



**HOUSING PRESERVATION THROUGH
NATURALLY OCCURRING AFFORDABLE HOUSING (NOAH)
GRANT PROGRAM**

HOMES PLAN

Apply Online: <https://www.zoomgrants.com/gprop.asp?donorid=2326&limited=480>

October 16, 2023



Miami-Dade County
Public Housing and Community Development
701 NW 1st Court, 16th Floor – Miami, FL 33136



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Mayor

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GENERAL INFORMATION

The Miami-Dade County Department of Public Housing and Community Development (PHCD) is issuing this Request for Applications (RFA) for Housing Preservation through Naturally Occurring Affordable Housing (NOAH) Rehabilitation Grant Program to be funded with \$8 million from the Miami-Dade County General Fund. As part of the HOMES Plan, owners or developers of small rental properties may apply for grant funds to make improvements to units in need of rehabilitation. Small rental properties as defined by PHCD as having 50 units or less. At the discretion of PHCD, developments of more than 50 units may be considered. In addition, owners of individual condominium units may also apply for grant funds for units in need of rehabilitation. However, the condominium owner's rehabilitation requests must be consistent with the rules and regulations of the condominium association and the condominium must sign-off on all work.

NOAH refers to unsubsidized privately owned residential properties that are "affordable" without the benefit of government subsidies. The goal is to preserve affordability by providing Miami-Dade County's low- and moderate-income households with access to decent housing that is affordable, convenient to jobs, transportation, and essential services. All rehabilitated units must be located within Miami-Dade County.

The NOAH Grant Program is dedicated to owners or developers of rental property in need of rehabilitation, and owners of condominium homeownership units in need of rehabilitation allowing owners and developers to apply for grant funding to assist with improvements to their properties.

NOAH Grants are distributed on a reimbursable basis.

POLICIES

The grant application will be competitively scored. Applications will be funded in order by highest score and will be funded until funds are depleted. The scoring evaluation criteria provides preferences for rehabilitation activities that are ready to proceed, preferences for low-income units among the NOAH set-aside units, and leveraging by showing proof of other funding sources. Bonus points are provided for NOAH set-aside units rehabilitated with proximity to community services and/or rapid transit services. Threshold requirements include evidence of site control, which may include options to purchase.

If relocation of tenants is needed as part of the application, tenants must be relocated within the property that is being rehabilitated. The NOAH Grant may not be used to pay for relocation expenses.

***Applicant/Project Eligibility Multi-Family Rental**

- Grant funds to assist owners and developers of approximately 1 to 50 affordable housing rental unit(s)
- At its discretion, PHCD can review and modify the maximum number of units allowed
- Renovations or repairs that preserve or improve the basic livability, safety or utility of the unit(s) and must conform to Florida Building Codes
- Eligible items: impact windows, impact doors, HVAC and mechanical systems, roof replacement as deemed necessary to meet insurance requirements or roof repair, energy and water saving improvements of an existing structure and any other life safety issues.
- Rents for NOAH set-aside units must not exceed the income limits published annually by the Florida Housing Finance Corporation, which are up to 140% of the Area Median Income per household.
- Owners/developers are required to execute a grant agreement and rental regulatory agreement.

***Affordability Period Multi-Family Rental**

Affordability Period*: Minimum of 5 years; Maximum of 15 years

- 5 years / \$1,000 to \$8,000 grant amount per unit
- 10 years / \$8,001 to \$16,000 grant amount per unit

- 15 years / \$16,001 to \$25,000 grant amount per unit

* In cases where the applicant is non-compliant with terms of the grant agreement, or upon the sale or transfer of ownership of a multi-family rental building prior to the end of the affordability period, the applicant will be required to pay the non-compliance fees. **(See attachment 3).**

All terms can be reviewed and modified at the discretion of PHCD based on underwriting assessments and need.

***Applicant/Project Eligibility Owner-Occupied Condominium Units**

- Grant funds to rehabilitate and preserve owner-occupied condominium units
- The homeowner must reside in the unit and it must be their primary residence and provide proof of homestead exemption status
- Mortgage payments and homeowners' association/maintenance fees must be current
- Renovations or repairs that preserve or improve the basic livability, safety or utility of the unit
- Eligible items: impact windows, impact doors, HVAC and mechanical systems, roof replacement/repair, energy and water saving improvements of an existing structure and any other life safety issues
- HOA Approval of unit rehabilitation is required
- Income limits are up to 140% of the Area Median Income per household
- Asset limitation for condominium unit owners must not exceed \$15,000, not including retirement income
- Owners are required to execute a grant agreement

All terms can be reviewed and modified at the discretion of PHCD based on underwriting assessments and need.

Application Period:

Applications will be open for a period beginning on October 10, 2023, and ending on November 9, 2023 at 11:59 pm. PHCD may extend the closing date for this application indefinitely until funding is exhausted. A notification will be placed on PHCD's website when funding is exhausted.

DEFINITIONS

- **Area Median Income (AMI)** - is a calculation utilizing data from the United States American Community Survey that is done by the United States Department of Housing and Urban Development (HUD) each year. It is used to determine the income limits and eligibility of applicants for various federal housing programs. HUD uses a family size of four as the basis of the calculation. For example, for 2023, Miami-Dade County's AMI for a family of four is \$74,700. See attachment 5.
- **Condominium Association (COA)** - A legal entity that governs a condominium, where each individual condominium owner owns their unit and has a joint ownership interest in the common areas.
- **Grant** – Financial assistance given by a government to an organization for a specific purpose. It does not have to be paid back under most conditions as outlined in the agreement between the government and the grantee. Grants are usually used to incentivize a project.

- **Household income** – It is the sum of all types of income within a taxable year of persons living together. In some cases, certain income is not included such as child support. The household income determines the eligibility for government program and is also used by the United States Census for statistical data.
- **HOMES PLAN** – The HOMES PLAN is an \$85 million program utilizing general revenue funds created by Mayor Cava to address the affordable housing crisis in Miami-Dade County for both homeowners and renters. It is a multi-prong approach to address the housing crisis. The acronym stands for **H**- Housing Preservation using such programs as NOAH and Weatherization Assistance Program; **O**-Opening new doors through innovation programs through the utilization of the Workforce Housing Incentive Program (WHIP) and incentivizing landlords to expand the existing supply of workforce housing. **M**-Mortgage and utilities relief for struggling homeowners. By providing direct relief payments of up to \$1500 to struggling homeowners who are delinquent on their mortgages, homeowners insurance, HOA fees etc. **E**- The Emergency Rental Assistance Program (ERAP) which has keep over 25,000 families in their homes. **S**- Secure new housing program such as the Development Inflation Adjustment Fund (DIAF) is a part of the HOMES PLAN which provides developers additional funds to complete housing developments that need additional capital to move their projects to completion.
- **Naturally Occurring Affordable Housing (NOAH)** – As part of Mayor Cava’s HOMES PLAN. NOAH has 8 million dollars in general revenue funds for PHCD to administer the program. NOAH includes a loan program and a grant component to assist owners and developers of rental properties or condominium homeowners to receive grant or loan funds to make improvements to housing units in need of rehabilitation which do not have any previous government subsidies. The goal of the program is to preserve affordability.
- **Permits** – A document issued by a local government when an individual or company wants to engage in the construction of a new or rehabilitated structure. The local government must grant permission for the activity to proceed based on the local rules and regulations governing the activity.
- **Rental Regulatory Agreement** - A recorded restrictive covenant on a multi-family rental property which will run with the title and be binding on the property owner and its successors.
- **Unsubsidized** – It is housing that is leased or bought at the market rents rates of an area. It is housing that is without the help of a government housing program or at a discounted rate.
- **Zoom Grants** - A cloud-based platform that offers a user friendly interface for grant-makers and applicants. It is also allows the grant-maker to manage the program awarded from start to finish including application submission, review and award tracking.

NOAH GRANT PROGRAM MULTI-FAMILY APPLICATION

This application must be submitted online in ZoomGrants.

<https://www.zoomgrants.com/gprop.asp?donorid=2326&limited=480>

Faxed applications will **not** be accepted. Any document provided via a link (i.e. dropbox) will not be accepted.

If you have questions or require assistance, please call PHCD at (786) 469-2165 or email CommunityDevelopmentServices@miamidade.gov

Applicant's name: _____

Applicant's address: _____

City: _____ State: _____ Zip _____

Business Phone: (____) _____ Home Phone: (____) _____

Property Address: _____ Property City: _____

E-mail Address: _____

1. No. of Buildings _____ 2. No. of Apartment units _____ 3. No. of parking spaces _____

4. No. of Stories _____ 5. No. of Commercial units _____ 6. Is Building vacant? _____

7. Year built _____ 8. Current Rent \$ _____/month 9. Proposed Rent \$ _____/month

Applicant is: Individual(s) or General Partnership Limited Partnership Corporation LLC

Applicant's Tax ID #: _____

*The NOAH Grant Program is flexible. All terms can be modified at the discretion of PHCD based on underwriting assessments and need, and other community development considerations may play a factor in the affordability period. For further information about the program call (786) 469-2165.

SCOPE OF WORK NARRATIVE:

NOAH GRANT PROGRAM CONDOMINIUM HOMEOWNERSHIP APPLICATION

NOTE: THE HOMEOWNER IS CONSIDERED THE APPLICANT.

This application must be submitted online in ZoomGrants.

<https://www.zoomgrants.com/qprop.asp?donorid=2326&limited=480>

If you have questions or require assistance, please call PHCD at (786) 469-2165 or email CommunityDevelopmentServices@miamidade.gov

Applicant's name: _____ Unit #: _____

Applicant's address: _____

City: _____ State: _____ Zip _____

Applicant's Phone: (____) _____ HOA Phone: (____) _____

Property Address: _____ Property City: _____

Applicant's E-mail Address: _____

HOA Contact: _____ HOA E-mail Address: _____

Applicant is: Individual Corporation Trust

Applicant's Tax ID #: _____

| I. PROPOSED PROJECT COST | II. PROPOSED SOURCE OF FUNDS |
|--|---|
| Purchase or refinance \$ _____ | |
| Rehabilitation \$ _____ | PHCD Grant \$ _____ |
| 10% contingency reserve \$ _____ | Other sources/loan(s) (including equity) \$ _____ |
| Construction period insurance* \$ _____ | \$ _____ |
| Construction period rent up cost* \$ _____ | Total Sources \$ _____ |
| Other Financing/Interest \$ _____ | |
| Total Proposed Project Cost \$ _____ | |
| Number of months from closing to construction completion _____ | |
| *PHCD will calculate these for you | |

SCOPE OF WORK NARRATIVE:

AGREEMENT

The undersigned applies for the grant in this application and represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application and the attachments are true and are made for the purpose of obtaining the grant. Verification and other relevant information may be obtained from any source named in this application and/or in attachments. PHCD is authorized to discuss this application and information contained herein or in the exhibits and attachments hereto with any necessary party referenced herein.

Reasonable access to the property will be provided for Miami-Dade County staff for monitoring and inspections. The property title holder authorizes the release to PHCD of any existing municipal code inspection reports cited against the subject property.

The undersigned assumes responsibility for selecting and using licensed contractors which conform to PHCD standards. PHCD does not warrant the performance of any contractor.

I hereby state that I have read and fully understand the above statements as it applies to me and do herein express my consent to disclosure of information for the purpose of determining eligibility.

Owner's Signature: _____

Date: _____

Address: _____

Phone No: _____

ATTACHMENTS – FOR MULTI-FAMILY RENTAL APPLICANTS

1. Scope of work with cost estimates from a licensed and insured contractor
2. Current rent roll
3. Photos of property (include areas located within the scope of work)
4. Site control proof (deed or purchase and sale agreement)
5. Copy of leases
6. Income verification with backup
7. Florida Housing Finance Corporation Income and Rent Limits

ATTACHMENTS – FOR OWNER OCCUPIED CONDO APPLICANTS

1. Scope of work with cost estimates from a licensed and insured contractor
2. Photos of property (include areas located within the scope of work)
3. Site control proof (copy of deed or proof of ownership)
4. Income verification with backup
5. Florida Housing Finance Corporation Income Limits

| EVALUATION CRITERIA – MULTI-FAMILY RENTAL | | |
|--|--------------------|-------------------|
| (Points will only be awarded when supporting documentation is included in the application) Maximum 123 points | | |
| 1. Ability to Proceed | | |
| Did the applicant provide a general contractor agreement, construction contract or quotes from licensed and insured contractors? | 35 points | |
| | Yes | 35 points |
| | No | 0 points |
| 2. NOAH Set-Aside Units – Low-Income Preference: Among the NOAH set-aside units proposed for rehabilitation, select the appropriate income level below: | | |
| NOAH set-aside units at or below 80% of the Area Median Income (AMI) | 40 points | |
| NOAH set-aside units at 81- 90% of the AMI | 30 points | |
| NOAH set-aside units at 91-100% of the AMI | 20 points | |
| NOAH set-aside units at 101-120% of the AMI | 10 points | |
| NOAH set-aside units at 121-140% of the AMI | 5 points | |
| 3. Leveraging | | |
| Did the applicant provide documentation of other loans, grants, or funding resources, or owner's funds to support the rehabilitation activity? | 25 points | |
| | Yes | 25 points |
| | No | 0 points |
| BONUS SECTION | | |
| B1. Proximity to Community Services and Rapid Transit Services, Recreation and Health Facilities* (Choose the appropriate answer: a, b, c or d) | | |
| a. Located within approximately ½ mile of the Strategic Miami Area Rapid Transit Corridors (see SMART plan map at https://www.miamidade.gov/transit/library/smart-plan-map.pdf) | 1 point | |
| b. Located within approximately ½ mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 3 points | |
| c. Located within ¼-mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 5 points | |
| d. Located within 1/10-mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 7 points | |
| e. Proximity: Recreation and/or health facilities within 1 mile of the rehabilitation site | 1 point | |
| B2. Is the rehabilitation activity located in a vulnerable area per the Map of Eligible Block Groups by Vulnerability Ranking? – See Attachment 2 To verify eligible areas, use this weblink: https://miamidade.live/CDBGViewer | | |
| Most vulnerable areas (Red areas) | 8 points | |
| Fourth most vulnerable areas (Orange areas) | 6 points | |
| Third most vulnerable (Yellow areas) | 5 points | |
| Second most vulnerable (Light Green areas) | 3 points | |
| Least vulnerable 20% (Dark Green areas) | 1 point | |
| B3. Not-for-Profit as member of development team. Not-for-Profit must be at least 51% owner. | | |
| | Yes | 2 points |
| | No | 0 points |
| B4. Does the application provide for the installation of appliances or cooling systems with Energy Star ratings? | | |
| | Yes | 5 points |
| | No | 0 points |
| | TOTAL SCORE | 123 points |

*Bonus points are available if the proposed development is located within ½-mile, ¼-mile, or 1/10-mile of a Strategic Miami Area Rapid Transit (SMART) Plan Corridor, Metro-Rail or Metro-Mover station, or a stop along the Transit-Way. Note, the quarter-mile distance from housing to transit must be walkable. There must not be natural or man-made barriers, such as lakes, canals, gated communities, highways, fences, etc., that restrict the ability of residents to walk to transit. **The final determination of actual walkable distance will be determined by PHCD utilizing the Miami-Dade Transit Trip Planner tool and Google Maps to measure distance from the proposed development application site to a transit stop.**

| EVALUATION CRITERIA – OWNER OCCUPIED CONDO HOMEOWNERSHIP | | |
|--|------------------|-------------------|
| (Points will only be awarded when supporting documentation is included in the application) Maximum 123 points | | |
| 1. Ability to Proceed | | |
| Did the applicant provide a general contractor agreement, construction contract or quotes from licensed and insured contractors? | 35 points | |
| | Yes 35 points | |
| | No 0 points | |
| 2. Income Level of Applicant: Select the appropriate income level below: | | |
| Applicant's income is at or below 80% of the Area Median Income (AMI) | 40 points | |
| Applicant's income is at 81-90% of the AMI | 30 points | |
| Applicant's income is at 91 -100% of the AMI | 20 points | |
| Applicant's income is at 101- 120% of the AMI | 10 points | |
| Applicant's income is at 121-140% of the AMI | 5 points | |
| 3. Leveraging | | |
| Did the applicant provide documentation of other loans, grants, or funding resources, or owner's funds to support the rehabilitation activity? | 25 points | |
| | Yes 25 points | |
| | No 0 points | |
| BONUS SECTION | | |
| B1. Proximity to Community Services and Rapid Transit Services, Recreation and Health Facilities* (Choose the appropriate answer: a, b, c or d), then answer e | | |
| a. Located within approximately ½ mile of the Strategic Miami Area Rapid Transit Corridors (see SMART plan map at https://www.miamidade.gov/transit/library/smart-plan-map.pdf) | 1 point | |
| b. Located within approximately ½ mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 3 points | |
| c. Located within ¼-mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 5 points | |
| d. Located within 1/10-mile of rapid transit (Tri-Rail, Metrorail, Metromover or Miami-Dade Transitway) | 7 points | |
| e. Proximity: Recreation and/or health facilities within 1 mile of the rehabilitation site | 1 point | |
| B2. Is the rehabilitation activity located in a vulnerable area per the Map of Eligible Block Groups by Vulnerability Ranking? – See Attachment 2 To verify eligible areas, use this weblink: https://miamidade.live/CDBGViewer | | |
| Most vulnerable areas (Red areas) | 10 points | |
| Fourth most vulnerable areas (Orange areas) | 8 points | |
| Third most vulnerable (Yellow areas) | 6 points | |
| Second most vulnerable (Light Green areas) | 3 points | |
| Least vulnerable 20% (Dark Green areas) | 1 point | |
| B3. Does the application provide for the installation of appliances or cooling systems with Energy Star ratings? | | |
| | 5 points | |
| | Yes 5 points | |
| | No 0 points | |
| TOTAL SCORE | | 123 points |

*Bonus points are available if the proposed development is located within ½-mile, ¼-mile, or 1/10-mile of a Strategic Miami Area Rapid Transit (SMART) Plan Corridor, Metro-Rail or Metro-Mover station, or a stop along the Transit-Way. Note, the quarter-mile distance from housing to transit must be walkable. There must not be natural or man-made barriers, such as lakes, canals, gated communities, highways, fences, etc., that restrict the ability of residents to walk to transit. **The final determination of actual walkable distance will be determined by PHCD utilizing the Miami-Dade Transit Trip Planner tool and Google Maps to measure distance from the proposed development application site to a transit stop.**

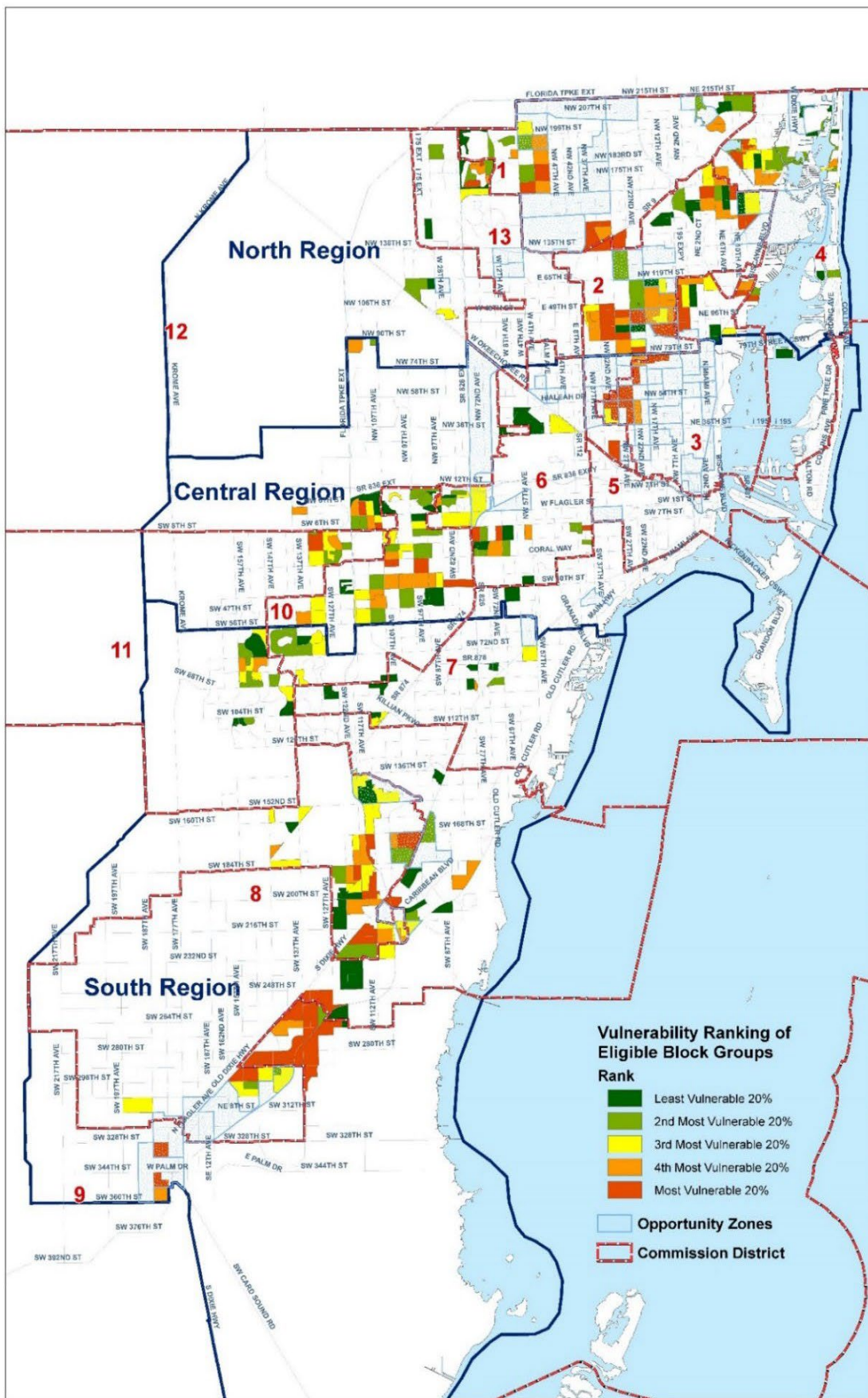
Attachment 1 - Scope of Work

The following items life and safety items will be prioritized in the NOAH Grant Program.

| | |
|---|----|
| Instructions: specify the estimated cost* for each rehabilitation component listed below: | |
| Demolition | \$ |
| Site Lighting improvements | \$ |
| Environmental conditions such as asbestos, lead and other hazards | \$ |
| Doors and Windows: (Impact or non-impact with shutters) installation | \$ |
| Roof replacement and significant roof repair | \$ |
| Railings | \$ |
| ADA Accessibility upgrades | \$ |
| Fire Alarm installation | \$ |
| Hard Wired Smoke Detectors installation | \$ |
| Illuminated Exit Lights | \$ |
| Security (cameras only) installation | \$ |
| HVAC upgrades with energy star appliances | \$ |
| Plumbing upgrades with energy star appliances | \$ |
| Electrical upgrades including electrical panels and use of energy star appliances. | \$ |
| Hardening | \$ |
| Other: describe | \$ |
| Total | \$ |

*** Cost estimates must come from a licensed and insured contractor.**

Attachment 2 - Eligible Block Groups by Vulnerability Ranking



Attachment 3 – Grant Non-Compliance Fee Schedule

Scenario 1: 15-year Grant

| Non-Compliance | Required Repayment |
|-----------------------|------------------------------------|
| Year 1 | 14/15 of the original grant amount |
| Year 2 | 13/15 of the original grant amount |
| Year 3 | 12/15 of the original grant amount |
| Year 4 | 11/15 of the original grant amount |
| Year 5 | 10/15 of the original grant amount |
| Year 6 | 9/15 of the original grant amount |
| Year 7 | 8/15 of the original grant amount |
| Year 8 | 7/15 of the original grant amount |
| Year 9 | 6/15 of the original grant amount |
| Year 10 | 5/15 of the original grant amount |
| Year 11 | 4/15 of the original grant amount |
| Year 12 | 3/15 of the original grant amount |
| Year 13 | 2/15 of the original grant amount |
| Year 14 | 1/15 of the original grant amount |

Scenario 2: 10-year Grant

| Non-Compliance | Required Repayment |
|-----------------------|-----------------------------------|
| Year 1 | 9/10 of the original grant amount |
| Year 2 | 8/10 of the original grant amount |
| Year 3 | 7/10 of the original grant amount |
| Year 4 | 6/10 of the original grant amount |
| Year 5 | 5/10 of the original grant amount |
| Year 6 | 4/10 of the original grant amount |
| Year 7 | 3/10 of the original grant amount |
| Year 8 | 2/10 of the original grant amount |
| Year 9 | 1/10 of the original grant amount |

Scenario 3: 5-year Grant

| Non-Compliance | Required Repayment |
|-----------------------|----------------------------------|
| Year 1 | 4/5 of the original grant amount |
| Year 2 | 3/5 of the original grant amount |
| Year 3 | 2/5 of the original grant amount |
| Year 4 | 1/5 of the original grant amount |

Request for Verification of Employment

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Instructions: **Lender** – Complete items 1 through 7. Have applicant complete item 8. Forward directly to employer named in item 1.
Employer – Please complete either Part II or Part III as applicable. Complete Part IV and return directly to lender named in item 2.
The form is to be transmitted directly to the lender and is not to be transmitted through the applicant or any other party.

Part I – Request

| | |
|--------------------------------------|--------------------------------------|
| 1. To (Name and address of employer) | 2. From (Name and address of lender) |
| | |

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.

| | | | |
|------------------------|----------|---------|-------------------------------|
| 3. Signature of Lender | 4. Title | 5. Date | 6. Lender's Number (Optional) |
| | | | |

I have applied for a mortgage loan and stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

| | |
|---|---------------------------|
| 7. Name and Address of Applicant (include employee or badge number) | 8. Signature of Applicant |
| | |

Part II – Verification of Present Employment

| | | |
|-----------------------------------|----------------------|---|
| 9. Applicant's Date of Employment | 10. Present Position | 11. Probability of Continued Employment |
| | | |

| | | |
|--|--|---|
| 12A. Current Gross Base Pay (Enter Amount and Check Period) <input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Weekly \$ _____ | 13. For Military Personnel Only Pay Grade _____ Type _____ Monthly Amount _____ Base Pay \$ _____ | 14. If Overtime or Bonus is Applicable, Is its Continuance Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|--|---|

| 12B. Gross Earnings | | | | Rations | Monthly Amount | 15. If paid hourly – average hours per week _____ |
|---------------------|------------------------|-----------|-------------|----------------------------|----------------|---|
| Type | Year To Date | Past Year | Past Year 1 | | | |
| Base Pay | Thru _____ \$ _____ | \$ _____ | \$ _____ | Flight or Hazard | \$ _____ | 16. Date of applicant's next pay increase _____ |
| Overtime | \$ _____ | \$ _____ | \$ _____ | Clothing | \$ _____ | |
| Commissions | \$ _____ | \$ _____ | \$ _____ | Quarters | \$ _____ | 17. Projected amount of next pay increase _____ |
| Bonus | \$ _____ | \$ _____ | \$ _____ | Pro Pay | \$ _____ | 18. Date of applicant's last pay increase _____ |
| Total | \$ 0.00 | \$ 0.00 | \$ 0.00 | Overseas or Combat | \$ _____ | 19. Amount of last pay increase _____ |
| | | | | Variable Housing Allowance | \$ _____ | |

20. Remarks (If employee was off work for any length of time, please indicate time period and reason)

Part III – Verification of Previous Employment

| | | | | |
|------------------------------|--|----------------|-------------------------|-------------|
| 21. Date Hired _____ | 23. Salary/Wage at Termination Per (Year) (Month) (Week) | | | |
| 22. Date Terminated _____ | Base _____ | Overtime _____ | Commissions _____ | Bonus _____ |
| 24. Reason for Leaving _____ | | | 25. Position Held _____ | |

Part IV – Authorized Signature - Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

| | | |
|--|----------------------------------|---------------|
| 26. Signature of Employer | 27. Title (Please print or type) | 28. Date |
| | | |
| 29. Print or type name signed in Item 26 | | 30. Phone No. |
| | | |

HUD release: 5/15/2023
Effective: 5/15/2023

2023 Income Limits and Rent Limits
Florida Housing Finance Corporation
SHIP and HHRP Programs

| County (Metro) | Percentage Category | Income Limit by Number of Persons in Household | | | | | | | | | | Rent Limit by Number of Bedrooms in Unit | | | | | |
|---|---------------------|--|---------|---------|---------|---------|---------|---------|---------|--------------|--------------|--|-------|-------|-------|-------|-------|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 0 | 1 | 2 | 3 | 4 | 5 |
| Martin County (Port Saint Lucie MSA) | 30% | 17,800 | 20,350 | 24,860 | 30,000 | 35,140 | 40,280 | 45,420 | 50,560 | Refer to HUD | Refer to HUD | 445 | 476 | 621 | 814 | 1,007 | 1,199 |
| | 50% | 29,650 | 33,900 | 38,150 | 42,350 | 45,750 | 49,150 | 52,550 | 55,950 | 59,290 | 62,678 | 741 | 794 | 953 | 1,101 | 1,228 | 1,356 |
| | 80% | 47,450 | 54,200 | 61,000 | 67,750 | 73,200 | 78,600 | 84,050 | 89,450 | 94,864 | 100,285 | 1,186 | 1,270 | 1,525 | 1,761 | 1,965 | 2,168 |
| Median: 84,800 | 120% | 71,160 | 81,360 | 91,560 | 101,640 | 109,800 | 117,960 | 126,120 | 134,280 | 142,296 | 150,427 | 1,779 | 1,906 | 2,289 | 2,643 | 2,949 | 3,255 |
| 140% | 83,020 | 94,920 | 106,820 | 118,580 | 128,100 | 137,620 | 147,140 | 156,660 | 166,012 | 175,498 | 2,075 | 2,224 | 2,670 | 3,083 | 3,440 | 3,797 | |
| Miami-Dade County (Miami-Miami Beh-Kendall HMF A, Miami-Ft. Lauderdale-West Palm Bof) | 30% | 21,700 | 24,800 | 27,900 | 30,950 | 35,140 | 40,280 | 45,420 | 50,560 | Refer to HUD | Refer to HUD | 542 | 581 | 697 | 826 | 1,007 | 1,199 |
| | 50% | 36,150 | 41,300 | 46,450 | 51,600 | 55,750 | 59,900 | 64,000 | 68,150 | 72,240 | 76,368 | 903 | 968 | 1,161 | 1,341 | 1,497 | 1,651 |
| | 80% | 57,800 | 66,050 | 74,300 | 82,550 | 89,200 | 95,800 | 102,400 | 109,000 | 115,584 | 122,189 | 1,445 | 1,548 | 1,857 | 2,146 | 2,395 | 2,642 |
| Median: 74,700 | 120% | 86,760 | 99,120 | 111,480 | 123,840 | 133,800 | 143,760 | 153,600 | 163,560 | 173,376 | 183,283 | 2,169 | 2,323 | 2,787 | 3,220 | 3,594 | 3,964 |
| 140% | 101,220 | 115,640 | 130,060 | 144,480 | 156,100 | 167,720 | 179,200 | 190,820 | 202,272 | 213,830 | 2,530 | 2,710 | 3,251 | 3,757 | 4,193 | 4,625 | |
| Monroe County | 30% | 22,800 | 26,050 | 29,300 | 32,550 | 35,200 | 40,280 | 45,420 | 50,560 | Refer to HUD | Refer to HUD | 570 | 610 | 732 | 846 | 1,007 | 1,199 |
| | 50% | 38,000 | 43,400 | 48,850 | 54,250 | 58,600 | 62,950 | 67,300 | 71,650 | 75,950 | 80,290 | 950 | 1,017 | 1,221 | 1,410 | 1,573 | 1,736 |
| | 80% | 60,800 | 69,450 | 78,150 | 86,800 | 93,750 | 100,700 | 107,650 | 114,600 | 121,520 | 128,464 | 1,520 | 1,628 | 1,953 | 2,256 | 2,517 | 2,778 |
| Median: 97,100 | 120% | 91,200 | 104,160 | 117,240 | 130,200 | 140,640 | 151,080 | 161,520 | 171,960 | 182,280 | 192,696 | 2,280 | 2,442 | 2,931 | 3,385 | 3,777 | 4,168 |
| 140% | 106,400 | 121,520 | 136,780 | 151,900 | 164,080 | 176,260 | 188,440 | 200,620 | 212,660 | 224,812 | 2,660 | 2,849 | 3,419 | 3,949 | 4,406 | 4,863 | |
| Nassau County (Jacksonville MSA) | 30% | 18,600 | 21,250 | 24,860 | 30,000 | 35,140 | 40,280 | 45,420 | 50,560 | Refer to HUD | Refer to HUD | 465 | 498 | 621 | 814 | 1,007 | 1,199 |
| | 50% | 31,000 | 35,400 | 39,850 | 44,250 | 47,800 | 51,350 | 54,900 | 58,450 | 61,950 | 65,490 | 775 | 830 | 996 | 1,150 | 1,283 | 1,416 |
| | 80% | 49,600 | 56,650 | 63,750 | 70,800 | 76,500 | 82,150 | 87,800 | 93,500 | 99,120 | 104,784 | 1,240 | 1,328 | 1,593 | 1,841 | 2,053 | 2,266 |
| Median: 93,300 | 120% | 74,400 | 84,960 | 95,640 | 106,200 | 114,720 | 123,240 | 131,760 | 140,280 | 148,680 | 157,176 | 1,860 | 1,992 | 2,391 | 2,761 | 3,081 | 3,400 |
| 140% | 86,800 | 99,120 | 111,580 | 123,900 | 133,840 | 143,780 | 153,720 | 163,660 | 173,460 | 183,372 | 2,170 | 2,324 | 2,789 | 3,221 | 3,594 | 3,967 | |
| Okaloosa County (Crestview-Fort Walton Beach- Destin MSA) | 30% | 19,600 | 22,400 | 25,200 | 30,000 | 35,140 | 40,280 | 45,420 | 50,560 | Refer to HUD | Refer to HUD | 490 | 525 | 630 | 814 | 1,007 | 1,199 |
| | 50% | 32,600 | 37,250 | 41,900 | 46,550 | 50,300 | 54,000 | 57,750 | 61,450 | 65,170 | 68,894 | 815 | 873 | 1,047 | 1,210 | 1,350 | 1,490 |
| | 80% | 52,150 | 59,600 | 67,050 | 74,450 | 80,450 | 86,400 | 92,350 | 98,300 | 104,272 | 110,230 | 1,303 | 1,396 | 1,676 | 1,936 | 2,160 | 2,383 |
| Median: 98,600 | 120% | 78,240 | 89,400 | 100,560 | 111,720 | 120,720 | 129,600 | 138,600 | 147,480 | 156,408 | 165,346 | 1,956 | 2,095 | 2,514 | 2,905 | 3,240 | 3,576 |
| 140% | 91,280 | 104,300 | 117,320 | 130,340 | 140,840 | 151,200 | 161,700 | 172,060 | 182,476 | 192,903 | 2,282 | 2,444 | 2,933 | 3,389 | 3,780 | 4,172 | |
| Okeechobee County | 30% | 14,580 | 19,720 | 24,860 | 30,000 | 34,700 | 37,250 | 39,850 | 42,400 | Refer to HUD | Refer to HUD | 364 | 428 | 621 | 808 | 931 | 1,028 |
| | 50% | 22,500 | 25,700 | 28,900 | 32,100 | 34,700 | 37,250 | 39,850 | 42,400 | 44,940 | 47,508 | 562 | 602 | 722 | 835 | 931 | 1,028 |
| | 80% | 35,950 | 41,100 | 46,250 | 51,350 | 55,500 | 59,600 | 63,700 | 67,800 | 71,904 | 76,013 | 898 | 963 | 1,156 | 1,335 | 1,490 | 1,643 |
| Median: 61,800 | 120% | 54,000 | 61,680 | 69,360 | 77,040 | 83,280 | 89,400 | 95,640 | 101,760 | 107,856 | 114,019 | 1,350 | 1,446 | 1,734 | 2,004 | 2,235 | 2,467 |
| 140% | 63,000 | 71,960 | 80,920 | 89,880 | 97,160 | 104,300 | 111,580 | 118,720 | 125,832 | 133,022 | 1,575 | 1,687 | 2,023 | 2,338 | 2,607 | 2,878 | |

Florida Housing Finance Corporation (FHFC) income and rent limits are based upon figures provided by the United States Department of Housing and Urban Development (HUD) and are subject to change. Updated schedules will be provided when changes occur.