

**FDIC  
AFFORDABLE HOUSING PROGRAM  
TENANT INCOME CERTIFICATION**

**PART I: SUMMARY OF HOUSEHOLD INCOME DATA**

1. Name (Last, First) A.  B.  C.  D.	2. Household		3. Check one: <input type="checkbox"/> Initial Certification  <input type="checkbox"/> Recertification
	A. Size	B. VLI _ LI _ OI _	

**A. Assets:**

Household Member	Asset Description	Total Cash Value	Income from Assets
A.			
4. Total Net Value of Assets		4. \$.....	
5. Total Actual Asset Income			5. \$.....
6. If line 4 is greater than \$5,000, multiply line 4 by passbook savings rate and enter result here; otherwise, leave blank. Passbook savings rate = _____%			6. \$.....

**B. Anticipated Annual Income:**

Household Member	a. Wages/ Salaries	b. Benefits/ Pensions	c. Public Assistance	d. Other Income	e. Asset Income
A.					Enter the greater of lines 5 or 6 in box e.
B.					
C.					
D.					
7. Totals	a.	b.	c.	d.	e.

8. Enter total of items 7a. through 7e. This is <u>Annual Income</u>	8. \$.....
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**PART II: TENANT CERTIFICATION**



**PART IV: TO BE COMPLETED BY MANAGEMENT STAFF**

Property:	Contract Rent: \$
Apt. #:                    # BR:	Prepared by:
Lease Date:	Applicable LI Limit:
Recertification Date:	Applicable VLI Limit:

**WARNING:** Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

**FDIC  
TENANT INCOME CERTIFICATION**

**Instructions**

**GENERAL.** This form is to be completed for all initial certifications and recertification of households who are designated to meet the Total and VLI Set-Asides for AHDP properties (VLI and LI tenants)

**PART I. SUMMARY OF HOUSEHOLD INCOME DATA**

- |                 |                                   |  |
|-----------------|-----------------------------------|--|
| <u>Item 1.</u>  | Name                              | List all household members who will be occupying this unit.  |
| <u>Item 2A.</u> | Household Size                    | Identify the total number of persons occupying the unit.   |
| <u>Item 2B.</u> | Household Designation             | Indicate the income category as designated in Part III: Very Low-Income (VLI); Lower Income (LI); or Over-Income (OI). |
| <u>Item 3.</u>  | Certification/<br>Recertification | Check whether the action being processed is an initial certification or an annual recertification.                     |

**A. Assets:**

As prescribed in the Compliance Manual, verify and list the assets owned by this household. Indicate who owns the asset by listing the corresponding family member letter used in Item #1. Describe the asset; indicate the current market value; and estimate the income from the asset.

If the number of assets exceed the lines available, use additional sheets. Reference the additional sheets and include the totals for Cash Value and Income from Assets from these sheets as a single line.

- |                |                               |   |
|----------------|-------------------------------|---|
| <u>Item 4.</u> | Total Net Family Assets       | Enter the total cash value of all of the assets in this column.   |
| <u>Item 5.</u> | Total Actual Asset<br>Income  | Provide the total actual income anticipated from the assets listed.   |
| <u>Item 6.</u> | Imputed Income From<br>Assets | If the total in item 4 exceeds \$5,000, multiply line 4 by the HUD approved passbook savings rate. To obtain up-to-date information on the passbook rate in use, contact the monitoring agency. |

**B. Anticipated Annual Income**

As prescribed in the Compliance Manual, verify and list the gross amount of income anticipated by this household. Indicate who will be receiving this income by listing the corresponding family member letter used in Item #1 and indicate the gross amount in the appropriate column.

If the number of household members with income exceeds the lines available, use additional sheets. Reference the additional sheets and include the totals for each type of income on the open line.

Item 7. Total income, a - e

Line 7, a - e, enter total income by source, including assets.

Item 8. Annual income

This is the total annual income of this household. Compare to the applicable AHP income limits to determine eligibility.

**PART II TENANT CERTIFICATION**

The adult family members must sign Part II certifying the accuracy and completeness of the information provided in Part I of this form.

**PART III OWNER/AGENT CERTIFICATION**

Indicate the appropriate income designation (e.g., Very Low-Income; Lower Income; or Over-Income (for recertified tenants only, income exceeding 140% of lower income limits). Agents must sign and date the certification.

**PART IV ADDITIONAL INFORMATION**

Fill in the appropriate information.