

**MAYOR'S OFFICE OF HOUSING  
CITY AND COUNTY OF SAN FRANCISCO**



**EDWIN M. LEE  
MAYOR**

**OLSON LEE  
DIRECTOR**

PLEASE SUBMIT THIS APPLICATION TO THE BUILDING ONLY, NOT TO THE CITY.  
SEE INSTRUCTIONS BELOW. THANK YOU.

**Below Market Rate (BMR) Inclusionary Housing Program RENTAL LOTTERY Application  
Rincon Green, 333 Harrison Street, San Francisco, CA 94105**

Submit Application by November 15, 2012, 5pm to:

Rincon Green Apartments/BMR  
Lisa Moorehead-Carr  
1045 Mission Street  
San Francisco, California 94103  
Attention: Compliance Department

Dear BMR Rental Applicant,

Thank you for your interest in applying for a home through the San Francisco Below Market Rate (BMR) Inclusionary Housing Program as monitored by the San Francisco Mayor's Office of Housing.

It is important to understand both the guidelines for applying and qualifying for a BMR home as well as the restrictions placed on the homes. For an informal overview of the program, please review program overview at [www.sf-moh.org](http://www.sf-moh.org) or contact the rental agent for a paper copy. For legal documentation of the BMR program, please review the City and County of San Francisco Inclusionary Affordable Housing Monitoring and Procedures Manual at [www.sf.gov.org](http://www.sf.gov.org). This Manual governs all BMR units marketed at this time. Finally, please review the application instructions before completing your application.

You must submit one complete application to the rental agent listed on the formal posting for the desired unit (included in this application) in order to be considered for the home. Duplicate applications will be eliminated from the lottery.

Should you place high in the lottery list, you will be required to submit a number of required income documents within 5 working days of being contacted after the lottery. You should have these documents prepared before the lottery in case you are a winner. Please see the list of required post-lottery documents at the end of this application.

For specific questions regarding this development and general application questions, please contact the rental agent directly.

Thank you for making San Francisco your home. We wish you luck with your application!

Sincerely,  
San Francisco Mayor's Office of Housing  
Inclusionary Housing Program

### 333 Harrison Street, “Rincon Green Apartments,” Unit Information

<b>Posting Date</b>	10/15/12
<b>Type of Unit</b>	Mayor’s Office of Housing Residential Inclusionary Housing Below Market Rate Rental Program ( <a href="http://sf-moh.org/index.aspx?page=907">Visit http://sf-moh.org/index.aspx?page=907 for program information</a> )
<b>Development Name</b>	Rincon Green Apartments
<b>Address</b>	333 Harrison Street San Francisco, California 94105
<b>Number and Type of BMR Units</b>	49 Units: 29 Studio Units 18 One Bedroom Units 2 Two Bedroom Units
<b>Neighborhood</b>	Rincon Hill
<b>Square Footage</b>	Studio Units – 455, 507 sq ft One Bedroom Units – 574, 576, 634, 664 sq ft Two Bedroom Units - 956 sq ft
<b>Year Built</b>	2012
<b>Minimum and Maximum Allowable Income Level of Applicants</b>	<b>Multifamily Housing Program Non-HERA Maximum Income Levels 2012: 30% of Area Median Income</b> A one person household’ s income can’t exceed \$23,310.00 A two person household’ s income can’t exceed \$26,640.00 A three person household’ s income can’t exceed \$29,970.00 A four person household’ s income can’t exceed \$33,300.00 A five person household’ s income can’t exceed \$35,970.00
<b>Minimum Household Size Rule</b>	Households must be at least as many people as bedrooms in the unit.
<b>Maximum Household Size Rule</b>	Maximum occupancy is 2 persons per bedroom plus one additional household member. Children under age 6 do not count towards the maximum occupancy levels. Household must meet occupancy standards.
<b>Other Qualification Notes</b>	View the Resident Selection Criteria for Rincon Green Apartments at: <a href="http://www.emerald fund.com/bmr-rincongreenapartmentsresidentselectioncriteria">http://www.emerald fund.com/bmr-rincongreenapartmentsresidentselectioncriteria</a>
<b>Rent</b>	<b>Multifamily Housing Program Non-HERA Maximum Rent Levels 2012: 30% of Area Median Income</b>  Maximum Allowable Rents (Without Utility Allowance Deductions) Studio - \$582.00 1-Bedroom - \$624.00 2-Bedroom - \$749.00  Utility Allowances Studio- \$32.00 1 Bedroom- \$43.00 2 Bedroom- \$55.00  Final Monthly Tenant Rent (After Utility Allowance Deduction) Studio - \$550.00 1-Bedroom - \$581.00 2-Bedroom - \$694.00 (Please see unit information below for more detailed information on the units available, including

	minimum income required.)						
<b>Other Fees or Building Rules</b>	<p><b>Application Fee:</b> \$35.00</p> <p><b>Any Set Utility Fees:</b> Residents to pay own electric fees-utility allowance "TBD" Residents to pay trash, sewer and water utility allowance amount "TBD"</p> <p><b>Late Fees:</b> \$50.00 on the 6<sup>th</sup> business day</p> <p><b>Pet Fee Policy:</b> There are no pets allowed.</p> <p><b>Storage Unit Fee:</b> There is no storage available at the property.</p>						
<b>Parking</b>	Parking is available in addition to the maximum rent for \$225.00 a month.						
<b>Contact Person</b>	Lisa Moorehead-Carr						
<b>Phone</b>	415-546-9333						
<b>Email</b>	<a href="mailto:bmr@emeraldfund.com">bmr@emeraldfund.com</a>						
<b>Website</b>	<a href="http://www.rincongreen.com">http://www.rincongreen.com</a>						
<b>Application deadline</b>	<p>Applications due November 15, 2012 by 5:00pm.</p> <p>Applications must be received by 5pm on the due date. Postmarked applications received after the deadline will not be accepted.</p>						
<b>How To Obtain An Application</b>	<p>You must contact the building directly to receive an application for this development.</p> <p style="text-align: center;"><b>4 Ways to Obtain an Application</b></p> <p>(1) <b>From October 15, 2012 – October 19, 2012</b>, applications can be picked up in person from at the Koret Auditorium of the San Francisco Public Library Main Center at the following dates and times:</p> <p style="text-align: center;"><b>DATES AND TIMES</b></p> <table style="margin-left: auto; margin-right: auto;"> <tr> <td>10/15 (Mon)</td> <td>10:00 a.m. – 5:30 p.m.</td> </tr> <tr> <td>10/17 (Wed)</td> <td>3:00 p.m. – 6:00 p.m.</td> </tr> <tr> <td>10/19 (Fri)</td> <td>12:00 p.m. – 5:30 p.m.</td> </tr> </table> <p style="text-align: center;"><b>LOCATION</b></p> <p style="text-align: center;">The San Francisco Public Library Main Center Room: Koret Auditorium 100 Larkin Street San Francisco, CA 94102</p> <p>(2) <b>From October 22, 2012 – November 15, 2012</b>, applications can be picked up in person Mondays, Wednesdays and Fridays from 10:00 am. – 12:00 pm and 1:00 pm - 4:00 pm ONLY, at the following address:</p> <p style="text-align: center;">1045 Mission Street San Francisco, California 94103</p> <p>(3) Applications can be downloaded from the following website anytime until November 15, 2012:</p> <p style="text-align: center;"><a href="http://www.emeraldfund.com/bmr-rincongreenapartmentsapplication">http://www.emeraldfund.com/bmr-rincongreenapartmentsapplication</a></p>	10/15 (Mon)	10:00 a.m. – 5:30 p.m.	10/17 (Wed)	3:00 p.m. – 6:00 p.m.	10/19 (Fri)	12:00 p.m. – 5:30 p.m.
10/15 (Mon)	10:00 a.m. – 5:30 p.m.						
10/17 (Wed)	3:00 p.m. – 6:00 p.m.						
10/19 (Fri)	12:00 p.m. – 5:30 p.m.						

	(4) Applications are also available at the Information Sessions on 10/23/12, 11/05/12, and 11/14/12
<b>Address To Which Application Should Be Delivered</b>	Rincon Green Apartments/BMR Lisa Moorehead-Carr 1045 Mission Street San Francisco, California 94103 Attention: Compliance Department
<b>Open Houses</b>	<b>DATES AND TIMES</b> Wednesday, October 17, 2012, 6:00 PM - 8:00 PM Monday, October 29, 2012, 6:00 PM – 8:00 PM Thursday, November 8, 2012, 6:00 PM – 8:00 PM  <b>LOCATION</b> 434 Harrison Street San Francisco, California 94105
<b>Information Sessions</b>	<b>SESSION 1</b> <b>Tuesday, October 23, 2012</b> <b>6:00-7:30pm</b>  <b>LOCATION</b> The San Francisco Public Library Main Center Room: Latino Rooms A and B 100 Larkin Street San Francisco, CA 94102  <b>SESSION 2</b> <b>Monday, November 5, 2012</b> <b>3:30pm-5:30pm</b>  <b>LOCATION</b> The San Francisco Public Library Main Center Room: Koret Auditorium 100 Larkin Street San Francisco, CA 94102  <b>SESSION 3</b> <b>Wednesday, November 14, 2012</b> <b>1:00pm-3:00pm</b>  <b>LOCATION</b> The San Francisco Public Library Main Center Room: Koret Auditorium 100 Larkin Street San Francisco, CA 94102
<b>Lottery</b>	<b>December 5, 2012</b> <b>10:00am-5:00pm</b> The San Francisco Public Library Main Center

	Room: Koret Auditorium 100 Larkin Street San Francisco, CA 94102 Applicants do not need to be present at the lottery. Results will be posted to <a href="http://www.emeraldfund.com/bmr-rincongreenapartmentsapplication">http://www.emeraldfund.com/bmr-rincongreenapartmentsapplication</a> within two weeks of the lottery.
<b>Special Note(s)</b>	View this unit on <a href="http://affordablehousingonline.com">affordablehousingonline.com</a> , <a href="http://craigslist.org">Craig's List</a> and <a href="http://www.rincongreen.com">http://www.rincongreen.com</a>

**333 Harrison Street, "Rincon Green Apartments," Unit Information, continued.**

<b>BMR Unit #</b>	<b>Bedroom Count</b>	<b>Bath Count</b>	<b>Square Feet</b>	<b>Floor</b>	<b>Rent</b>	<b>Maximum Household Income Allowed</b>	<b>Minimum Monthly Household Income Required</b>	<b>Deposit Required</b>
106	STU	1	455	1	\$550.00	30% of AMI	\$1,375.00	\$582.00
115	STU	1	507	1	\$550.00	30% of AMI	\$1,375.00	\$582.00
121	STU	1	455	1	\$550.00	30% of AMI	\$1,375.00	\$582.00
149	STU	1	455	1	\$550.00	30% of AMI	\$1,375.00	\$582.00
156	STU	1	455	1	\$550.00	30% of AMI	\$1,375.00	\$582.00
206	STU	1	455	2	\$550.00	30% of AMI	\$1,375.00	\$582.00
242	STU	1	455	2	\$550.00	30% of AMI	\$1,375.00	\$582.00
247	STU	1	455	2	\$550.00	30% of AMI	\$1,375.00	\$582.00
249	STU	1	455	2	\$550.00	30% of AMI	\$1,375.00	\$582.00
256	STU	1	455	2	\$550.00	30% of AMI	\$1,375.00	\$582.00
306	STU	1	455	3	\$550.00	30% of AMI	\$1,375.00	\$582.00
313	STU	1	507	3	\$550.00	30% of AMI	\$1,375.00	\$582.00
342	STU	1	455	3	\$550.00	30% of AMI	\$1,375.00	\$582.00
349	STU	1	455	3	\$550.00	30% of AMI	\$1,375.00	\$582.00
356	STU	1	455	3	\$550.00	30% of AMI	\$1,375.00	\$582.00
406	STU	1	455	4	\$550.00	30% of AMI	\$1,375.00	\$582.00
442	STU	1	455	4	\$550.00	30% of AMI	\$1,375.00	\$582.00
447	STU	1	455	4	\$550.00	30% of AMI	\$1,375.00	\$582.00
449	STU	1	455	4	\$550.00	30% of AMI	\$1,375.00	\$582.00
456	STU	1	455	4	\$550.00	30% of AMI	\$1,375.00	\$582.00
506	STU	1	455	5	\$550.00	30% of AMI	\$1,375.00	\$582.00
542	STU	1	455	5	\$550.00	30% of AMI	\$1,375.00	\$582.00
547	STU	1	455	5	\$550.00	30% of AMI	\$1,375.00	\$582.00
549	STU	1	455	5	\$550.00	30% of AMI	\$1,375.00	\$582.00
606	STU	1	455	6	\$550.00	30% of AMI	\$1,375.00	\$582.00
642	STU	1	455	6	\$550.00	30% of AMI	\$1,375.00	\$582.00

649	STU	1	455	6	\$550.00	30% of AMI	\$1,375.00	\$582.00
706	STU	1	455	7	\$550.00	30% of AMI	\$1,375.00	\$582.00
747	STU	1	455	7	\$550.00	30% of AMI	\$1,375.00	\$582.00
307	1BR+S	1	634	3	\$581.00	30% of AMI	\$1,453.00	\$624.00
107	1BD+S	1	634	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
154	1BD+S	1	634	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
207	1BD+S	1	634	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
109	1BD	1	664	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
110	1BD	1	574	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
116	1BD	1	574	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
139	1BD	1	574	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
152	1BD	1	574	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
155	1BD	1	574	1	\$581.00	30% of AMI	\$1,453.00	\$624.00
209	1BD	1	664	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
210	1BD	1	574	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
217	1BD	1	664	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
238	1BD	1	574	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
254	1BD	1	634	2	\$581.00	30% of AMI	\$1,453.00	\$624.00
339	1BD	1	576	3	\$581.00	30% of AMI	\$1,453.00	\$624.00
410	1BD	1	574	4	\$581.00	30% of AMI	\$1,453.00	\$624.00
641	1BD	1	574	6	\$581.00	30% of AMI	\$1,453.00	\$624.00
746	1BD	1	574	7	\$581.00	30% of AMI	\$1,453.00	\$624.00
336	2BD	1	956	3	\$694.00	30% of AMI	\$1,735.00	\$749.00
536	2BD	1	956	5	\$694.00	30% of AMI	\$1,735.00	\$749.00



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EDWIN M. LEE  
MAYOR  
OLSON LEE  
DIRECTOR

---- PLEASE SUBMIT THIS APPLICATION AND MATERIALS TO THE BUILDING---

(Submit pages 1-4 and all required materials directly to the rental agent by the required deadline for the apartment(s).  
Incomplete applications will not be accepted.)

BMR UNIT ADDRESS \_\_\_\_\_ DESIRED UNIT SIZE \_\_\_\_\_ DATE \_\_\_\_\_

1. Legal name of applicant(s) who will hold title to the BMR unit

Head of Household Name \_\_\_\_\_ Co-applicant Name \_\_\_\_\_

Head of Household Occupation \_\_\_\_\_ Co-applicant Occupation \_\_\_\_\_

Head of Household Race/Ethnicity \_\_\_\_\_  
(optional - for statistical use only)

Do you intend to use a Section 8 voucher to rent this unit?  Yes  No

Does at least one household member live or work in San Francisco?  Yes  No

If yes, name of household member: \_\_\_\_\_

Does one household member hold a \*Certificate of Preference? (Note: This is not a Section 8 voucher.)  Yes  No

If yes, name of household member & certificate number \_\_\_\_\_

Have you submitted a copy of your Certificate of Preference with this application?  Yes  No

\*Certificate of Preference holders are primarily households displaced by Agency action in Redevelopment Project Areas during the 1960's and 1970's, but may also include other persons displaced by Agency action. Contact 415-701-5613 with questions.

2. Name(s) of dependent household member(s) who will live in the unit (must be claimed on most recent tax form or otherwise be proven as a dependent child)

Name \_\_\_\_\_ Relation to Applicants(s) \_\_\_\_\_ Age \_\_\_\_\_  
Dependent?  Yes  No In School?  Yes  No

Name \_\_\_\_\_ Relation to Applicants(s) \_\_\_\_\_ Age \_\_\_\_\_  
Dependent?  Yes  No In School?  Yes  No

3. Total Household Size (including applicants and dependents) \_\_\_\_\_

4. Current Applicant Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

5. Home Telephone Number \_\_\_\_\_ Work Telephone Number \_\_\_\_\_

6. Cell Number \_\_\_\_\_ Email \_\_\_\_\_

(Please use additional sheets of paper if necessary for any question above.)

CONTINUED ON NEXT PAGE

Household Name: \_\_\_\_\_ Date: \_\_\_\_\_

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7. Financial Information, Part I: You must complete and submit the income certification form on pages 3-4 of this application. You must list all jobs, accounts, and sign.

8. Documents to be Submitted with Application:

- *If a Certificate of Preference Holder, submit a copy of the Certificate. (This is not a Section 8 voucher.)*
- *Proof that one household member lives or works in San Francisco.*

9. Document Checklist: You must submit a completed document checklist with your application.

10. Does any household member currently own a residential unit (house or condo unit)?  Yes  No

11. Documents to be Submitted After the Lottery, Financial Information, Part II: Should you place high in the lottery, you must provide copies of the following documents for each household member 18 years old or older or legal affidavits if documents are missing within 5 days of being contacted after the lottery (if you rank high on the lottery list). See instructions for more guidance.

- *Complete set of past one (1) year federal (only) Income Tax Returns (signed & dated).*
- *Complete set of past one (1) year W-2 forms.*
- *Three (3) most recent and consecutive pay stubs or signed affidavits if missing or unemployed.*
- *Three (3) most recent and consecutive statements from each savings, checking or any other type of account in which money is saved.*

**HOUSEHOLD CERTIFICATION & SIGNATURES – PLEASE COMPLETE**

The information on this form will be used to determine income eligibility. I/we have listed in Part I all persons in my/our household. I have also disclosed ALL income and assets held by each person listed in Part I of the Income Certification Form. Verification may be obtained from any source named in this application. 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 application review and City's denial of this application.

Must be signed by all applicants 18 years or older.

Applicant's Signature	Applicant's Printed Name	Date
Applicant's Signature	Applicant's Printed Name	Date
Applicant's Signature	Applicant's Printed Name	Date
Applicant's Signature	Applicant's Printed Name	Date



Household Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**INCOME CERTIFICATION FORM**

You must complete this form as a part of your application. See application instructions for more information and examples.  
"HH Mbr" = "Household Member"

**PART I: HOUSEHOLD COMPOSITION**

HH Mbr #	Last Name	First Name and Middle Initial	Household Member Type (Adult, child, etc.)	Date of Birth (mm/dd/yyyy)	Full-Time Student (Y or N)	Married or Domestic Partnered (Y or N)
1			<b>Adult</b>	/ /		
2				/ /		
3				/ /		
4				/ /		
5				/ /		
6				/ /		

**PART II: EMPLOYMENT**  
(Please write "unemployed" under "Name of Employer" for unemployed HH members)

HH Mbr #	Name of Employer	City	Full-time (FT) or Part-time (PT)	First Day of Employment (mm/dd/yyyy)	Self-Employed? (Yes/No)	Estimated Annual Income
				/ /		
				/ /		
				/ /		
				/ /		
				/ /		

**PART III: GROSS ANNUAL INCOME**

HH Mbr #	Wages	Social Security/Pensions Received Annually	Public Assistance Received Annually	Other Income Received Annually
Totals	\$ (a)	\$ (b)	\$ (c)	\$ (d)
<b>TOTAL GROSS ANNUAL INCOME</b> Add (a) through (d)				\$ (e)

**PART IV: INCOME FROM ASSETS**

HH Mbr #	Name of Institution (bank name, etc.)	Type of Asset (e.g: bank account, savings account, CD, mutual fund, trust fund, gift, etc.)	Current Cash Value of Asset
		<b>Total Household Liquid Assets (do not include retirement)</b>	

Household Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**Application Documents Checklist**

**Please complete and submit with application.**

<b>Applicants must submit income documentation for each member of the household who is age 18 or older, regardless of dependent status.</b>	<b>#1</b>	<b>#2</b>	<b>#3</b>	<b>#4</b>	<b>#5</b>	<b>Verifier Initials (Leave Blank)</b>
<b>Household Name</b> _____						
1. Completed, signed and dated BMR Application Form (only one per household).						
2. If applying for Certificate of Preference lottery preference, copy of Certificate of Preference from the former San Francisco Redevelopment Agency. Certificate Number: _____						
3. If applying for live/work lottery preference, proof that at least one household member lives or work in San Francisco by one of the following:  Proof that one household member lives in San Francisco -  (a) One utility bill with a San Francisco address dated within the 45 days preceding the application deadline for the BMR unit. Utility bills can include gas, electric, garbage or water; or  (b) Current paystub with a San Francisco address; or  (c) A current, formal lease with a San Francisco address.  Proof that one household member works in San Francisco -  (a) Current paystub with a San Francisco address  (b) If an applicant’s employer is not based in San Francisco, or if a person’s paystubs do not reflect a San Francisco work address, the applicant must supply a notarized letter from the employer stating that the person works primarily in San Francisco and demonstrate that at least 75% of their working hours are in San Francisco.						

**INCOMPLETE OR DUPLICATE APPLICATIONS WILL BE ELIMINATED FROM THE LOTTERY.**

**City and County of San Francisco  
Below Market Rate (BMR) Inclusionary Housing Program  
Rental Application**

**Application Instructions for Rental Units**

**GENERAL RULES FOR COMPLETING A BMR RENTAL APPLICATION**

- Each household must submit one 4-page application plus prepare supplemental materials for all household members 18 years old or older, regardless of dependency status which must be timely submitted upon request (post lottery), regardless of dependency status. The application must be complete. It must include all household members, must be signed, and must include complete and accurate information on employment, salary, assets, and other statements made on the application. The application is a legal document and any inability to include all relevant information, whether accidental or intentional, may lead to the rejection of the application.
- It is very important to submit a complete application. The Mayor's Office of Housing may reject incomplete applications.
- Applicants must submit only one application per household, and each applicant must be included in only one application per development.
- Applicants must contact the building's sales or rental agent for each individual development for the current application.
- Please do not submit applications to the Mayor's Office of Housing. All applications must be submitted directly to the building's rental agent for the current BMR rental units by the established deadline for the units. The agent will ensure that your application is delivered to the Mayor's Office of Housing. Agents are required to shred all sensitive financial information once all units in a development have closed.
- BMR rental applicants are not approved to rent a unit until they receive an approval letter from the Mayor's Office of Housing or from the agent on behalf of the City. This letter is generated approximately 15 days after MOH receives a complete application from the building's agent.

**Who Must Appear on the Lease for the BMR Unit?**

- Each household member must be someone who either (1) appears on the lease for the unit OR (2) is an eligible dependent of a household member who appears on the lease.
- All spouses of applicants must appear on the lease for the unit. Spouses are not considered dependents when applying for BMR units. They must submit full documentation and become a leaseholder.

**Who is Considered a Dependent?**

- Only those individuals who appear on the official tax forms in the most recent tax year for an applicant who will appear on the lease for the unit (or who can otherwise be proven as a dependent child) will be considered an eligible dependent. However, spouses are not considered dependents for the purposes of the BMR program and must submit complete documentation in order to apply for a BMR unit.

**INSTRUCTIONS FOR COMPLETING THE 4-PAGE COVER APPLICATION**

**How to Complete the Front Page of the Application**

- Applicants must enter the building name and the size unit desired (by bedroom count). You may be offered the opportunity to rent any size unit that meets the household size standard if you win the lottery. In other words, you are not locking yourself in to this unit size by stating it on your application.
- You must include every household member who intends to live in the unit.
- All household members who are 18 years old or older must sign all parts of the application. Spouses are not considered dependents and must sign, as well.
- The head of household is typically considered the household member who earns the highest income.

**How to Complete the 2-Page Income Certification Form**

Applicants will be entering information for the different household members who are 18 and older throughout this form. You will use the same number for each member. For instance, if John Lee is "household member 1" in Part I, then John Lee is household member 1 throughout the remainder of the form.

### **Part I: Household Composition**

Enter the full name of all intended occupants. If there are more than six occupants, use an additional sheet of paper to list the remaining household members and attach it to the certification form. State each household member's status using one of the following:

- Adult - Adult household member
- Child - Applicant's dependent child or unrelated minor
- Other - Please specify (e.g., "Other - Niece")

### **Part II: Employment**

Complete a separate line for each household member 18 years old or older, whether the member is employed or not. List the respective household member number from Part I. If there is not enough room to list all employers for each household member, use an additional sheet of paper to list the remaining employers and attach it to the certification form.

### **Part III: Annual Gross Income**

Complete a separate line for each household member who is 18 or older. List the respective household member number from Part I. If there is not enough room to list all sources of income for each household member, use an additional sheet of paper to list the remaining income sources and attach it to the certification form.

Wages(Gross)	Enter the annual amount of wages, salaries, tips, commissions, bonuses, and other income from employment; distributed profits and/or net income from a business.
Social Security/ Pensions	Enter the annual amount of income from Social Security, Supplemental Security Income, pensions, military retirement, etc.
Public Assistance	Enter the annual amount of income received from public assistance (e.g., TANF, general assistance, disability, etc.).
Other Income	Enter the annual amount of alimony, child support, unemployment benefits, or any other income regularly received by the household.

### **Part IV: Income from Asset Accounts**

- List the respective household member number from Part I and complete a separate line for each member.
- List every cash account for every household member who is 18 years or older.
- Asset accounts are accounts in which an individual has any money saved. These accounts can include, but are not limited to, checking accounts, savings accounts, Certificates of Deposit, Mutual Funds, stocks, bonds, trust funds, limited liability investments, or other costs, and any other account in which money is saved. If money is not saved in an institution (e.g. it is saved at home), you must list this amount, as well. Do not include material assets such as cars, boats, etc., only cash assets.
- Applicants must list each asset account separately, identifying the name of the bank or institution in which the asset is held, the type of asset (banking account, checking account, etc.) and the current balance (amount of money) in each account.
- If there is not enough room to list all liquid (cash) assets for each household member, use an additional sheet of paper to list the remaining household members and attach it to the certification form.
- Applicants must submit upon request (post lottery) statements for any account on which the applicant's name appears. All joint accounts must be noted and statements must be included.
- Applicants must include any account that the adult holds for a person who is under 18 years old (custodial accounts) but for qualified college savings plans. Applicants may not transfer their savings to their children or other youth in order to qualify for a BMR unit.
- Assets from retirement savings will not be counted toward your income but at least one retirement statement must be provided post-lottery to confirm that it is eligible for exclusion.
- Each applicant household is legally swearing to its current asset accounts and cash asset holdings. An application will be disqualified in its entirety if asset accounts are falsely represented.

**DOCUMENTATION REQUIRED WHEN SUBMITTING THE APPLICATION**

**\_\_\_ If applicable, proof that at least one household member lives or work in San Francisco by one of the following:**

Lives in San Francisco -

(a) One utility bill with a San Francisco address dated within the 45 days preceding the application deadline for the BMR unit. Utility bills can include gas, electric, garbage or water; or

(b) Current paystub with a San Francisco address; or

(c) A current, formal lease with a San Francisco address.

Works in San Francisco –

(a) Current paystub with a San Francisco address

(b) If an applicant’s employer is not based in San Francisco, or if a person’s paystubs do not reflect a San Francisco work address, the applicant must supply a notarized letter from the employer stating that the person works primarily in San Francisco and demonstrate that at least 75% of their working hours are in San Francisco.

**\_\_\_ If applicable, proof that one household holds a \*Certificate of Preference**

All individuals and households may enter the lottery for a BMR unit. However, those households in which one member holds a Certificate of Preference from the San Francisco Redevelopment Agency will be given highest *preference* in the lottery ranking process.

\* Certificate of Preference holders are primarily households displaced by Agency action in Redevelopment Project Areas during the 1960’s and 1970’s, but may also include other persons displaced by Agency action.

To be considered a Certificate of Preference (COP) holder, you must submit a copy of your certificate with the application. To verify that you are a COP holder, call 415-701-5613.

**DOCUMENTATION REQUIRED UPON REQUEST ONLY (AFTER THE LOTTERY)**

\_\_\_\_\_ Complete set of past one (1) year federal Income Tax Return (signed & dated)

\_\_\_\_\_ Complete set of past one (1) year W-2 forms

\_\_\_\_\_ Three (3) most recent and consecutive pay stubs

\_\_\_\_\_ Three (3) most recent and consecutive statements from each savings, checking or any other type of account in which money is saved.

\_\_\_\_\_ Optional - Proof that one household member lives or works in San Francisco

\_\_\_\_\_ Optional - Proof that one household member holds a “Certificate of Preference

\*Certificate of Preference holders are primarily households displaced by Agency action in Redevelopment Project Areas during the 1960’s and 1970’s, but may also include other persons displaced by Agency action. San Francisco Redevelopment Agency: [415-749-2432](http://415-749-2432)

**Who Must Timely Submit Income Documentation When Requested?**

- All applicants who are 18 years old or older dependents must submit full documentation upon request (post lottery). This includes dependent parents, children and others who are 18 years old or older.

**Required Income Documents Upon Request Only (Post Lottery)**

Income documents for each applicant who is 18 years old or older must be timely submitted upon request (post lottery).

**\_\_\_\_ One: Complete Set of the Past One (1) Year Federal (IRS) Income Tax Returns For Each Household Member 18 Years of Age or Older**

Applicants who have filed taxes for the past year must provide:

- Copies of complete and final federal tax form that was submitted to the IRS, including all schedules. MOH will not accept brief, computer-generated tax reports.
  - Each tax form must be signed & dated. Applicants may use the current date if they are signing an allowable computer-generated tax form (such as a form that was generated through a tax preparer or Turbo Tax.) All tax forms must be signed.
  - Applicants should not include state tax returns.
  - If time period is January 1 – April 15 and applicant has not yet completed prior year's taxes, please submit prior year's W-2's and a complete copy of the most recent federal taxes filed.

Applicants who were not required to file federal tax must provide a *Tax Affidavit* Form, a form that legally swears that applicant was not required to file taxes.

- *Tax Affidavit* must be signed and notarized.
- Affidavit may only be used if applicant was not required to complete a tax form in any given year.
- Affidavit must be accompanied by proof that the applicant was a renter and not a homeowner during the missing tax year. Proof includes copy of a formal lease; cancelled rent checks; or a formal letter from landlord.
- If the applicant was a student in the past year, affidavit must include copy of recent school transcripts.
- Failure to order copies of documents in time for an application deadline is not a qualified reason for using the above signed statements.

**\_\_\_\_ Two: A Complete Set of the Past One (1) Year W-2 Forms For Each Household Member 18 Years of Age or Older**

- Applicants must submit official W-2 forms for each tax year; do not submit computer generated and hand-prepared forms that are not official.
- All W-2 forms must add up to incomes stated on the corresponding year's tax form.
- If the applicant worked in the past year but was not required to file taxes, s/he is still required to provide W-2s for the corresponding tax year and a tax affidavit is required.

**\_\_\_\_ Three: A Complete Set of the Three (3) Most Recent and Consecutive Pay Stubs For Each Household Member 18 Years of Age or Older**

Employed applicants must provide:

- Paystubs that are recent and consecutive
- Paystubs that state the pay period dates
- Paystubs that show the year-to-date and current gross earning amount

Applicants who are employed (not self-employed) but lack current, consecutive and complete paystubs must provide a *Verification of Employment (VOE)* form, a form that legally states applicant's recent pay.

- The *VOE* must include the year-to-date gross earning amount; pay period dates; hire date; and the number of pay periods in the year.
- The *VOE* must be signed and dated by the employer.

Self-employed applicants must provide:

- *Self-Employment Affidavit* with Profit & Loss Statement from most recent quarter attached
- Copy of signed and dated tax returns for the past 2 years, include schedule C
- Complete set of the past two (2) years federal (IRS) Income Tax Returns for the self-employed applicant, including all schedules

Applicants who are not employed or not receiving any income must provide an *Unemployment Affidavit*, a form that legally swears that the applicant is not receiving any current income and is unemployed. If the applicant is receiving any form of income, the unemployed affidavit is not required.

- The *Unemployment Affidavit* must be signed and notarized.
- The *Unemployment Affidavit* must be used in the event that the applicant is not able to provide the Mayor's Office of Housing with paystubs or other documentation of regular income. Failure to order copies of documents in time for an application deadline is not a qualified reason for using the above signed statements.

**Four: 3 Most Recent and Consecutive Statements from Each Cash Asset Account**

Applicants must submit:

Complete statements for all asset accounts. Asset accounts are accounts in which an individual has any money saved or money that will be gifted to the applicant household. These accounts can include, but are not limited to, checking accounts, savings accounts, Certificates of Deposit, Mutual Funds, stocks, bonds, trust funds, limited liability investments, and gift funds.

Notes:

- Applicants must submit statements for any account on which the applicant’s name appears. All joint accounts must be noted and statements must be included.
- Applicants must include any account that the adult holds for a person who is under 18 years old (custodial accounts) but for qualified college savings plans. Applicants may not transfer their savings to their children or other youth in order to qualify for a BMR unit.
- Assets from retirement savings will not be counted toward your income but retirement statements must be included in your application (at least one statement for retirement accounts).
- Each applicant household is legally swearing to its current asset accounts and cash asset holdings. An application will be disqualified in its entirety if asset accounts are falsely represented.

**CALCULATING HOUSEHOLD INCOME**

MOH reviews the most recent three paystubs or other income statements (e.g. social security statements, unemployment income) for each applicant. The annual gross income is derived by dividing the current year-to-date gross income as stated on the most recent pay stub for the calendar year by the current pay period and then by annualizing the estimated pay period amount by the number of time the person is paid in one year.

*Example:*

Year-to-date income as stated on the most recent paystub for the calendar year is \$20,000.  
 It is the 10<sup>th</sup> pay period of the calendar year as determined by the end date of the most recent pay stub.  
 The total number of pay periods in a year for the applicant is 24.  
 The estimated pay period amount is \$20,000 divided by 10 = \$2,000.  
 The annualized pay is \$2,000 x 24 = \$48,000.

MOH will include all tips, commissions, bonuses, and other income from employment; distributed profits and/or net income from a business.

Sources of income include:

Wages(Gross)	Enter the annual amount of wages, salaries, tips, commissions, bonuses, and other income from employment; distributed profits and/or net income from a business.
Social Security/ Pensions	Enter the annual amount of income from Social Security, Supplemental Security Income, pensions, military retirement, etc.
Public Assistance	Enter the annual amount of income received from public assistance (e.g., TANF, general assistance, disability, etc.).
Other Income	Enter the annual amount of alimony, child support, unemployment benefits, or any other income regularly received by the household.

In the case of a self-employed person, the Mayor’s Office of Housing reviews an applicant’s tax forms, current year Profit and Loss Statement or other relevant documents on a case-by-case basis. See BMR ownership application instructions for more information.

The Mayor’s Office of Housing office must review income for all household members 18 years old or older, regardless of dependent status.

**Asset Test for BMR Buyers**

The Mayor’s Office of Housing will apply an asset test to all applicants. Assets include all savings, checking accounts, gifts and other sources of money (cash) other than retirement accounts. (If your retirement account is currently generating income -- i.e. you are living off of your retirement -- you must count this money as income on the BMR application.) Assets also include any money that will be used toward a down payment on a BMR unit. 10% of all assets between \$30,001 and 130,000 will be added to the total household income; and 35% of assets above \$130,000 will be added to the total household income. Retirement savings will be excluded from the asset test, but at least one

retirement statements should be included in the application package for verification that the account is a retirement account.

*Example:*

Household of 3 earns \$50,000 a year

Total household assets = \$150,000

First \$30,000 of assets is excused:  $\$150,000 - \$30,000 = \$120,000$  remaining

10% of first \$100,000 remaining is added to income:  $\$100,000 \times 10\% = \$10,000$

35% of all remaining assets are added to income:  $\$20,000 \times .35 = \$7,000$

Total amount added to income:  $\$10,000 + \$7,000 = \$17,000$

New total household income:  $\$50,000 + \$17,000 = \$67,000$



**CITY AND COUNTY OF SAN FRANCISCO  
MAYOR'S OFFICE OF HOUSING  
INCLUSIONARY HOUSING PROGRAM**

**INCOME TAX AFFIDAVIT**

1. I (We) the undersigned, being first duly sworn, state the following:

**(Complete Paragraph 2 only if you were not required by law to file Federal Income Tax returns for any year during the preceding three years. Disregard if inapplicable.)**

2. I (We) (name here) \_\_\_\_\_ hereby certify that I (we) was (were) not required by law to file a Federal Income Tax Return for the following year(s) \_\_\_\_\_ for the reason(s) below:

**In the case of ownership applications ONLY, affidavit must be accompanied with documented proof that the applicant was a renter during the specified period, e.g. copy of the lease, letter from the landlord or manager, canceled checks or rent receipts.**

**In the case of ownership AND rental applications:**

**If the applicant was a student, affidavit must be accompanied by a copy of the transcripts or diploma to support the status of the applicant for that period of time.**

3. I (We) acknowledge and understand that this Affidavit will be relied upon for purposes of determining my (our) household's eligibility for a restricted unit under the San Francisco Residential Inclusionary Affordable Housing Program. I (We) acknowledge that a material misstatement fraudulently or negligently made in this affidavit or in any other statement made by me (us) in connection with an application for a restricted price/rent unit may constitute a federal violation punishable by a fine and/or denial of my (our) application for purchase/rental of this restricted price unit.

Dated: \_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
Notary Public in and for the City and County of San Francisco, California

My Commission Expires: \_\_\_\_\_

**Notary Seal**

**CITY AND COUNTY OF SAN FRANCISCO  
MAYOR'S OFFICE OF HOUSING  
INCLUSIONARY HOUSING PROGRAM**

**SELF-EMPLOYED AFFIDAVIT**

Before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, personally appeared \_\_\_\_\_, who, being duly sworn, deposes and says:

I am currently self-employed and am submitting to the Mayor's Office of Housing for the purpose of applying for the San Francisco Residential Inclusionary Affordable Housing Program a Profit and Loss Statement from the most recent quarter that is a true and accurate reflection of my income.

I (We) acknowledge and understand that this Affidavit will be relied upon for purposes of determining my (our) eligibility for purchasing/renting a restricted unit under the San Francisco Residential Inclusionary Affordable Housing Program. I (We) acknowledge that a material misstatement fraudulently or negligently made in this affidavit or in any other statement made by me (us) in connection with an application for purchase/rental of the San Francisco Residential Inclusionary Affordable Housing Program unit may constitute a federal violation punishable by a fine and/or denial of my (our) application for the unit.

I have been self-employed from the following month and year forward: \_\_\_\_\_ / \_\_\_\_\_

**This affidavit must be accompanied by a signed and dated Profit and Loss Statement that reflects the most recent quarter. The Profit and Loss Statement must be modeled on Schedule C of the most currently available federal tax form.**

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

STATE OF CALIFORNIA

Before me personally appeared, \_\_\_\_\_ who acknowledged to me that he/she/they executed the foregoing instrument this \_\_\_\_\_ day of \_\_\_\_\_.

(NOTARIAL SEAL) Notary Public

CITY AND COUNTY OF SAN FRANCISCO  
MAYOR'S OFFICE OF HOUSING  
INCLUSIONARY HOUSING PROGRAM

UNEMPLOYED AFFIDAVIT

Before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, personally appeared \_\_\_\_\_, who, being duly sworn, deposes and says:

I (name here) \_\_\_\_\_ am not presently employed, not currently receiving any income, and will not file for unemployment benefits in 200\_\_\_\_ (current calendar year).

I (We) acknowledge and understand that this Affidavit will be relied upon for purposes of determining my (our) eligibility for purchase/rental of a restricted unit under the San Francisco Residential Inclusionary Affordable Housing Program. I (We) acknowledge that a material misstatement fraudulently or negligently made in this affidavit or in any other statement made by me (us) in connection with an application for purchase/rental of the restricted unit under the San Francisco Residential Inclusionary Affordable Housing Program may constitute a federal violation punishable by a fine and/or denial of my (our) application for the unit.

\_\_\_\_\_  
Applicant/Resident Signature

STATE OF CALIFORNIA

Before me personally appeared, \_\_\_\_\_ who acknowledged to me that he/she/they executed the foregoing instrument this \_\_\_\_\_ day of \_\_\_\_\_.

(NOTARIAL SEAL) Notary Public