at Move-in:	\$ _____	<input type="checkbox"/> 20% <input type="checkbox"/> _____%	

**PART VI. RENT**

Tenant Paid Rent: \$ _____	Federal Rent Assistance Amount: \$ _____ *Source: _____ (*1-8)
Utility Allowance: \$ _____	Non-Federal Rent Assistance Amount: \$ _____
Other non-optional charges: \$ _____	TOTAL RENT ASSISTANCE: \$ _____
GROSS RENT FOR UNIT: (Tenant paid rent plus Utility Allowance & other non-optional charges)	* Source of Rental Assistance 1 **HUD Multi-Family Project-Based Rental Assistance (PBRA) 2 Housing Choice Voucher (HCV), tenant-based 3. Project-Based Voucher (PBV) 4. State or Local Rental Assistance (Target Population SRAP or PSH, VASH) 5. Public Housing Operating Subsidy 6. USDA Section 521 Rental Assistance Program 7. HOME Rental Assistance 8 Other Federal Rental Assistance  ** (PBRA) Includes: Section 8 New Construction/Substantial Rehabilitation; Section 8 Loan Management; Section 8 Property Disposition; Section 202 Project Rental Asst. Contracts (PRAC)
Maximum Rent Limit for this unit: \$ _____	
Unit Meets Rent Restriction at:	
<input type="checkbox"/> 80% <input type="checkbox"/> 70% <input type="checkbox"/> 60%	
<input type="checkbox"/> 50% <input type="checkbox"/> 40% <input type="checkbox"/> 30%	
<input type="checkbox"/> 20% <input type="checkbox"/> _____%	

**PART VII. STUDENT STATUS**

ARE ALL OCCUPANTS FULL TIME STUDENTS? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Enter student explanation* (also attach documentation)  *Enter 1-6: _____	*Student Explanation: 1 TANF assistance 2 Job Training Program 3 Single parent/dependent child 4 Married/joint return 5 Formerly in foster care 6 Extended-Use Period
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**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/recertification.

a. Virginia Housing Loan <input type="checkbox"/> <i>Income Status</i> <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 60% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> 150% AMGI <input type="checkbox"/> OI** (Taxable, REACH, Spare)	b. Tax-Exempt Bond <input type="checkbox"/> <i>Income Status</i> <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 60% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> OI**	c. HOME <input type="checkbox"/> <i>Income Status</i> <input type="checkbox"/> 30% AMGI <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 60% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> OI**	d. NHTF/HTF <input type="checkbox"/> <i>Income Status</i> <input type="checkbox"/> 30% AMGI <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 60% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> OI**	e. _____ <input type="checkbox"/> (Name of Program) <i>Income Status</i> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> OI**
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\*\*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, the Extended Use Agreement, and Loan Agreement (if applicable), to live in a unit in this Project.

\_\_\_\_\_  
SIGNATURE OF OWNER/REPRESENTATIVE

\_\_\_\_\_  
DATE

# HOTMA Tenant Income Certification Instructions

See the **HOTMA Final Rule issued February 14, 2023; and HOTMA Implementation Notice H 2023-10 issued September 29, 2023** for complete instructions on household composition, verifying and calculating income, and acceptable forms of verification. HOTMA supersedes the HUD Handbook 4350.3 until HUD issues revised guidance.

## Part I - Development Data

Check the appropriate box for **Move-in (MI)**, (applicable for initial move-in certification only) **Initial Certification (IC)** (applicable for existing tenants in properties with a Resyndication or Second Tax Credit Allocation, and a move-in certification has been completed for the tenant under the LIHTC program), **Recertification (AR-as required)**, **Self-Certification** (applicable for LIHTC properties with 100% low-income units and Virginia Housing Loan Programs as required), **Unit Transfer (UT)** and previous unit number, or **Other** certification. If Other, enter the purpose of the recertification (i.e., a change in household composition, or other state-required recertification).

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.
Move-in Date	Enter the date the tenant has or will take occupancy of the unit. This date should reflect the date the tenant was certified for move-in/occupancy of a tax credit 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). This is expected to be in the following format: VA-89-00001, VA-89-00002, VA-89-00003, etc. Where - VA is the state allocating agency's two character state designation. - 89 is the last two digits of the BIN's year of allocation (1989) - 00001, 00002, 00003 is a 5 digit assigned number, usually sequential.
Address	Enter the street address, city and zip code of the building.
Unit Number	Enter the unit number.
# Bedrooms	Enter the number of bedrooms in the unit.
Square Footage	Enter the square footage of 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	Co-Head (Adult co-tenant)	O	Other family member
C	Child	F	Foster Child/Adult
L	Live-in caretaker	N	None of the above

Enter the date of birth, student status, and disability status. Disabled?: **Enter Y** if the household member is **disabled** according to Fair Housing Act definition for handicap (disability) **Enter N** if the household member is **not disabled**. **Enter N/A - Tenant Did Not Respond**

### Fair Housing Act definition for handicap (disability)

- A physical or mental impairment which substantially limits one or more major life activities; a record of such an impairment, or being regarded as having such an impairment. For a definition of "physical or mental impairment" and other terms used in this definition, please see 24 CFR 100.201 for guidance.
- "Handicap" does not include current, illegal use of or addiction to a controlled substance.

If there are more than 8 occupants, use an additional sheet of paper to list the remaining household members and attach it to the certification.

See the **HOTMA Final Rule issued February 14, 2023; and HOTMA Implementation Notice H 2023-10 issued September 29, 2023** for complete instructions on household composition, verifying and calculating income, and acceptable forms of verification. HOTMA supersedes the HUD Handbook 4350.3 until HUD issues revised guidance.

From the third party verification forms obtained from each income source, enter the gross amount actually or anticipated to be received and supported with documentation for the twelve months from the effective date of the (re)certification. Complete a separate line for each income-earning family 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.

# HOTMA Tenant Income Certification Instructions

## Part IV - Income from Assets

See the HOTMA Final Rule issued February 14, 2023; and HOTMA Implementation Notice H 2023-10 issued September 29, 2023 for complete instructions on verifying and calculating income from assets, including acceptable forms of verification.

List all actual and anticipated income received from assets and the cash value twelve months from the effective date of the certification separately for each respective family member from Part II according to the HOTMA guidance. When the total asset value exceeds \$50,000, include the imputed income of applicable assets using the HOTMA Annual Inflation Factor published by HUD.

Column (F)	List the type of asset (i.e., checking account, savings account, etc.).
Column (G)	Enter C for current value of assets owned or held), or Enter D for disposed assets 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 A for actual or anticipated annual asset income or Enter I for imputed asset income when the total assets are over \$50,000.
TOTALS	Add the total of Column (H) and Column (J), respectively.

If the total in Column (H) is greater than \$50,000, impute all assets without actual or anticipated annual income using the HOTMA Annual Inflation Factor published on the HUD website.

Row (K)	Enter the total annual income from assets in Column (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

Total Annual Household Income from all	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	Enter the household's qualifying income at move-in.
Household Size at Move-in	Enter the number of occupants in the qualifying move-in tenant 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 re-certifications only. Multiply the Current Maximum Move-in Income Limit/Unit Designation by 140% as described below and enter the total. 20-50 properties use 50% x 140%; 40-60 properties use 60% x 140%; <b>Average Income Test</b> properties use 60% x 140% for income designations at 20% up to 60%; and 70% x 140% and 80% x 140% for 70% and 80% unit designations as applicable). Indicate whether the household income exceeds that total. If the Gross Annual Income at recertification is greater than 140% of the current applicable income limit, then the Available Unit Rule must be followed.

Tenant Paid Rent	Enter the amount the tenant pays toward rent (not including rent assistance payments such as Section 8).
Rent Assistance	Enter the rental assistance, if any. Enter separate amounts for each source.
Source	Enter the source of the rental assistance.
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 renter's insurance, surety bond deposit, unreasonable application fees, charges for services or amenities 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.

# HOTMA Tenant Income Certification Instructions

## Part VII - Student Status

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.*

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.

Virginia Housing Loan	Properties with a Virginia Housing Loan <b>without LIHTC</b> , must use this box to mark the appropriate box indicating the household’s designation that meets the occupancy requirements in the Loan Agreement.
Tax-Exempt Bond	If the property participates in the Tax Exempt Bond program, mark the appropriate box indicating the household’s designation.
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 indicating the household’s designation.
NHTF/HTF	If the property participates in the National Housing Trust Fund or State Housing Trust Fund program and the tenant is income eligible under the NHTF/HTF program set-asides, mark the appropriate box indicating the household’s designation.
Other	If the property participates in any other affordable housing program, complete the information as appropriate.