Exhibit _	_		
Effective	5/1	/2022	2

Date	

Affidavit of Eligibility for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting per the City's Affordable Housing Rules for Unilateral Agreements (2/2010)

Projec	t and Unit				
Project			Applicant		
Name	Malina at	Koa Ridge	name		
Unit No.		BR / BA	▼ For-sale		
NO.					
Affida	vit of Eligibi	lity for AH Unit			
The und	ersigned Applica	nt(s) certify the following:			
I am a c	itizen of the Unit	ed States or a resident alien.		☐ Yes	□No
	east eighteen (18			☐ Yes	□ No
	miciled in the Sta ne affordable hoເ	ite of Hawaii and have a bona fide inte using unit.	nt to reside	☐ Yes	□No
		me does not exceed the allowed annua See Table A for income limits	al income for the target group	☐ Yes	□No
	ufficient gross ho	usehold income to qualify for the loan ase.		☐ Yes	□No
I, either this	individually or wapplication, and	rith a household member, do not own	or have not owned for one year prior to sing, a majority interest in fee simple or	☐ Yes	□No
		eived assistance under a program desi cy to assist persons to purchase afford	- , , , ,	☐ Yes	□No
I will be	an owner-occup	ant of the affordable housing unit duri d cannot rent out the unit during that	ng the	☐ Yes	□No
	-		tions to some requirements under certain	circumstar	ices.
and agre	By signing this Ae(s) to the above	• • • • • • • • • • • • • • • • • • • •	and affirm(s) that the undersigned has/ha	ive read, ui	nderstand(s)
1)	Applicant signa	ture	Print name		Date
2)	Co-applicant 1 s	ignature	Print name		Date
3)	Co-applicant 2 s	signature	Print name		Date

Date					
------	--	--	--	--	--

Application for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting per the City's Affordable Housing Rules for Unilateral Agreements (2/2010)

Project and	Unit						
Project				Building name	е		
	na at Koa Ridge			(if applicable)			
Date See at							
address 94-	1180 Alaea Street, Unit	101, Wa	aipahu, Hi 9679)/			
Unit	,						
No.	BR /	_ BA		☑ For-sale			
	<u>.</u>						
Primary App	olicant						
First					Midd	lle name/	
name					initia		
Last							
name							
Address							
line 1							
Address							
line 2							
City			State				ZIP
,							code
Home		Mobile	9			Work	
phone		phone				phone	
Email							
address							
Photocopy of ID attached:	☐ Hawaii driver's licen	se	☐ Hawaii Sta	ate ID		Other gov't II	O (specify)
Co-Applican	t 1 (if applicable)						
First					Midd	lle name/	
name					initia		
Last							
name							
Address line 1							
ridaress inte 1							
Address line 2							
City			Ctata				ZIP
City			State				code
Home		Mobile	2			Work	COUC
phone		phone				phone	
Email		٠٠.٠				11	
address							
Photocopy of							
ID attached:	☐ Hawaii driver's licen	se	☐ Hawaii Sta	ate ID		Other gov't II	O (specify)

Exhibit __ Effective 5/1/2022

Co-Applica	nt 2 (if applicable)			
First			Middle name/	
name			initial	
Last				
name				
Address				
line 1				
Address				
line 2				
City		State		ZIP
				code
Home	Mobi	ile	Work	
phone	phon	e	phone	
Email				
address				
Photocopy of ID attached:	☐ Hawaii driver's license	☐ Hawaii State ID	☐ Other gov't	D (specify)

Primary Household Member					
First			Middle name/		
name			initial		
Last					
name		1		T	
Birth date		Employed?	☐ Yes ☐ No	Full-time student?	☐ Yes ☐ No
Relationship to Primary Applicant Choose response from options in List (1) below		Self			
Employer 1					
Address 1		Address 2			
City	State	1		ZIP	
·				code	
Start	Phone				
date					
Employer 2					
Address 1		Address 2			
City	State			ZIP code	
Start	Phone			1	
date					
Employer 3					
Address 1		Address 2			
City	State			ZIP code	
Start	Phone			10000	
date					
(1) Choices for this category are: Self					
Spouse/Partner					
Parent					
Child					
Sibling					
Extended Family					
Friend (not related)					
Caretaker					

Please provide a photo ID for every household member

Middle name Initial	Household Member 2						
Last name Birth date Employed? Yes No Full-time student? Yes No No No No No No No N	First			Middle name/			
Birth date Employed? Yes No Full-time student? Yes No No No No No No No N	name			initial			
Birth date Employed? Yes No Full-time student? Yes No No No No No No No N	Last						
Employed? Yes No student? Yes No No No No No No No N	name						
City State ZiP Code Code	Birth date		Employed?	☐ Yes ☐ No		☐ Yes	□ No
### Address 1 Address 2 City	Relationship to Primary Applicant						
Address 1							
City State ZIP code Start date Address 2 City State ZIP code City State ZIP code Start Address 1 Address 2 City State ZIP code Start Address 2 City State ZIP code Start Address 3 Household Member 3 First Middle name/ initial Last name Birth date Employed? Yes No Full-time student? Yes No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City State ZIP code Start Address 1 Address 2 City State ZIP code Start ZIP code Employer 2 Address 1 Address 2 City State ZIP code Start ZIP code Employer 2 Address 1 Address 2	Employer 1						
Start date	Address 1		Address 2				
Start date Phone Employer 2 Address 2 ZIP code Start date Phone Code C	City	State					
Address 1 Address 2 City State Phone Household Member 3 First name Birth date Birth date Bemployer 1 Address 1 Address 2 City Address 3 Address 2 Address 4 First name Birth date Birth date Birth date Choose response from options in List (1) Employer 1 Address 1 Address 2 City State Phone Full-time student? Yes No Full-time student? Yes No Address 2 City State Phone Employer 2 Address 1 Address 2	Start	Phone			1		
Address 1 City State Phone Household Member 3 First name Last name Birth date Employed? Yes No Full-time student? Yes No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City State Phone State Address 2 City State Phone State Full-time student? Yes No Sull-time student? Yes No Address 2 ZiP code Start date Employer 2 Address 2 City State Address 2 ZiP code Start Code	date						
City State ZIP code Start date Phone Household Member 3 First Middle name/ initial Last name Birth date Employer 1 Address 1 Address 1 Address 2 City State ZIP code State ZIP code	Employer 2						
Start date Phone	Address 1		Address 2				
Start date Phone	City	State	ı		7IP		
Start date Household Member 3 First name Last name Birth date Employed? Yes No Full-time student? Yes No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City State Phone Start date Employer 2 Address 2 City State Address 2							
Household Member 3 First	Start	Phone			1		
First name Middle name/ initial Last name Birth date Employed? Yes No Full-time student? Yes No No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City State ZIP code Start date Phone Employer 2 Address 1 Address 2 City State ZIP code City State ZIP code Employer 2 Address 1 Address 2 City State ZIP code Employer 2 Address 1 Address 2 City State ZIP code Employer 2 City State ZIP code Employer 3 Address 4 City Phone State ZIP code City Code State City Code State City City City City City State City City City City	date						
First name Middle name/ initial Last name Birth date Employed? Yes No Full-time student? Yes No No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City State ZIP code Start date Phone Employer 2 Address 1 Address 2 City State ZIP code City State ZIP code Employer 2 Address 1 Address 2 City State ZIP code Employer 2 Address 1 Address 2 City State ZIP code Employer 2 City State ZIP code Employer 3 Address 4 City Phone State ZIP code City Code State City Code State City City City City City State City City City City							
name Last name Birth date Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City Start date Phone Address 2 City Address 1 Address 2 City Start Description: Address 2 City Start Description: Address 2 City Address 3 Address 2 City Address 4 Address 5 Address 5 City Address 7 Address 8 Address 9 City Address 9 City Address 1 Address 9 City Address 1 Address 2	Household Member 3						
Last name Birth date Employed? Yes No Full-time student? Yes No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 1 Address 2 City Start date Employer 2 City State Address 2 City State Phone State Address 2 City State Phone State Address 2 City State Address 2	First			Middle name/			
name Employed? Yes No Full-time student? Yes No Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 2 City State ZIP code Start date Phone date Employer 2 City State ZIP code Address 2				initial			
Birth date							
Relationship to Primary Applicant Choose response from options in List (1) Employer 1 Address 2 City State ZIP code Start date Employer 2 Address 2 City State ZIP code Start Address 2			T		T = 11		
Choose response from options in List (1) Employer 1 Address 2 City State ZIP code Start date Phone Employer 2 Address 2 City State ZIP code City State ZIP code Start Phone ZIP code			Employed?	☐ Yes ☐ No		☐ Yes	□No
Employer 1 Address 1 City State Phone Start date Employer 2 Address 2 Address 2 Address 2 Address 2 Address 2 Address 2 Figure 1 Address 2 City State State Phone Phone							
Address 1 City State Phone Employer 2 Address 2 Address 2 Address 2 Address 2 ZIP code							
City State ZIP code Start date Employer 2 Address 1 City State ZIP code ZIP code ZIP code ZIP code ZIP code ZIP code Address 2	Employer 1						
Start date Phone Employer 2 Address 2 City State ZIP code Start Phone	Address 1		Address 2				
Start date Employer 2 Address 1 City State State Phone Phone ZIP code Start Phone	City	State					
Employer 2 Address 1 Address 2 City State ZIP code Start Phone		Phone					
Address 1 Address 2 City State ZIP code Start Phone							
City State ZIP code Start Phone							
Start Phone code	Address 1		Address 2				
Start Phone	City	State					
date		Phone			•		
	date						

Household Member 4						
First			Middle name/			
name			initial			
Last						
name				1		
Birth date		Employed?	☐ Yes ☐ No	Full-time student?	□ Yes □] No
Relationship to Primary Applicant						
Choose response from options in List (1)						
Employer 1						
Address 1		Address 2				
City	State	•		ZIP code		
Start	Phone			-1		
date						
Employer 2						
Address 1		Address 2				
City	State	1		ZIP code		
Start	Phone					
date						
Household Member 5						
First			Middle name/			
name			initial			
Last						
name				T =		
Birth date		Employed?	☐ Yes ☐ No	Full-time student?	☐ Yes ☐] No
Relationship to Primary Applicant						
Choose response from options in List (1)						
Employer 1						
Address 1		Address 2				
City	State	•		ZIP code		
Start	Phone					
date						
Employer 2						
Address 1		Address 2				
City	State	1		ZIP		
,				code		
Start	Phone			•		
date						
			<u> </u>	<u> </u>		

Household Member 6					
First			Middle name/		
name			initial		
Last					
name				_	
Birth date		Employed?	☐ Yes ☐ No	Full-time student?	☐ Yes ☐ No
Relationship to Primary Applicant					
Choose response from options in List (1)					
Employer					
Address 1		Address 2			
City	State			ZIP	
,				code	
Start	Phone				
date					
Household Member 7					
First			Middle name/		
name			initial		
Last					
name		1		1	
Birth date		Employed?	☐ Yes ☐ No	Full-time student?	☐ Yes ☐ No
Relationship to Primary Applicant					
Choose response from options in List (1)					
Employer					
Address 1		Address 2			
City	State	1		ZIP	
				code	
Start	Phone				
date					

Household Asset Verification					
Choose asset type from options in List (2) below					
Asset 1	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
Asset 2	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
Asset 3	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
market value	mark 0/6 ir none listed				
Asset 4	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
Asset 5	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
Asset 6	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
Asset 7	Name of financial				
Asset type (2)	institution				
Current market value	Annual Percentage Yield or mark 0% if none listed				
The rest value	- Hallie of the Hotel				
Asset 8	Name of financial				
Asset type (2)	institution				
Current	Annual Percentage Yield or				
market value	mark 0% if none listed				
(2) Choices for this category are: Bonds Certificate of Deposit (CD) Checking account Life insurance Mutual funds Real estate Savings account Stock Other					

Household Income

Please list all income earners, including those part-time and self-employed.

Do not include income of minor children, full-time students up to 23 years old, and live-in aides.

Income Household Member	1
Choose income source type from options	n List (3) below
Last	First
name	name
Income source 1	Income source 1
type (3)	Employer name
Annual	
income	
Income source 2	Income source 2
type (3)	Employer name
Annual	
income	
Income source 3	Income source 3
type (3)	Employer name
Annual	
income	
Income source 4	Income source 4
type (3)	Employer name
Annual	
income	

(3) Choices for this category are:

Alimony

Child support

Gross pay

Investment income

No income

Pension

Retirement

Social Security

Unemployment compensation

Other

Please provide pay stubs, bank statements and other supporting documents

Income Household Member 2				
Choose income source type from options in List (3)				
Last	First			
name	name			
Income source 1	Income source 1			
type (3)	Employer name			
Annual				
income	income			
Income source 2	Income source 2			
type (3)	Employer name			
Annual				
income				
Income source 3	Income source 3			
type (3)	Employer name			
Annual				
income				

Income Household Member 3				
Choose income source type from options	in List (3)			
Last	First			
name	name			
Income source 1	Income source 1			
type (3)	Employer name			
Annual	·			
income				
Income source 2	Income source 2			
type (3)	Employer name			
Annual	·			
income				
Income source 3	Income source 3			
type (3)	Employer name			
Annual				
income				

Income Household Member 4				
Last	First			
name	name			
Income source 1	Income source 1			
type (3)	Employer name			
Annual	Annual			
income				
Income source 2	Income source 2			
type (3)	Employer name			
Annual				
income				
Income source 3	Income source 3			
type (3)	Employer name			
Annual				
income		ļ		

Income Household Member 5			
Last	First		
name	name		
Income source 1	Income source 1		
type (3)	Employer name		
Annual			
income			
Income source 2	Income source 2		
type (3)	Employer name		
Annual			
income			
Income source 3	Income source 3		
type (3)	Employer name		
Annual			
income			

(Add pages as needed)

Income limit, AMI group			
Income limit \$	AMI group	120	%

Table A. Household Income Limits for Affordable Housing (2022)

To be eligible for City-regulated Affordable Housing, a household's gross income may not exceed the following limits. These figures are updated annually. **AMI** is the Area Median Income.

	Income limits for Affordable Housing units designated for households earning:		
		120% of AMI	140% of AMI
1-person household		\$109,800	\$128,100
2-person household		\$125,400	\$146,300
3-person household		\$141,120	\$164,640
4-person household		\$156,720	\$182,840
5-person household		\$169,320	\$197,540
6-person household		\$181,800	\$212,100
7-person household		\$194,400	\$226,800

Documentation

Please include the following documentation with this application:

- Applicant AH eligibility affidavit (Page 1 of this application)
- Statement that household member does not intend to work for a year (required if no income is selected)
- Most recent two months' pay stubs or other documentation of income, including Social Security and VA benefits
- Last two years' tax returns, including W2s, 1099s and applicable schedules
- Bank and other financial institution statements, showing interest rate or interest earned
- Mortgage pre-qualification (for sale) or draft lease agreement (rental)
- Photo ID of all household members
- Other supporting documents (divorce decree, marriage certificate, etc.)

Under penalties of perjury, I declare that I have examined all of this application, including accompanying documents, and, to the best of my knowledge, information, and belief, all of the statements contained herein are true, correct and complete.

1)			
	Applicant signature	Print name	Date
2)			
•	Co-applicant 1 signature	Print name	Date
3)			
-	Co-applicant 2 signature	Print name	Date