



# ECKAN TENANT INCOME CERTIFICATION KANSAS HOME CHDO PROGRAM

Each applicant applying for housing financed through the Kansas HOME CHDO Program, must complete the Kansas Tenant Income Certification. Please answer each question presented below and do not leave any questions blank. You may request the assistance of the ECKAN Community Center or an agent at the ECKAN Central Office.

Property Address: \_\_\_\_\_ City \_\_\_\_\_

Bedroom Type:  3 bedroom  Rent: \_\_\_\_\_ Utility Allowance: \_\_\_\_\_

Initial Certification: \_\_\_\_\_ Recertification: \_\_\_\_\_ Effective Date: \_\_\_\_\_

**A. HOUSEHOLD INFORMATION:**

	Head	Co-Head / Spouse	Member #1	Member #2	Member #3	Member #4
Last Name						
First Name						
Relationship	Self					
Sex	M / F	M / F	M / F	M / F	M / F	M / F
Current Age						
Social Security #						
Date of Birth						
Marital Status (Single, Married, Divorced, Separated or Widowed)						

Total number of Household Members expected to occupy the unit during the next 12 months: \_\_\_\_

Please note: If you have a disability and would like the Owner / Agent to be knowledgeable of it when processing your application and income certification, or when showing you available rental units, Fair Housing law states YOU must inform the Owner / Agent.

**B. HOUSEHOLD INCOME INFORMATION**

Complete questions 1-14 below and then list all pertinent sources of income on the chart. (Do not include income from assets. Assets are handled under Section “C”).

- 1. Are any of the occupants receiving rental assistance through a Section 8 Voucher? Yes  No
- 2. Is any member of your household employed full-time, part-time, or seasonally? Yes  No   
If yes, number in the household employed? \_\_\_\_\_
- 3. Does any member of your household not currently employed expect to work for any period during the next twelve (12) months? (Persons 18 years or older) Yes  No
- 4. Does any member of your household work for someone who pays them cash or who earn tips? (Persons 18 years or older) Yes  No
- 5. Is any member of your household on leave of absence from work due to lay-off, medical, maternity, or military leave? Yes  No
- 6. Does anyone in your household now receive or expect to receive unemployment? Yes  No
- 7. Does any member of your household now receive or expect to receive child support? Yes  No
- 8. Is any member of your household entitled to receive child support that he/she is not now getting? Yes  No
- 9. Is any member of your household entitled to receive or expect to receive alimony? Yes  No
- 10. Is any member of your household entitled to alimony that he/she is not now getting? Yes  No
- 11. Does any member of your household receive or expect to receive public assistance? Yes  No
- 12. Does any member of your household receive or expect to receive social security or SSI benefits? Yes  No
- 13. Does any member of your household receive or expect to receive income from a pension or annuity? Yes  No
- 14. Does any member of your household receive regular cash contributions from individuals not living in the unit or from any agencies? Yes  No

TENANT	SOURCE OF INCOME	AMOUNT (\$)

\*The **Total Gross Annual Income** from above is \$ \_\_\_\_\_

### C. HOUSEHOLD ASSET INFORMATION

Please check yes or no to the following questions regarding assets. Checking “yes” indicates you have the asset and checking “no” indicates you do not have the asset. After answering the questions, complete the chart below.

1. Does anyone in the household have a checking account? Yes  No
2. Does anyone in the household have a savings account? Yes  No
3. Does anyone in the household have Certificates of Deposits? Yes  No
4. Does anyone in the household have stocks or bonds? Yes  No
5. Does anyone in the household have IRA’s or Other Retirement Funds? Yes  No
6. Does anyone in the household have Mutual Funds? Yes  No
7. Does anyone in the household have Trust Accounts? Yes  No
8. Does anyone in the household have Life Insurance (Whole or Universal) Yes  No
9. Does anyone in the household have personal property held as an investment? Yes  No
10. Does anyone in the household have real estate? Yes  No   
 If yes, is the real estate for sale or rent? Yes  No
11. Do you have any assets you disposed of within the last two years? Yes  No   
 If yes, please explain: \_\_\_\_\_
12. Do you have any other current assets? Yes  No   
 If yes, please explain: \_\_\_\_\_

Asset Description or Type of Asset	Value of Asset (\$)	Actual Income from Asset (\$)	Current Asset or Disposed of for less than Fair Market Value
<b>Total Actual Income</b>			

**Total Imputed Income:** If the Total Value of all Assets exceeds \$5,000 multiply the Total Value of Assets by 2% and list the amount here: \$ \_\_\_\_\_. If the total amount does not exceed \$5,000 put zero (0)

Compare the “Actual” amount in the chart to the “Imputed” amount above, and add the greater of imputed or actual asset income to the Total Gross Annual Income from Part B (\*). Write the answer in the space below:

**Total Anticipated Gross Annual Household Income** (including assets): \$ \_\_\_\_\_

**Maximum Allowed for this household size per the Income/Rent Chart:** \$ \_\_\_\_\_

