



Note: This form must be completed by the management agent and signed by both the management agent and applicant/tenant. The form must be used at move-in only.

HOME-ARP requires that funds be used to primarily benefit individuals and families in specified “qualifying populations.” Any individual or family who meets the criteria for these populations is eligible to receive assistance or services funded through HOME-ARP. For more information on qualifying population reference page 3, and pages 3-8 of [HUD’s Final HOME-ARP Implementation Notice](#).

It is important owners/management agents review the project’s HOME-ARP funding agreement to ensure all program requirements are met.

Applicant/Tenant Name: _____

SSN # (last 4 digits): _____

Unit#/Address: _____

Date: _____

The applicant/tenant meets one of the following qualifying populations:

1. Homeless — as defined in 24 CFR 91.5 – Definitions	<input type="radio"/> Yes <input type="radio"/> No
2. At risk of Homelessness — as defined in 24 CFR 91.5	<input type="radio"/> Yes <input type="radio"/> No
3. Fleeing, or Attempting to Flee, Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking — as defined by HUD and 24 CFR 5.2003 – Definitions .	<input type="radio"/> Yes <input type="radio"/> No
4. Other Populations (as defined in 24 CFR 91.5) where providing supportive services or assistance would prevent the family’s homelessness or would serve those with the greatest risk of housing instability including the following. HUD defines these populations as individuals and households who do not qualify under any of the populations as listed above in items #1-3: <ul style="list-style-type: none">Households who have previously qualified as homeless as defined in #1 above, but are currently housed due to temporary or emergency assistance≤30% AMI households who are experiencing severe cost burden by paying more than 50% of household income toward housing costs≤50% AMI households that meet one of the conditions of being “at risk of homelessness” as defined above in #2	<input type="radio"/> Yes <input type="radio"/> No
5. Preferences Among Qualifying Populations <ul style="list-style-type: none">Veterans and Families that include a Veteran Family Member that meet the criteria for one of the qualifying populations described above<ul style="list-style-type: none">Note: The Ohio Department of Development defines Veteran as “Veteran: A person who served in the active military, naval, or air service, regardless of length of service, and who was discharged or released there from. Veteran excludes a person who received a dishonorable discharge from the Armed Forces or was discharged or dismissed from the Armed Forces by reason of the sentence of a general court-martial. The length of service restrictions under 38 U.S.C. 5303A do not apply.”Owners/management agents must use documentation from the Supportive Services for Veteran Families (SSVF) program to verify the household meets one of the Qualifying Population (QP) criteria.Seniors that meet the criteria for one of the qualifying populations described aboveHouseholds recovering from substance abuse that meet one of the criteria for one of the qualifying populations described above	<input type="radio"/> Yes <input type="radio"/> No



HOME-ARP units restricted for occupancy by a Qualifying Population (QP) cannot exceed 50% AMI rent (i.e., Low HOME rents). A unit that receives project-based rental assistance and is occupied by a QP that pays no more than 30% of its adjusted income in rent may charge the rent allowable under the subsidy project.

HOME-ARP units which are low-income units, are subject to income targeting and rent requirements established under the HOME-ARP Rental Program rules. Specifically, restricted to households that are low-income as defined in 24 CFR 92.2 (“low-income households”) which is the requirement of High HOME units (i.e., income does not exceed 80 percent of the area median income or AMI. Rent is restricted at the lower of a rent equal to 30% of the adjusted household income with annual income at 65% AMI, or the Fair-Market Rent (FMR)).

Management Agent Signature

Applicant/Tenant Signature

Management Agent Printed Name

Applicant/Tenant Printed Name

Date

Date

Under penalty of perjury, I certify that the information provided herein is true and accurate to the best of my knowledge. The undersigned further understands that providing false representation herein constitutes fraud. False, misleading or incomplete information may result in the termination of the application or lease agreement.