

**Mississippi Home Corporation  
TENANT INCOME CERTIFICATION**

Initial Certification       Recertification       Transfer

Effective Date: \_\_\_\_\_  
Move-in Date: \_\_\_\_\_  
Project Move-in Date: \_\_\_\_\_

**PART I - DEVELOPMENT DATA**

Development Name: \_\_\_\_\_ County: \_\_\_\_\_ BIN #: \_\_\_\_\_  
Address: \_\_\_\_\_ Unit Number: \_\_\_\_\_ # Bedrooms: \_\_\_\_\_

**PART II. HOUSEHOLD COMPOSITION**

HH Mbr #	Last Name	First Name & Middle Initial	Relationship to Head of Household	Date of Birth (MM/DD/YY)	Age	F/T Student* (Y or N)	Social Security or Alien Reg. No.
1			<b>HEAD</b>				
2							
3							
4							
5							
6							
Total # of HH Mbrs =							

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

HH Mbr #	(A) Employment or Wages	(B) Soc. Security/Pensions	(C) Public Assistance	(D) Other Income (Child support, Contribution, etc.,)
<b>TOTALS</b>	\$ _____	\$ _____	\$ _____	\$ _____
Add totals from (A) through (D), above			<b>TOTAL INCOME (E):</b>	\$ _____

**PART IV. INCOME FROM ASSETS**

Hshld Mbr #	(F) Type of Asset	(G) C/I	(H) Cash Value of Asset	(I) Annual Income from Asset
<b>TOTALS:</b>			\$ _____	\$ _____
Enter Column (H) Total If over \$5000		\$ _____ X	Passbook Rate 0.06%	= (J) Imputed Income \$ _____
Enter the greater of the total of column I or J: imputed income			<b>TOTAL INCOME FROM ASSETS (K)</b>	\$ _____
<b>(L) Total Annual Household Income from all Sources [Add (E) + (K)]</b>				\$ _____

**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**

TOTAL ANNUAL HOUSEHOLD INCOME  
 FROM ALL SOURCES:  
 From item (L) on page 1

\$

Current Income Limit per Family Size: \$ \_\_\_\_\_

Household Income at Move-in: \$ \_\_\_\_\_

Household Meets  
 Income Restriction  
 at:

- 30%    50%  
 60%    61-80%  
 <80%    >80%

Household Size at Move-in: \_\_\_\_\_

**RECERTIFICATION ONLY:**

**Current Income Limit x 140%:**  
 \$ \_\_\_\_\_  
**Household Income exceeds 140% at  
 recertification:**  
 Yes    No

**PART VI. RENT**

Tenant Paid Rent \$ \_\_\_\_\_  
 Utility Allowance \$ \_\_\_\_\_

Federal Rent Assistance: \$ \_\_\_\_\_  
 Other non-optional charges: \$ \_\_\_\_\_  
 Owner-based rental assistance: \$ \_\_\_\_\_

GROSS RENT FOR UNIT:  
 (Tenant paid rent plus Utility Allowance, &  
 other non-optional charges)

\$

Unit Meets Rent Restriction at:  
 30%    50%    60%    80%

\*Maximum Gross Rent **LIMIT** for this unit: \$ \_\_\_\_\_

\*Note: Maximum gross rent is the rental amount listed on the applicable Income & Rent Limits Chart issued by the MHC and effective for this certification period.

**PART VII. STUDENT STATUS**

ARE **ALL** OCCUPANTS FULL TIME STUDENTS?

- Yes    No

If yes, Enter student explanation\*  
 (also attach documentation)

**\*Student Explanation:**

- TANF assistance  
 Job Training Program  
 Single parent/dependent child  
 Married/joint return  
 Former Foster Care participant

**PART VIII. CERTIFICATION NOTES/COMMENTS**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**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 Development.

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

\_\_\_\_\_  
 DATE

## INSTRUCTIONS FOR COMPLETING TENANT INCOME CERTIFICATION

*This form is to be completed by the owner or an authorized representative.*

### Part I - Development Data

Check the appropriate box for Initial Certification (move-in), Recertification (annual recertification), or Transfer.

Move-in Date Enter the date the tenant has or will take occupancy of the unit.

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.

Project Move-in Date Enter the original move-in date prior to a transfer

Development 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).

Address Enter the address of the building.

Unit Number Enter the unit number.

# Bedrooms Enter the number of bedrooms in 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	-	Adult co-tenant	O	-	Other family member
C	-	Child	F	-	Foster child(ren)/adult(s)
L	-	Live-in caretaker	N	-	None of the above

Enter the date of birth, age, student status, and social security number or alien registration number for each occupant.

Total No. of Household members: Total up the number of household members listed above. This is the total number of occupants in the unit. This number should also match the applicable lease agreement.

*If there are more than 6 occupants, use an additional sheet of paper to list the remaining household members and attach it to the certification.*

### Part III - Annual Income

**See HUD Handbook 4350.3 for complete instructions on verifying and calculating income, including acceptable forms of verification.**

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

#### Part IV - Income from Assets

See HUD Handbook 4350.3 for complete instructions on verifying and calculating income from assets, including acceptable forms of verification.

From the third party verification forms obtained from each asset source, list the gross amount anticipated to be received during the twelve months from the effective date of the certification. List the respective household member number from Part II and complete a separate line for each member.

Column (F) List the type of asset (i.e., checking account, savings account, etc.)

Column (G) Enter C (for current, if the family currently owns or holds the asset), or I (for imputed, if the family has disposed of the asset 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 the anticipated annual income from the asset (i.e., savings account balance multiplied by the annual interest rate).

TOTALS Add the total of Column (H) and Column (I), respectively.

If the total in Column (H) is greater than \$5,000, you must do an imputed calculation of asset income. Enter the Total Cash Value, multiply by 0.60% and enter the amount in (J), Imputed Income.

Row (K) Enter the greater of the total in Column (I) or (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 adult household member, including emancipated minors, 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, and NO LATER than the effective date of the TIC.

#### Part V – Determination of Income Eligibility

Total Annual Household Income from all Sources 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 Household size at move-in For recertifications, only. Enter the household income from the move-in certification. On the adjacent line, enter the number of household members from the

Household Meets Income Restriction      move-in certification.  
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 recertifications only. Multiply the Current Maximum Move-in Income Limit by 140% and enter the total. Below, indicate whether the household income exceeds that total. If the Gross Annual Income at recertification is greater than 140% of the current income limit, then the available unit rule must be followed.

**Part VI – Rent**

Tenant Paid Rent      Enter the amount the tenant pays toward rent (not including rent assistance payments such as Section 8 and FmHA).

Rent Assistance      Enter the amount of rent assistance, if any. If no rental assistance is given, insert “0”.

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 garage rent, storage lockers, charges for services provided by the development, etc.

Owner-based rental assistance      Enter the amount of rent assistance that is provided by the owner, if any. If owner-based rental assistance is given, insert “0”.

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.

**Part VII - Student Status**

If all household members are full time\* students, check “yes”. If at least one household member is not a full time student, check “no”. 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.*

**Part VIII – Certification Notes and Comments**

Insert any notes and/or comments that are pertinent to the household’s eligibility.

**SIGNATURE OF OWNER/REPRESENTATIVE**

It is the responsibility of the owner or the owner’s representative to sign and date this document immediately following execution by the resident(s). At move-in, it is recommended that the TIC be signed by the owner/manager no earlier than 5 days prior to the effective date of the certification. No signatures should be acquired after the effective date of the certification.

The responsibility of documenting and determining eligibility (including completing and signing the Tenant Income Certification form) and ensuring such documentation is kept in the tenant file is extremely important and should be conducted by someone well trained in tax credit compliance.

*These instructions should not be considered a complete guide on tax credit compliance. The responsibility for compliance with federal program regulations lies with the owner of the building(s) for which the credit is allowable.*