

NJHMFA LOW INCOME TAX CREDIT TENANT INCOME SELF CERTIFICATION

(FOR 100% LITC PROPERTIES RECERTIFICATIONS ONLY)

Effective Date: _____

Move-in Date: _____
(MM/DD/YYYY)

PART I. DEVELOPMENT DATA

Property Name: _____
Address: _____

County: _____ BIN #: NJ _____
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/YYYY)	F/T Student (Y or N)	Social Security or Alien Reg. No.
1			HEAD			
2						
3						
4						
5						
6						
7						
8						

TOTAL ANNUAL HOUSEHOLD INCOME: \$ _____
(INCLUDE INCOME FROM ASSETS)

Tenant Paid Rent \$ _____

Rental Assistance Type _____

Utility Allowance \$ _____

Rental Assistance _____

Other non-optional charges _____

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

Unit Meets Rent Restriction at:

80% 60% 50% 40% 30% 20%

Maximum Rent Limit for this unit: \$ _____

ARE ALL OCCUPANTS FULL TIME STUDENTS? yes no

If yes, circle exception and attach documentation

Student Exception:

- 1 TANF assistance
- 2 Job Training Program
- 3 Single parent/dependent child
- 4 Married/joint return
- 5 Previously in Foster Care

HOUSEHOLD CERTIFICATION & SIGNATURES

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)

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