

PART V. DETERMINATION OF INCOME ELIGIBILITY

Total Household Income (from Pg. 1) \$ _____

Household Meets Income Restriction at:

30% 50% 60% 80% OI**

Current Income Limit per Family Size: \$ _____

Household Income at Move-in: \$ _____

Household Size at Move-in: _____

PART VI. RENT

A.	Tenant Paid Rent:	\$ _____
B.	Utility Allowance:	\$ _____
C.	Rent Assistance:	\$ _____
D.	Other non-optional charges and mandatory fees:	\$ _____
E.	Gross Rent For Unit	\$ _____ / _____

Unit Meets Rent Restrictions at:

30% 50% 60% 80% OI***

Maximum Rent Limit for this unit: _____

PART VII. PROGRAM TYPE

This household's unit will be counted toward the property's occupancy requirements. Indicate the household's income status as established by this certification/recertification.

a. HOME b. CDBG c. HOPWA d. OTHER

30% 50% 60% 80% 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 program's rules, regulations and the Land Use Restriction Agreement (if applicable), to live in a unit in this Project.

SIGNATURE OF OWNER/REPRESENTATIVE

DATE

Checklist For office Use:

- Rental amount on TIC matches amount on lease.
- Lease and TIC dates match
- Prohibited Lease Terms excluded from lease
- Income from each household member included
- Received signatures from household members 18 years and older

Supplement to the Income Certification

Unit #: _____ Date: _____

See below for Ethnicity, Race, and Other codes that characterize household composition. Enter both Ethnicity and Race codes for each household member, and a code for other, if applicable. Also indicate if an individual in the household qualifies the household for the Special Needs occupancy requirement specified in the Land Use restriction Agreement or other document.

HH Mbr #	Sex –Enter M or F	Age	Race	Ethnicity	Other	Special Needs Y or N
1						
2						
3						
4						
5						
6						
7						

The Texas Department of Housing and Community Affairs (TDHCA) requests this information in order to comply with HUD’s required reporting requirements. Although TDHCA would appreciate receiving this information, you may choose not to furnish it. You may not be discriminated against on the basis of this information, or on whether or not you choose to furnish it. If you do not wish to furnish this information, please initial below.

RESIDENT/APPLICANT: I do not wish to furnish information regarding ethnicity, race, sex, age and other household composition. (Initials) _____

<p>The following Ethnicity codes should be used: A Hispanic B Not Hispanic</p>	<p>The following Race codes should be used: A White B Black/African American C Asian D American Indian/Alaska Native E Native Hawaiian/Other Pacific Islander F American Indian/Alaska Native & White G Asian & White H Black/African American & White I American Indian/Alaska Native & Black/African American J Other Multi Racial</p>	<p>The following other codes should be used: A. Elderly B. Disabled C. Elderly & Disabled</p>
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DEFINITIONS

Ethnic categories:

- A. Hispanic – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Terms such as “Latino” or “Spanish Origin” apply to this category.
- B. Not Hispanic – A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Racial categories:

- A. White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- B. Black/African American – A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” apply to this category.
- C. Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- D. American Indian/Alaskan Native – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- E. Native Hawaiian/Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Note: The remaining racial categories (F-I) are multi racial categories made up of combinations of the single race categories defined above (A-E). If the appropriate multi-racial category is not listed, use the “Other Multi Racial” (J) category.

Disabled:

- 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.

Income Calculation Worksheet

Household Name: _____

Apartment #: _____

Weekly × 52
Bi Weekly × 26
Semi-Monthly × 24
Monthly × 12