

**240 Deming Street  
South Windsor, Connecticut**

**Section 8-30g Affordability Plan**

**October 2023**

**Submission Draft**

**Submitted by:**

**The Metro Realty Management Corporation**

# **AFFORDABILITY PLAN FOR 24 DEMING STREET**

---

## **INTRODUCTION**

The Metro Management Corporation ("Metro") submits this draft Affordability Plan in connection with the proposed residential redevelopment comprising 55 rental apartments, located at 240 Deming Street, South Windsor, Connecticut (the "Community"), as more fully described in **Schedule A**. All apartment homes within the Community shall be constructed in compliance with the minimum specifications set forth in **Schedule B**.

### **I. Designation as "Assisted Housing."**

The Community will qualify as "assisted housing" within the meaning of § 8-30g(a)(3) of the Connecticut General Statutes through receipt of (a) mortgage financing from the Connecticut Housing Finance Authority ("CHFA") or the Department of Housing and/or (b) an allocation of low income housing tax credits from CHFA, in each instance for the purpose of financing development in which a portion is low and moderate-income housing.

### **II. Affordability Period.**

The assisted housing units shall be designated as affordable for no less than the period stated in a Declaration and Agreement of Restrictive Covenants, to be determined by the rules of the government financing program. The affordability period shall be calculated separately for each assisted housing unit, and the period shall begin on the date of initial rental of such unit to an eligible tenant household.

### **III. Entity Responsible for Administration and Compliance.**

This Affordability Plan will be administered by Metro, or its designees, successors and assigns, and in such role is hereafter referred to as "Administrator." In addition to compliance filing required by the assisted housing finance program (sample form, "Exhibit A" attached). The Administrator shall submit a status report to the Town on compliance with this Affordability Plan annually on or about January 31 to show the prior year's activity, as required by General Statutes § 8-30h.

### **IV. Notices of Availability for Rental of Units.**

The Administrator shall provide notice of the availability of each unit for rental. Such notices shall be provided in accordance with the Affirmative Fair Housing Marketing Plan as outlined in Section VI. The Administrator shall also provide such notice to the Commission. Such notice shall include a description of the available unit(s), the eligibility criteria for potential tenants, the maximum rental price, and the availability of application forms and additional information. All such notices shall comply with the federal Fair Housing Act, 42 U.S.C. §§ 3601 *et seq.* and the Connecticut Fair Housing Act, §§ 46a-64b, 64c of the Connecticut General Statutes (together, the "Fair Housing Acts").

## **V. Household Income Limitation.**

As further defined in a Declaration and Agreement of Restrictive Covenants, for the duration of the time period set forth in Section II above, all units will qualify as "assisted housing" within the meaning of Connecticut General Statutes § 8-30g(a)(3) and the Developer will comply with all rules and regulations of that program.

## **VI. Affirmative Fair Housing Marketing Plan.**

The rental of units in the Community shall be publicized, using State regulations for affirmative fair housing marketing programs as guidelines. The Administrator shall have responsibility for compliance with this section. Notices of initial availability of units shall be provided, at a minimum, by advertising at least two times in a newspaper of general circulation in such identified municipalities. The Administrator shall also provide such notices to the South Windsor Town Plan and Zoning Commission and the local housing authority. Such notices shall include a description of the available unit(s), the eligibility criteria for potential tenants, the maximum rental price, and the availability of application forms and additional information.

All notices shall comply with the federal Fair Housing Act, 42 U.S.C. §§ 3601 *et seq.* and the Connecticut Fair Housing Act, §§ 46a-64b, 64c of the Connecticut General Statutes (together, the "Fair Housing Acts").

## **VII. Application Process.**

A family or household seeking to rent one of the units ("Applicant") must complete an application to determine eligibility. The application form and process shall comply with the Fair Housing Act.

### *A. Application Form.*

The application form shall be provided by the Administrator and shall include an income pre-certification eligibility form and an income certification form. In general, income for purposes of determining an Applicant's qualification shall include the Applicant family's total anticipated income from all sources for the twelve (12) month period following the date the application is submitted ("Application Date"). If the Applicant's financial disclosures indicate that the Applicant may experience a significant change in the Applicant's future income during the twelve (12) month period, the Administrator shall not consider this change unless there is a reasonable assurance that the change will in fact occur. The Applicant's income need not be re-verified after the time of initial rental. In determining what is and is not to be included in the definition of family annual income, the Administrator shall use the criteria set forth by HUD and listed on **Schedule C**, attached.

*B. Applicant Interview.*

The Administrator shall interview an Applicant upon submission of the completed application. Specifically, the Administrator shall, during the interview, undertake the following:

1. Review with the Applicant all the information provided on the application.
2. Explain to the Applicant the requirements for eligibility, verification procedures, and the penalties for supplying false information.
3. Verify that all sources of family income and family assets have been listed in the application. The term "family" shall be as defined by the Zoning Regulations of the Town of South Windsor.
4. Request the Applicant to sign the necessary release forms to be used in verifying income. Inform the Applicant of what verification and documentation must be provided before the application is deemed complete.
5. Inform the Applicant that a certified decision as to eligibility cannot be made until all items on the application have been verified.
6. Review with the Applicant the process and restrictions regarding re-rental.

*C. Verification of Applicant's Income.*

Where it is evident from the income certification form provided by the Applicant (sample form, "Exhibit B" attached) that the Applicant is not eligible, additional verification procedures shall not be necessary. However, if the Applicant appears to be eligible, the Administrator shall issue a pre-certification letter. The letter shall indicate to the Applicant and the Developer that the Applicant is income eligible, subject to the verification of the information provided in the Application. The letter will notify the Applicant that he/she will have thirty (30) days to submit all required documentation.

If applicable, the Applicant shall provide the documentation listed on **Schedule D** attached hereto, to the Administrator. This list is not exclusive, and the Administrator may require any other verification or documentation, as the Administrator deems necessary.

**VIII. Prioritization of Applicants for Initial Rental.**

If, after publication of the Notice of Initial Rental as described in Section VI hereof, the number of qualified Applicants exceeds the number of units, then the Administrator shall establish a priority list of applicants based on a "first come, first served" basis, subject to the applicant's income pre-certification eligibility. The units will then be offered according to the applicant's numerical listing with priority given to persons on the Beacon waiting list.

**IX. Maximum Rent.**

As further defined in a Declaration and Agreement of Restrictive Covenants, for the duration of the time period set forth in Section II above, the maximum rent shall conform to the rules and regulations of the applicable government assistance program.

**X. Principal Residence.**

Units shall be occupied only as a tenant's principal residence. Subleasing of units shall be prohibited.

**XI. Requirement to Maintain Condition.**

All tenants are required to maintain their units. The tenant shall not destroy, damage or impair the unit, allow the unit to deteriorate, or commit waste on the unit. When a unit is offered for re-rental, the Administrator may cause the unit to be inspected.

**XII. Conflict Between Affordability Plan and Declaration.**

In the event of a conflict between this Affordability Plan and **Schedule E**, the Declaration and Agreement of Restrictive Covenants, shall govern.

**XIII. Enforcement.**

A violation of this Affordability Plan shall not result in a forfeiture of title, but the South Windsor Town Plan and Zoning Commission or its designated agent shall otherwise retain all enforcement powers granted by the Connecticut General Statutes, including § 8-12, which powers include, but are not limited to, the authority, at any reasonable time, to inspect the property and to examine the books and records of the Administrator to determine compliance of units with the affordable housing regulations.

**XIV. Binding Effect.**

This Affordability Plan shall be binding on the successors and assigns of Metro.

**SCHEDULE A**  
**PROPERTY DESCRIPTION**

*[To be inserted upon final submission of Affordability Plan]*

## **SCHEDULE B**

### **MINIMUM SPECIFICATIONS FOR HOUSING INCENTIVE UNITS**

#### **Foundation**

---

- Footings – poured concrete w/footing drain
- Frost Walls – poured concrete w/waterproofing and foundation coating
- Floors – poured concrete

#### **Exterior**

---

- Framing and Sheathing – as per building code
- Exterior Wall – 2" x 6"
- Interior Wall – 2" x 4"
- Fiberglass Roof Shingle (25 years)
- Foundation plantings (as specified)
- No-maintenance vinyl siding
- Aluminum gutters and down spouts
- Exterior weather-proof electrical outlet(s)
- Energy efficient vinyl windows
- Asphalt driveways and walks or equivalent (as specified)
- Insulation as per building code; Exterior walls R18; Ceiling R38

#### **Interior**

---

- Wall to wall carpeting or vinyl plank
- Energy efficient heating system
- Tankless hot water heater
- Direct wire smoke and CO<sub>2</sub> detectors
- Easy care vinyl clad wire closet shelving
- Pre-wired telephone and cable TV outlets
- Laundry area with washer / dryer
- Ground fault circuits in kitchen, bathrooms and garage
- Colonial six-panel doors (or comparable)

#### **Kitchens**

---

- Vinyl plank
- Laminate or traditional wood cabinets
- GE self-cleaning oven (or similar)
- GE microwave (or similar)
- GE refrigerator and freezer (or similar)
- Sound insulated, multi-cycle dishwasher

- Laminate countertops
- Stainless steel sink with single lever faucet

### **Bathrooms**

---

- Full width vanity mirrors
- Single piece acrylic tubs and shower surrounds
- Laminate vanity tops
- No-wax vinyl flooring or equivalent



## **SCHEDULE C**

### **DEFINITIONS AND ELEMENTS OF ANNUAL FAMILY INCOME**

1. Annual income shall be calculated with reference to 24 C.F.R. § 5.609, and includes, but is not limited to, the following:

a. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips, bonuses and other compensation for personal services.

b. The net income from operations of a business or profession, before any capital expenditures but including any allowance for depreciation expense. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family.

c. Interest, dividends, and other net income of any kind from real or personal property, before any capital expenditures but including any allowance for depreciation expense. Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate, as determined by HUD.

d. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, or other similar types of periodic payments; including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount, except as permitted in 2q, below.

e. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay, except as permitted in 2c, below.

f. Welfare assistance payments.

(1) Welfare assistance payments made under the Temporary Assistance for Needy Families ("TANF") program are included in annual income only to the extent such payments:

(a) Qualify as assistance under the TANF program definition at 45 C.F.R. § 260.31; and

(b) Are not otherwise excluded under Section 2, below.

(2) If the welfare assistance payments include an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance to be included as income consists of the following:

(a) The amount of the allowance or grant exclusive of the amounts designated for shelter or utilities, plus

(b) The maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities. If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this paragraph shall be the amount resulting from one application of the percentage.

g. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from organizations or persons not residing with the Applicant (*e.g.*, periodic gifts from family members, churches, or other sponsored group, even if the gifts are designated as rental or other assistance).

h. All regular pay, special pay and allowances of a member of the Armed Forces, except combat pay as in 2g, below.

i. For section 8 programs only and as provided in 24 C.F.R. § 5.612, any financial assistance, in excess of amounts received for tuition and any other required fees and charges, that an individual receives under the Higher Education Act of 1965 (20 U.S.C. §§ 1001 *et seq.*), from private sources, or from an institution of higher education (as defined under the Higher Education Act of 1965 (20 U.S.C. § 1002)), shall be considered income to that individual, except that financial assistance described in this paragraph is not considered annual income for persons over the age of 23 with dependent children. For purposes of this paragraph, "financial assistance" does not include loan proceeds for the purpose of determining income.

2. Excluded from the definition of family annual income are the following:

a. Income from employment of children under the age of 18 (including foster children).

b. Payments received for the care of foster children or foster adults.

c. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses, except as proved in 1e, above.

d. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member.

e. Income of a live-in aide, as defined in 24 C.F.R. § 5.403.

f. Subject to 1i, above, the full amount of student financial assistance paid directly to the student or to the educational institution.

g. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire.

h. Amounts received under training programs funded by HUD.

i. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency ("PASS").

j. Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program.

k. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the PHA or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during the same period of time.

l. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program.

m. Temporary, nonrecurring or sporadic income (including gifts that are not regular or periodic).

n. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era.

o. Earnings in excess of \$480 for each full-time student 18 years old or older (excluding the head of household and spouse).

p. Adoption assistance payments in excess of \$480 per adopted child.

q. Deferred periodic amounts from supplemental security income and social security benefits that are received in a lump sum amount or in prospective monthly amounts, or

any deferred Department of Veterans Affairs disability benefits that are received in a lump sum amount or in prospective monthly amounts.

r. Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling unit.

s. Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home.

t. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 C.F.R. § 5.609(c) apply. *See* Exhibit 5-1 at pp. 4-5 to HUD Handbook 4350.3: Occupancy Requirements of Subsidized Multifamily Housing Programs, revised as of November 2013, for a listing of income sources that apply for the exclusion.

3. Net family assets for purposes of imputing annual income include the following:<sup>1</sup>

a. Cash held in savings and checking accounts, safety deposit boxes, homes, etc.

b. The current market value of a trust for which any household member has an interest.

c. The current market value of any rental property or other capital investments, less (i) any unpaid balance on any loans secured by the property and (ii) reasonable costs that would be incurred in selling the asset (*e.g.*, penalties, broker fees, etc.).

d. The current market value of all stocks, bonds, treasury bills, certificates of deposit, mutual funds, and money market accounts.

e. The current value of any individual retirement, 401K or Keogh account.

f. The cash value of a retirement or pension fund which the family member can withdraw without terminating employment or retiring.

g. Periodic or lump-sum receipts from pension and retirement funds at retirement, termination of employment or withdrawal.

---

<sup>1</sup> What is included and excluded from Net Family Assets is derived with reference to Exhibit 5-2 to HUD Handbook 4350.3: Occupancy Requirements of Subsidized Multifamily Housing Programs, revised as of November 2013.

h. The cash value of life insurance policies available to the individual before death.

i. Any lump-sum receipts not otherwise included in income (*e.g.*, inheritances, capital gains, one-time lottery winnings, victim's restitution and settlement on insurance claims).

j. The current market value of any personal property held for investment (*e.g.*, gems, jewelry, coin collections).

k. Interest payments on a mortgage or deed of trust held by an Applicant.

4. Net family assets do not include the following:

a. Necessary personal property (*e.g.* clothing, furniture, cars, jewelry not held for personal investment etc.).

b. Interest in Indian Trust Land.

c. Equity in a cooperative unit in which the family lives.

d. Term life insurance policies.

e. Assets which are part of an active business, not including rental properties.

f. Assets that are not effectively owned by the Applicant because, although held in the Applicant's name, the assets and any income accrue to the benefit of someone else who is not a member of the family and the other person is responsible for income taxes incurred.

g. Assets that are not accessible to the Applicant and provide no income to the Applicant.

## **SCHEDULE D**

### **DOCUMENTATION OF INCOME**

The following documents shall be provided, where applicable, to the Administrator to determine income eligibility:

1. Employment Income.

Verification forms must request the employer to specify the frequency of pay, the effective date of the last pay increase, and the probability and effective date of any increase during the next twelve (12) months. Acceptable forms of verification (of which at least one must be included in the Applicant file) include:

- a. An employment verification form completed by the employer.
- b. Check stubs or earnings statement showing Applicant's gross pay per pay period and frequency of pay.
- c. W-2 forms if the Applicant has had the same job for at least two years and pay increases can be accurately projected.
- d. Notarized statements, affidavits or income tax returns signed by the Applicant describing self-employment and amount of income, or income from tips and other gratuities.

2. Social Security, Pensions, Supplementary Security Income, Disability Income.

- a. Benefit verification form completed by agency providing the benefits.
- b. Award or benefit notification letters prepared and signed by the authorizing agency. (Since checks or bank deposit slips show only net amounts remaining after deducting SSI or Medicare, they may be used only when award letter cannot be obtained.)
- c. If a local Social Security Administration ("SSA") office refuses to provide written verification, the Administrator should meet with the SSA office supervisor. If the supervisor refuses to complete the verification forms in a timely manner, the Administrator may accept a check or automatic deposit slip as interim verification of Social Security or SSI benefits as long as any Medicare or state health insurance withholdings are included in the annual income.

3. Unemployment Compensation.

- a. Verification form completed by the unemployment compensation agency.

- b. Records from unemployment office stating payment dates and amounts.

4. Government Assistance.

a. All Government Assistance Programs. Agency's written statements as to type and amount of assistance Applicant is now receiving, and any changes in assistance expected during the next twelve (12) months.

b. Additional Information for "As-paid" Programs: Agency's written schedule or statement that describes how the "as-paid" system works, the maximum amount the Applicant may receive for shelter and utilities and, if applicable, any factors used to ratably reduce the Applicant's grant.

5. Alimony or Child Support Payments.

a. Copy of a separation or settlement agreement or a divorce decree stating amount and type of support and payment schedules.

b. A letter from the person paying the support.

c. Copy of latest check. The date, amount, and number of the check must be documented.

d. Applicant's notarized statement or affidavit of amount received or that support payments are not being received and the likelihood of support payments being received in the future.

6. Net Income from a Business.

The following documents show income for the prior years. The Administrator must consult with Applicant and use this data to estimate income for the next twelve (12) months.

a. IRS Tax Return, Form 1040, including any:

(1) Schedule C (Small Business).

(2) Schedule E (Rental Property Income).

(3) Schedule F (Farm Income).

b. An accountant's calculation of depreciation expense, computed using straight-line depreciation rules. (Required when accelerated depreciation was used on the tax return or financial statement.)

- c. Audited or unaudited financial statement(s) of the business.
- d. A copy of a recent loan application listing income derived from the business during the previous twelve (12) months.
- e. Applicant's notarized statement or affidavit as to net income realized from the business during previous years.

7. Recurring Gifts.

- a. Notarized statement or affidavit signed by the person providing the assistance. Must give the purpose, dates and value of gifts.
- b. Applicant's notarized statement or affidavit that provides the information above.

8. Scholarships, Grants, and Veterans Administration Benefits for Education.

- a. Benefactor's written confirmation of amount of assistance, and educational institution's written confirmation of expected cost of the student's tuition, fees, books and equipment for the next twelve (12) months. To the extent the amount of assistance received is less than or equal to actual educational costs, the assistance payments will be excluded from the Applicant's gross income. Any excess will be included in income.
- b. Copies of latest benefit checks, if benefits are paid directly to student. Copies of canceled checks or receipts for tuition, fees, books, and equipment, if such income and expenses are not expected to change for the next twelve (12) months.
- c. Lease and receipts or bills for rent and utility costs paid by students living away from home.

9. Family Assets Currently Held.

For non-liquid assets, collect enough information to determine the current cash value (*i.e.*, the net amount the Applicant would receive if the asset were converted to cash).

- a. Verification forms, letters, or documents from a financial institution, broker, etc.
- b. Passbooks, checking account statements, certificates of deposit, bonds, or financial statements completed by a financial institution or broker.



- c. Quotes from a stock broker or realty agent as to net amount Applicant would receive if Applicant liquidated securities or real estate.
- d. Real estate tax statements if tax authority uses approximate market value.
- e. Copies of closing documents showing the selling price, the distribution of the sales proceeds and the net amount to the borrower.
- f. Appraisals of personal property held as an investment.
- g. Applicant's notarized statements or signed affidavits describing assets or verifying the amount of cash held at the Applicant's home or in safe deposit boxes.

10. Assets Disposed of for Less Than Fair Market Value ("FMV") During Two Years Preceding Application Date.

- a. Applicant's certification as to whether it has disposed of assets for less than FMV during the two (2) years preceding the Application Date.
- b. If the Applicant states that it did dispose of assets for less than FMV, then a written statement by the Applicant must include the following:
  - (1) A list of all assets disposed of for less than FMV;
  - (2) The date Applicant disposed of the assets;
  - (3) The amount the Applicant received; and
  - (4) The market value to the asset(s) at the time of disposition.

11. Savings Account Interest Income and Dividends.

- a. Account statements, passbooks, certificates of deposit, etc., if they show enough information and are signed by the financial institution.
- b. Broker's quarterly statements showing value of stocks or bonds and the earnings credited the Applicant.
- c. If an IRS Form 1099 is accepted from the financial institution for prior year earnings, the Administrator must adjust the information to project earnings expected for the next twelve (12) months.

12. Rental Income from Property Owned by Applicant.

The following, adjusted for changes expected during the next twelve (12) months, may be used:

- a. IRS Form 1040 with Schedule E (Rental Income).
- b. Copies of latest rent checks, leases, or utility bills.
- c. Documentation of Applicant's income and expenses in renting the property (tax statements, insurance premiums, receipts for reasonable maintenance and utilities, bank statements or amortization schedule showing monthly interest expense).
- d. Lessee's written statement identifying monthly payments due the Applicant and Applicant's affidavit as to net income realized.

13. Full-Time Student Status.

- a. Written verification from the registrar's office or appropriate school official.
- b. School records indicating enrollment for sufficient number of credits to be considered a full-time student by the school.

# Exhibit A

## Owner's Certificate of Continuing Program Compliance

Received Date (For Office Use Only): \_\_\_\_\_

### OWNER'S CERTIFICATE OF CONTINUING LIHTC PROGRAM COMPLIANCE

To: Connecticut Housing Finance Authority  
C/O Spectrum Enterprises, Inc.  
545 Shore Road  
Cape Elizabeth, ME 04107

☐ No buildings have been Placed in Service  
☐ At least one building has been placed in Service but owner elects to begin credit period in the following year.  
If either of the above applies, please check the appropriate box, and proceed to page 3 to sign and date this form.

<b>Certification Dates:</b>	<b>From:</b> January 1, 20	<b>To:</b> December 31, 20
<b>Project Name:</b>	<b>Project No:</b>	
<b>Project Address:</b>	<b>City:</b>	<b>Zip:</b>
<b>Tax ID # of Ownership Entity:</b>		

The undersigned \_\_\_\_\_ on behalf of \_\_\_\_\_ (the "Owner"), hereby certifies to the

Connecticut Housing Finance Authority ("the Authority") that:

- I. The project met the minimum requirements of: (check one)  
☐ 20 - 50 test under Section 42(g)(1)(A) of the Code  
☐ 40 - 60 test under Section 42(g)(1)(B) of the Code

And, if applicable to the project: (check)

- ☐ 15 - 40 test for "deep rent-skewed" projects under Section 42(g)(4) and 142(d)(4)(B) of the Code;

- II. There has been **no change in the applicable fraction** (as defined in Section 42(c)(1)(B)) of any building in the project, or that there was a change and description of the change;  
☐ NO CHANGE ☐ CHANGE

If "Change" list the applicable fraction to be reported to the IRS for each building in the project for the certification year on page 3.

- III. The owner has received an annual income certification from each low-income tenant, and documentation to support that certification; or, in the case of a tenant receiving Section 8 housing assistance payments, the statement from a public housing authority described in paragraph (b)(1)(vi) of Section 1.42-5;  
☐ YES ☐ NO

- IV. Each low-income unit in the project has been rent-restricted under Section 42(g)(2);  
☐ YES ☐ NO

- V. All units in the project were for use by the general public (as defined in Section 1.42-9), including the requirement that no finding of discrimination under the Fair Housing Act, 42 U.S.C. 3601-3619, occurred for the project. A finding of discrimination includes an adverse final decision by the Secretary of the Department of Housing and Urban Development (HUD), 24 CFR 180.680, an adverse final decision by a substantially equivalent state or local fair housing agency, 42 U.S.C. 3616a(a)(1), or an adverse judgment from a federal court;  
☐ YES ☐ NO

- VI. The buildings and low-income units in the project were suitable for occupancy, taking into account local health, safety, and building codes (or other habitability standards), and the State or local government unit responsible for making local health, safety, or building code inspections did not issue a violation report for any building or low-income unit in the project. If a violation report or notice was issued by the governmental unit, the owner must attach a statement summarizing the violation report or notice or a copy of the violation report or notice to the annual certification submitted to the Authority under paragraph (c)(1) of Section 1.42-5. In addition, the owner must state whether the violation has been corrected;  
☐ YES ☐ NO

- VII. There was no change in the eligible basis (as defined in Section 42(d)) of any building in the project, or if there was a change, the nature of the change (e.g., a common area has become commercial space, or a fee is now charged for a tenant facility formerly provided without charge);

☐ NO CHANGE ☐ CHANGE

If "Change", state nature of the change on page 3.

- VIII. All tenant facilities included in the eligible basis under Section 42(d) of any building in the project, such as swimming pools, other recreational facilities, and parking areas, were provided on a comparable basis without charge to all tenants in the building;

☐ YES ☐ NO

- IX. If a low-income unit in the project has been vacant during the year, reasonable attempts were or are being made to rent that unit or the next available unit of comparable or smaller size to tenants having a qualifying income before any units in the project were or will be rented to tenants not having a qualifying income;

☐ YES ☐ NO

- X. If the income of tenants of a low-income unit in the building increased above the limit allowed in Section 42(g)(2)(D)(ii), the next available unit of comparable or smaller size in the building was or will be rented to tenants having a qualifying income;

☐ YES ☐ NO

- XI. An extended low-income housing commitment as described in Section 42(h)(6) was in effect (for buildings subject to Section 7108(c)(1) of the Omnibus Budget Reconciliation Act of 1989, 103 Stat. 2106, 2308-2311), including the requirement under Section 42(h)(6)(B)(iv) that an owner cannot refuse to lease a unit in the project to an applicant because the applicant holds a voucher or certificate of eligibility under Section 8 of the United States Housing Act of 1937, 42 U.S.C. 1437f (for buildings subject to Section 13142(b)(4) of the Omnibus Budget Reconciliation Act of 1993, 107 Stat. 312, 438-439);

☐ YES ☐ NO ☐ N/A

- XII. All low-income units in the project were used on a nontransient basis (except for transitional housing for the homeless provided under Section 42(i)(3)(B)(iii) or single-room-occupancy units rented on a month-by-month basis under Section 42(i)(3)(B)(iv);

☐ YES ☐ NO ☐ HOMELESS

- XIII.a The owner received its credit allocation from the portion of the state ceiling set-aside for a project involving "qualified non-profit organizations" under Section 42 (h)(5) of the code.

☐ YES ☐ NO (If NO, skip to question XIV)

- XIII.b If the answer to XIII.a was yes, is that participation ongoing?

☐ YES ☐ NO

- XIV. There has been no change in the ownership or management of the project;

☐ NO CHANGE ☐ CHANGE

If "Change", complete page 3 detailing the changes in ownership or management of the project.

- XV. The Owner complies with Internal Revenue Service ("IRS") Revenue Ruling 2004-82, which at Question and Answer 5, states that Internal Revenue Code ("IRC") Section 42(h)(6)(B)(i) requires that "an extended low-income housing commitment include a prohibition during the extended use period against (1) the eviction or termination of tenancy (other than for good cause) of an existing tenant of any low-income unit (no-cause eviction protection) and (2) any increase in the gross rent with respect to the unit not otherwise permitted under § 42.

☐ YES ☐ NO

- XVI. The person responsible for the tax credit management of the property has attended LIHTC training within the past three years. Provide copy of certificate of continuing education.

☐ YES ☐ NO



**PLEASE EXPLAIN ANY ITEMS THAT WERE ANSWERED "NO" OR "CHANGE" ON QUESTIONS 1-14. (EXCEPT XIII A)**

**CHANGES IN OWNERSHIP OR MANAGEMENT**  
(to be completed **ONLY** if "CHANGE" marked for  
question 14 above)

[illegible]

## TRANSFER OF OWNERSHIP

Date of Change:	
Taxpayer ID Number:	
Legal Owner Name:	
General Partnership:	
Status of Partnership (LLC, etc):	

### CHANGES IN OWNER CONTACT

Date of Change:	
Owner Contact:	
Owner Contact Phone:	
Owner Contact Fax:	
Owner Contact Email:	

## CHANGES IN MANAGEMENT CONTACT

Date of Change:	
Management Co. Name:	
Management Address:	
Management city, state, zip:	
Management Contact:	
Management Contact Phone:	
Management Contact Fax:	
Management Contact Email:	

## Exhibit B Tenant Income Certification

<b>TENANT INCOME CERTIFICATION TC - 100</b>						Effective Date: _____				
<input type="checkbox"/> Initial Certification <input type="checkbox"/> Recertification <input type="checkbox"/> Other _____						Move-in Date: _____ (YYYY-MM-DD)				
<b>PART I - DEVELOPMENT DATA</b>										
Property Name:		County:		BIN #:		PISD:				
BIN Address:		City:		Zip:						
Unit Number:		# Bedrooms:		Square Footage:						
<b>PART II. HOUSEHOLD COMPOSITION (DEMOGRAPHIC INFORMATION IS FOR LIHTC ONLY)</b>										
HH Mbr#	Last Name	First Name	Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YY)	F/T Student?	SS# Last 4 Digits	Race	Ethnic	Disabled?
1				HEAD						
2										
3										
4										
5										
6										
7										
<b>PART III. GROSS ANNUAL INCOME (USE ANNUAL AMOUNTS)</b>										
HH Mbr #	(A) Employment or Wages	(B) Soc. Security/Pensions	(C) Public Assistance	(D) Other Income						
<b>TOTALS</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>						
Add totals from (A) through (D), above			<b>TOTAL INCOME (E):</b>							
			<b>\$</b>							
<b>PART IV. INCOME FROM ASSETS</b>										
Hshld Mbr #	(F) Type of Asset	(G) C/I	(H) Cash Value of Asset	(I) Annual Income from Asset						
<b>TOTALS:</b>			<b>\$</b>	<b>\$</b>						
Enter Column (H) Total		Passbook Rate								
If over \$5,000 \$ _____ X .06%				= (J) Imputed Income \$ _____						
Enter the greater of the total of column I, or J: imputed income			<b>TOTAL INCOME FROM ASSETS (K)</b>							
			<b>\$</b>							
<b>(L) Total Annual Household Income from all Sources [Add (E) + (K)]</b>				<b>\$</b>						
<b>HOUSEHOLD CERTIFICATION &amp; SIGNATURES</b>										
<p>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.</p> <p>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.</p>										
Signature _____		_____ (Date)		Signature _____						
_____ (Date)		_____ (Date)		Signature _____						
_____ (Date)		_____ (Date)		Signature _____						

PART V. DETERMINATION OF INCOME ELIGIBILITY		
<b>TOTAL ANNUAL HOUSEHOLD INCOME FROM ALL SOURCES:</b> From item (L) on page 1 \$ _____		<b>RECERTIFICATION ONLY:</b> Current Income Limit x 140% \$ _____
Current LIHTC Income Limit per Family Size for the federal 50% or 60% set aside: \$ _____	Household Meets Income Restriction at: <input type="checkbox"/> 60% <input type="checkbox"/> 50% <input type="checkbox"/> 40% <input type="checkbox"/> 30% <input type="checkbox"/> _____%	Household Income exceeds 140% at recertification: <input type="checkbox"/> Yes <input type="checkbox"/> No
Household Income at Move-in: \$ _____		
Household Size at Move-in: _____		

PART VI. RENT	
Tenant Paid Rent	\$ _____
Utility Allowance	\$ _____
Other non-optional charges:	\$ _____
<b>GROSS RENT FOR UNIT:</b> (Tenant paid rent plus Utility Allowance & other non-optional charges)	\$ _____
Maximum Rent Limit for this unit:	\$ _____
Unit Meets Rent Restriction at:	<input type="checkbox"/> 60% <input type="checkbox"/> 50% <input type="checkbox"/> 40% <input type="checkbox"/> 30% <input type="checkbox"/> _____%
Federal Rent Assistance Amount: \$ _____ *Source: _____ Non-Federal Rent Assistance Amount: \$ _____ (*1-8) <b>TOTAL RENT ASSISTANCE: \$ _____</b>	
* Source of Federal Assistance 1 **HUD Multi-Family Project-Based Rental Assistance (PBRA) 2 Section 8 Moderate Rehabilitation 3 Public Housing Operating Subsidy 4 HOME Rental Assistance 5 HUD Housing Choice Voucher (HCV), tenant-based 6 HUD Project-Based Voucher (PBV) 7 USDA Section 521 Rental Assistance Program 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 Assistance Contracts (PRAC)	

PART VII. STUDENT STATUS		
<b>ARE ALL OCCUPANTS FULL TIME STUDENTS?</b> <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

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.				
<b>a. Tax Credit</b> <input type="checkbox"/> See Part V above.	<b>b. HOME</b> <input type="checkbox"/> <b>Income Status</b> <input type="checkbox"/> ≤ 50% AMGI <input type="checkbox"/> ≤ 60% AMGI <input type="checkbox"/> ≤ 80% AMGI <input type="checkbox"/> OI**	<b>c. Tax Exempt</b> <input type="checkbox"/> <b>Income Status</b> <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 60% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> OI**	<b>d. AHDP</b> <input type="checkbox"/> <b>Income Status</b> <input type="checkbox"/> 50% AMGI <input type="checkbox"/> 80% AMGI <input type="checkbox"/> OI**	<b>e.</b> <input type="checkbox"/> (Name of Program) <b>Income Status</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> 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 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 \_\_\_\_\_