

USDA-RURAL HOUSING SERVICE
TENANT CERTIFICATION

1. Effective Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: center;">MM DD YY</div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"><div><input type="checkbox"/> Initial Certification <input type="checkbox"/> Recertification <input type="checkbox"/> Modify Certification <input type="checkbox"/> Cotenant to Tenant <input type="checkbox"/> Assign/Remove RA <input type="checkbox"/> Vacate a Unit</div><div><input type="checkbox"/> Certification Expired & Eviction in Process <input type="checkbox"/> Designate 60 Day Absence <input type="checkbox"/> End 60 Day Absence <input type="checkbox"/> Tenant Transfer</div></div>		PART I-PROJECT AND UNIT IDENTIFICATION																																																											
		2. Project Name	3. Borrower ID and Project Number	4. Unit Type	5. Unit Number																																																								
PART II-TENANT HOUSEHOLD INFORMATION 6. Tenant Subsidy Code (enter code) <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="font-size: 0.8em; padding-left: 5px;">0 - No Deep Tenant Subsidy 1 - Rental Assistance (RA) 2 - Project Based Section 8 4 - Other Public RA 5 - Private RA 6 - HUD Voucher 7 - Other Types at Basic Rent Other Subsidy Indicator (leave blank if none, P-Partial or F-Full)</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em;"><tr><td style="width: 15%;">7. Social Security No.</td><td style="width: 25%;">8. Household Member Name</td><td style="width: 5%;">9. Sex</td><td style="width: 15%;">10. Date of Birth</td><td style="width: 10%;">11. Race</td><td style="width: 10%;">12. Ethnicity</td><td style="width: 10%;">12a. Race Determination Code</td></tr><tr><td></td><td style="text-align: center;"><i>(Last, First and Middle Initial)</i></td><td></td><td style="text-align: center;">MM DD YY</td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <div style="font-size: 0.7em; padding-left: 5px;">Choices for Race are: 1 - American Indian or Alaskan Native 2 - Asian 3 - Black or African American 4 - Native Hawaiian or Pacific Islander 5 - White Choices for Ethnicity are: a - Hispanic/Latino b - Non-Hispanic Latino</div>		7. Social Security No.	8. Household Member Name	9. Sex	10. Date of Birth	11. Race	12. Ethnicity	12a. Race Determination Code		<i>(Last, First and Middle Initial)</i>		MM DD YY																																														WARNING STATEMENT: Section 1001 of Title 18, United States Code provides, "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than five years, or both." STATEMENT REQUIRED BY THE PRIVACY ACT: Title V of the Housing Act of 1949 authorizes RHS to collect the information on this form. Your disclosure of the information is voluntary. However, failure to disclose certain information may delay the processing of your eligibility or rejection. RHS will not deny eligibility if you refuse to disclose your Social Security Number. This information is collected principally to determine eligibility for occupancy and to determine your tenant contribution for rent. However, the information collected may be released to appropriate Federal, State and Local Agencies, credit bureaus and Servicing agents when relevant to civil, criminal or regulatory proceedings or to enforce regulations by manual or automated verification procedures. <i>Round all monetary figures up to the nearest dollar at .50 and above.</i>			
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<div style="display: flex; justify-content: space-between; font-size: 0.8em;"><div>Other Subsidy Amount (For Partial) \$</div><div>13. Minor, Disabled, Handicapped or Full-Time Student 18 or Older</div><div>14. Elderly, Disabled or Handicapped</div></div> <div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>15. Net Family Assets (NOTE: If Line 15 is less than \$5,000, enter zero on Line 16.)</div><div>Total (Line 13)</div><div>Elderly Status</div></div> <div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>16. Imputed Income from Assets (Bank Passbook Savings Rate (*) x Line 15.)</div><div></div><div></div></div> <div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>17. Income from Assets</div><div></div><div></div></div>																																																													
PART III- ASSET INCOME																																																													
<div style="display: flex; justify-content: space-between; font-size: 0.8em;"><div>18. Income</div><div>19. Adjustments to Income</div></div> <div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div><div style="width: 45%;">a. Wages, Salaries, etc. \$</div><div style="width: 45%;">a. \$480 x total of Line 13 \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>b. Soc. Sec., Pensions, etc. \$</div><div>b. \$400 if elderly status \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>c. Assistance \$</div><div>c. Medical exceeding 3% of Line 18f. (if elderly, handicapped or disabled) \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>d. Income Contributed by Assets (Greater of Line 16 or Line 17) \$</div><div>d. Child Care \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>e. Other \$</div><div>e. Total Adjustments \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>f. Annual Income \$</div><div>20. Adjusted Annual Income (Line 18f. minus Line, 19.e.) \$</div></div><div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>g. Household Has Exempt Income <input type="checkbox"/></div><div></div><div></div></div></div>																																																													
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<div style="display: flex; justify-content: space-between; font-size: 0.8em;"><div>21. Number of Household Members</div><div>23. Date of Initial Project Entry</div></div> <div style="display: flex; justify-content: space-between; font-size: 0.7em;"><div>22. Current Eligibility Income Level (Enter Code)</div><div>24. Eligibility Income Level at Initial Project Entry (Enter Code)</div></div>																																																													
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PART VI- CERTIFICATION BY TENANT																																																													
<div style="font-size: 0.8em;">I certify and acknowledge that if the Agency provides unauthorized assistance to the borrower/multi-family housing project owner for my benefit based on erroneous or fraudulent information provided in this tenant certification. I will reimburse the Agency for the unauthorized amount. If I do not, the Agency may use all remedies available to collect it, including those under the Debt Collection Act to recover on the Federal debt directly from me. In accordance with the requirements of the Privacy Act of 1974, which protects my confidential records from unauthorized release. I authorize the Agency to release information collected in this tenant certification to appropriate Agencies for income recertification purpose.</div>																																																													
a. Date: MM DD YY		b. Tenant Signature																																																											
c. Date: MM DD YY		d. Co-Tenant Signature																																																											

PART VII - PRELIMINARY CALCULATIONS

25. Adjusted Monthly Income (<i>Line 20 ÷ 12</i>)	a. \$	<input type="text"/>	x .30	= b. \$	<input type="text"/>
26. Monthly Income (<i>Line 18.f. ÷ 12</i>)	a. \$	<input type="text"/>	x .10	= b. \$	<input type="text"/>
			27. Designated Monthly Welfare Shelter Payment	\$	<input type="text"/>
			28. Highest of Line 25.b., Line 26.b., or Line 27,		<input type="text"/>
29. Gross Basic Rent			30. Gross Note Rate Rent		<input type="text"/>
a. Basic Rent	\$	<input type="text"/>	a. Note Rate Rent	\$	<input type="text"/>
b. Utility Allowance	\$	<input type="text"/>	b. Utility Allowance	\$	<input type="text"/>
c. (<i>Line 29.a. + Line 29.b.</i>)	\$	<input type="text"/>	c. (<i>Line 30.a. + Line 30.b.</i>)	\$	<input type="text"/>

PART VII DETERMINING GROSS TENANT CONTRIBUTION (GTC)

Decision: (check- one)

- ☐ A. If tenant receives rental assistance (*RA*) enter Line 28 on Line 31 below. If Line 28 exceeds Line 29. c. , go to Decision B since this Tenant will not receive RA..
- ☐ B. If tenant does *not receive RA* and this project receives Plan II Interest Credit, enter the greater of Line 28 or Line 29. c. , (but not to exceed Line 30.c.) on Line 31 below.
- ☐ C. If tenant does *not receive RA* and this project is a Plan 1 , Full Profit or Labor Housing project complete Lines C.1. thru C.3. and enter Line C.3. on Line 31.

- | | | |
|----------------------------------|----|----------------------|
| 1. Enter Line 30.c. | \$ | <input type="text"/> |
| 2. Add Plan I Surcharge (if any) | \$ | <input type="text"/> |
| 3. Total (enter on Line 31) | \$ | <input type="text"/> |

PART IX-DETERMINING NET TENANT CONTRIBUTION (NTC)

31. GTC (From PART VIII)	\$	<input type="text"/>
32. Utility Allowance (Line 29.b. or Line 30.b.)	\$	<input type="text"/>
33. Final NTC (Line 31 minus Line 32)	\$	<input type="text"/>

(Amount Tenant pays Borrower for rent. If Line 33 is negative, Borrower pays the difference to Tenant for utilities.)

PART X - CERTIFICATION BY BORROWER

I certify that the information on this form has been verified as required by federal law and the tenant household

☐ is eligible to live in the unit, or ☐ has been granted ineligible occupancy by RHS.

a. Date Signed

b. Signature of Borrower or Borrower's Representative