INSTRUCTIONS FOR COMPLETING
INCOME CERTIFICATION

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

Income Certification

Check the appropriate box for Initial Certification (move-in), Recertification (annual recertification), or Other (enter brief explanation). If a household transfers from a unit, enter the unit number the household transferred from in the area below the Move-in Date.

Part I - Development Data

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

Effective Date
In general, for initial certifications, the effective date is the date of move-in. In general, the effective date for recertifications should be the anniversary of the original move-in date. For detailed guidance, please refer to “Demystifying Effective Dates” [https://www.tdhca.state.tx.us/pmcomp/compFaq.htm](https://www.tdhca.state.tx.us/pmcomp/compFaq.htm)

NOTE: Verifications must be valid (i.e., dated no more than 120 days prior to the effective date of the certification).

Part I - Development Data

Property 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 (for Housing Tax Credit (HTC), Exchange and TCAP programs--from IRS Form 8609).

TDHCA #
Enter the assigned Program and CMTS ID Numbers.

Unit Number
Enter the unit number.

# Bedrooms
Enter the number of bedrooms in the unit.

Part II - Household Composition

List the last name, first name and middle initial of 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
A - Adult co-tenant
C - Child
L - Live-in caretaker
S - Spouse
O - Other family member
F - Foster child(ren)/adult(s)

Enter the date of birth (in MM/DD/YYYY format), student status, and last four digits of the Social Security number/Alien Registration number for each occupant. Student Status is determined by the academic institution.

If there are more than seven 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 or first-hand documentation 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. List the respective household member number from Part II and complete a separate line for each income-earning member.

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 (e.g., TANF, general assistance, etc.).

**Column (D)**
Enter the annual amount of alimony, child support, unemployment benefits, or any other income regularly received by the household.

**TOTALS**
Add the total for each Column (A, B, C, and D), respectively.

**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 or first-hand documentation obtained from each asset source, list the gross amount anticipated to be received during the twelve months from the effective date of the (re)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 (e.g., 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 (e.g., 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 $5,000 or greater, an imputed calculation of asset income must be made. Enter the Total Cash Value of Assets, multiply by .06% (effective 2/1/2015) 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 household member age 18 or older must sign and date the Income Certification. For move-in, it is recommended that the Income Certification be signed no earlier than 120 days prior to the effective date of the certification.

---

**Part V – Determination of Income Eligibility**

**Program Type**
Mark the program(s) for which this household’s unit will be designated toward the property’s occupancy requirements.

**Household Meets Income Restriction at:**
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. If the property has multiple programs, select the appropriate set-aside(s) for each program.

If the owner has elected the Average Income minimum set aside, selection of the income level of the household on this form will be considered the owner’s designation described in §42(g)(1)(C)(ii)(1). The gross rent for the unit cannot exceed the income level designated by the owner or owner representative.
Part VI - RENT

If the source of the Rental Assistance is Federal, check “yes,” otherwise, check “no”.

For households that receive Federal Rental Assistance, select the type of assistance from the listed options. If the correct type of Federal Rental Assistance is not listed, check “Other Federal Rental Assistance” and list the type of rental assistance.

Part VII - Student Status – HTC, TCAP, Exchange and Tax Exempt Bond Programs Only

Check A, B, or C, as applicable. If A is checked, no further information is needed. If B is checked, list the name(s) of the occupant(s) who are part time student(s) and provide documentation of part time student status for at least one member of the household. If C is checked, questions 1-5 must be completed. If none of the exemptions apply, the household is ineligible to rent the unit.

A full time student is defined as one who attends an educational institution full time for any part of 5 months in a calendar year (the five calendar months need not be consecutive). Full time is determined by the school the student attends.

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).

The responsibility of documenting and determining eligibility (including completing and signing the 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 program compliance.

These instructions should not be considered a complete guide on program compliance. The responsibility for compliance with federal and state program regulations lies with the owner of the property.

Part VIII – Household Demographics

Part VIII must be completed by the household and not auto-generated or completed by staff. Failure to comply will result in a finding of noncompliance.

The Household member completing the third page of the Income Certification should follow the instructions on the form.