



# Kamake'e Vista

**Phone: 808-597-1725**

**Fax: 808-597-1002**

**Email: Kamakeevista1@gmail.com**

Aloha, and Mahalo for your interest in Kamake'e Vista. We are located in the heart of Kaka'ako! Adjacent to Whole Foods Market and Ward Village Shopping Center, walking distance to the Ala Moana Beach Park and Mall. As well as many more retail stores and restaurants. We are pet friendly with a \$200 deposit (Breed restrictions may apply). Come and find your home with Kamake'e Vista.

- Location:** **1065 Kawaiahao St. #607, Honolulu, Hawaii 96814**  
Located on the corner of Kawaiahao and Kamake'e, in between U-Haul storage (Kawaiahao) and Whole foods Market (Queen St.)
- Application:** Applicants are required to provide information regarding their income, assets, birthdates, social security numbers, previous housing/landlord information, references, and other applicable information.
- Number of Units/Size:** 90 one-bedrooms / 570 sq. ft. (Approx.)  
136 two-bedrooms / 720 sq. ft. (Approx.)
- Type of Structure:** A 28-story high-rise (Parking located on floors 1-5) containing 226 apartment units within a residential tower serviced by three elevators and two stairwells.

## **RENTAL RATES and MINIMUM INCOME REQUIREMENTS**

<u>Unit Type</u>	<u>100% AMI</u>	<u>Minimum Income</u>
1 bdrm/1 bath	<b>\$ 1,832.00</b>	\$4,350.00 a month / \$52,200.00 annual
2 bdrm/1 bath	<b>\$ 2,367.00</b>	\$5,600.00 a month / \$67,200.00 annual

- Utilities:** Water is included in the rent rate. Other services (i.e. electricity, telephone, cable television, etc.) will be the tenant's responsibility.
- Amenities:**  
**UNIT:** Every unit comes equipped with upgraded floors, a ceiling fan in the living room and bedroom(s). Refrigerator, range and range hood.  
**COMMUNITY:**
  - 24hr community laundry room
  - Community recreational deck complete with grass, picnic tables and BBQs.
  - On-site nightly security
  - Secure electronic key access
- Security Deposit:** A security deposit equivalent to one month of rent shall be paid by every tenant at the time of move in.
- Parking:** Secured by a full coverage gate and electronic key card access, our parking garage has lots of stalls available for rent (\$41.20 for the first stall, \$77.25 for each additional stall)



It is illegal to discriminate against any person because of religion, color, sex (including gender and expression), ancestry/national origin, age, marital status, disability, race, familial status, sexual orientation, or HIV infection.



# KAMAKE'E VISTA

1065 Kawaihāo St., Suite 607, Honolulu, HI 96814

Phone: (808) 597-1725 Fax: (808) 597-1002

**INSTRUCTIONS: PLEASE PRINT AND COMPLETE BOTH SIDES. ANSWER EACH SECTION AND ITEM. IF NO ANSWER WRITE "N.A."**  
**IN THE SPACE PROVIDED. SIGN AND DATE THE APPLICATION ON THE BACK SIDE.**

<b>APPLICANT(S) &amp; HOUSEHOLD</b>	<b>MEMBER NO.</b>	<b>APPLICANT'S NAME</b>				
	1	(LAST)	(FIRST)	(MIDDLE INITIAL)		
		(SSN)	(BIRTH DATE)			
	2	<b>CO-APPLICANT'S NAME</b>				
		(LAST)	(FIRST)	(MIDDLE INITIAL)		
	(SSN)	(BIRTH DATE)				
	<b>CURRENT MAILING ADDRESS</b>					
	(NO.)	(STREET)	(APT)			
	(CITY)	(STATE)	(ZIP)			
	(HOME PHONE)		(BUSINESS PHONE)			
	<b>PREVIOUS ADDRESS (IF LESS THAN A YEAR AT CURRENT ADDRESS)</b>					
	(NO.)	(STREET)	(APT)			
	(CITY)	(STATE)	(ZIP)			
	<b>LIST BELOW ALL OTHERS WHO WILL LIVE WITH YOU (DO NOT LIST APPLICANT &amp; CO-APPLICANT)</b>					
<b>MEMBER NO.</b>	<b>FULL NAME</b>			<b>SSN. OR ALIEN NO.</b>		
3						
4						
5						
6						
<b>UNIT TYPE</b>	<b>CHECK THE TYPE OF UNIT YOU ARE INTERESTED IN.</b>					
		1 Bdrm. Subsidized.		2 Bdrm. Subsidized		
		1 Bdrm. Market		2 Bdrm. Market		
<b>HOUSEHOLD INCOME</b>	<b>LIST EVERYONE ON THE APPLICATION WHO IS WORKING, THEIR EMPLOYERS, THEIR PAY RATES</b>					
	<b>MEMBER NO.</b>	<b>EMPLOYER'S NAME</b>	<b>POSITION</b>	<b>HOURS</b>	<b>GROSS PAY</b>	
					<b>SALARY</b>	<b>HOURLY</b>
	<b>MEMBER NO.</b>	<b>SOURCE</b>	<b>MONTHLY AMOUNT</b>	<b>MEMBER NO.</b>	<b>SOURCE</b>	<b>MONTHLY AMOUNT</b>
		WELFARE			VETERAN'S COMP.	
		SOCIAL SECURITY			VETERAN'S PENSION	
		UNEMPLOYMENT			CHILD SUPPORT	
	WORKER'S COMP.			ALIMONY		
	RETIREMENT			FAMILY SUPPORT		
	PENSION			OTHER		
Do you receive Section 8? Yes ( ) No ( ) If yes, is it a Voucher ( ) or Certificate ( )						
Do you receive Rental Supplement? Yes ( ) No ( )						

ASSETS	<b>DOES ANYONE ON THE APPLICATION HAVE THE FOLLOWING ASSETS?</b>							
	<b>CHECKING YES ( ) NO ( )</b>				<b>STOCKS/MUTUAL FUNDS YES ( ) NO ( )</b>			
	MEMBER NO	FINANCIAL INSTITUTION NAME	ACCT. NO.	BALANCE	MEMBER NO	NAME STOCK, ETC.	# SHARES & VALUE	
	<b>SAVINGS YES ( ) NO ( )</b>				<b>BONDS YES ( ) NO ( )</b>			
	MEMBER NO	FINANCIAL INSTITUTION NAME	ACCT. NO.	BALANCE	MEMBER NO	DENOMINATION	# BONDS & VALUE	
	<b>PROPERTY/REAL ESTATE YES ( ) NO ( )</b>				<b>LIFE INSURANCE YES ( ) NO ( )</b>			
	MEMBER NO	LOCATION	EST. VALUE	EST. EQUITY	MEMBER NO	COMPANY NAME	CASH VALUE	
	<b>OTHER ASSETS</b>					YES	NO	BALANCE
	A.	IRA/KEOGH/DEFERRED COMP.						
B.	TRUST FUND							
C.	JOINT ACCOUNT							
D.	REAL PROP. (LAND/BUILDING)							
E.	INVESTMENT (COIN COLLECTION/ANTIQUES, ETC.)							
F.	PROFIT SHARING							
HOUSING NEEDS AND OTHER INFORMATION	HAVE YOU EVER RENTED ON YOUR OWN? ( ) YES ( ) NO							
	DO YOU PRESENTLY OCCUPY A RENTAL UNIT? ( ) YES ( ) NO							
	HOW LONG AT PRESENT RENTAL ADDRESS?			NO. OF BEDROOMS	RENT AMOUNT	ARE UTILITIES INCLUDED?		
					\$			
	(YEARS)	(MONTHS)	(SIZE)		(RENT)	(YES)	(NO)	
	NAME OF PRESENT LANDLORD		LANDLORD'S ADDRESS				PHONE NUMBERS	
			STREET				HOME	
			CITY/STATE/ZIP				BUSINESS	
	NAME OF PREVIOUS LANDLORD		LANDLORD'S ADDRESS				PHONE NUMBERS	
			STREET				HOME	
			CITY/STATE/ZIP				BUSINESS	
	HOW LONG AT THIS RENTAL?		REASON FOR LEAVING?					
	(YEARS)	(MONTHS)						
	HAVE YOU OR ANY PERSON(S) LISTED ON APPLICATION BEEN CONVICTED FOR ANY CRIME? ( ) YES ( ) NO							
	LIST OFFENSE AND DATE							
<b>APPLICANT CERTIFICATION</b>								
I/WE CERTIFY THAT ALL OF THE INFORMATION LISTED ON THIS APPLICATION IS ACCURATE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE. I/WE UNDERSTAND THAT WITHHOLDING, AND/OR LISTING FALSE INFORMATION IS GROUNDS FOR: (1) DENIAL OF ADMISSION TO THIS PROGRAM AND FUTURE PROGRAMS; (2) IMMEDIATE EVICTION AND TERMINATION OF RENTAL AGREEMENTS; (3) PAYMENT OF BACK CHARGES; (4) PROSECUTION UNDER THE LAWS OF THE COUNTY, STATE AND FEDERAL GOVERNMENTS.								
APPLICANT'S SIGNATURE			DATE	CO-APPLICANT'S SIGNATURE			DATE	

## Multifamily Housing Case Studies

### A RHIP Training Program

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U.S. Department of Housing and Urban Development  
Office of Inspector General



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November 2004

## Things You Should Know

Don't risk your chances for Federally assisted housing by providing false, incomplete, or inaccurate information on your application forms.
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<b>Purpose</b>	This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.				
<b>Penalties for Committing Fraud</b>	<p>The United States Department of Housing and Urban Development (HUD) places a high priority on preventing fraud. If your application or recertification forms contain false or incomplete information, you may be:</p> <ul style="list-style-type: none"><li>▫ Evicted from your apartment or house:</li><li>▫ Required to repay all overpaid rental assistance you received:</li><li>▫ Fined up to \$ 10,000:</li><li>▫ Imprisoned for up to 5 years; and/or</li><li>▫ Prohibited from receiving future assistance.</li></ul> <p>Your State and local governments may have other laws and penalties as well.</p>				
<b>Asking Questions</b>	When you meet with the person who is to fill out your application, you should know what is expected of you. If you do not understand something, ask for clarification. That person can answer your question or find out what the answer is.				
<b>Completing The Application</b>	<p>When you answer application questions, you must include the following information:</p> <table><tr><td><b>Income</b></td><td><ul style="list-style-type: none"><li>▫ All sources of money you or any member of your household receive (wages, welfare payments, alimony, social security, pension, etc.):</li><li>▫ Any money you receive on behalf of your children (child support, social security for children, etc.);</li><li>▫ Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stock, etc.);</li><li>▫ Earnings from second job or part time job;</li><li>▫ Any anticipated income (such as a bonus or pay raise you expect to receive)</li></ul></td></tr><tr><td><b>Assets</b></td><td><ul style="list-style-type: none"><li>▫ All bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.. that are owned by you and any adult member of your family's household who will be living with you.</li></ul></td></tr></table>	<b>Income</b>	<ul style="list-style-type: none"><li>▫ All sources of money you or any member of your household receive (wages, welfare payments, alimony, social security, pension, etc.):</li><li>▫ Any money you receive on behalf of your children (child support, social security for children, etc.);</li><li>▫ Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stock, etc.);</li><li>▫ Earnings from second job or part time job;</li><li>▫ Any anticipated income (such as a bonus or pay raise you expect to receive)</li></ul>	<b>Assets</b>	<ul style="list-style-type: none"><li>▫ All bank accounts, savings bonds, certificates of deposit, stocks, real estate, etc.. that are owned by you and any adult member of your family's household who will be living with you.</li></ul>
<b>Income</b>	<ul style="list-style-type: none"><li>▫ All sources of money you or any member of your household receive (wages, welfare payments, alimony, social security, pension, etc.):</li><li>▫ Any money you receive on behalf of your children (child support, social security for children, etc.);</li><li>▫ Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stock, etc.);</li><li>▫ Earnings from second job or part time job;</li><li>▫ Any anticipated income (such as a bonus or pay raise you expect to receive)</li></ul>				
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## Multifamily Housing Case Studies

### A RHIIP Training Program

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- Any business or asset you sold in the last 2 years for less than its full value, such as your home to your children.
- The names of all of the people (adults and children) who will actually be living with you, whether or not they are related to you.

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#### Signing the Application

- Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate.
- When you sign the application and certification forms, you are claiming that they are complete to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information.
- Information you give on your application will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with various Federal, State, or private agencies to verify that it is correct.

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#### Recertifications

You must provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You must report on recertification forms:

- All income changes, such as increases of pay and/or benefits, change or loss of job and/or benefits, etc., for all household members.
- Any move in or out of a household member; and,
- All assets that you or your household members own and any assets that was sold in the last 2 years for less than its full value.

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#### Beware of Fraud

You should be aware of the following fraud schemes:

- Do not pay any money to file an application;
- Do not pay any money to move up on the waiting list;
- Do not pay for anything not covered by your lease;
- Get a receipt for any money you pay; and,
- Get a written explanation if you are required to pay for anything other than rent (such as maintenance charges).

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#### Reporting Abuse

If you are aware of anyone who has falsified an application, or if anyone tries to persuade you to make false statements, report them to the manager of your complex or your PHA. If that is not possible, then call the local HUD office or the HUD Office of Inspector General (OIG) Hotline at (800) 347-3735. You can also write to: HUD-OIG HOTLINE, (GFI) 451 Seventh Street, S.W., Washington, DC. 20410.

HUD- 1140-OIG THIS DOCUMENT MAY BE REPRODUCED WITHOUT PERMISSION





**CLOSET**

**BATH**

**KITCHEN**

**LIVING ROOM**  
**12'9" X 14'7"**

**CLOSET**

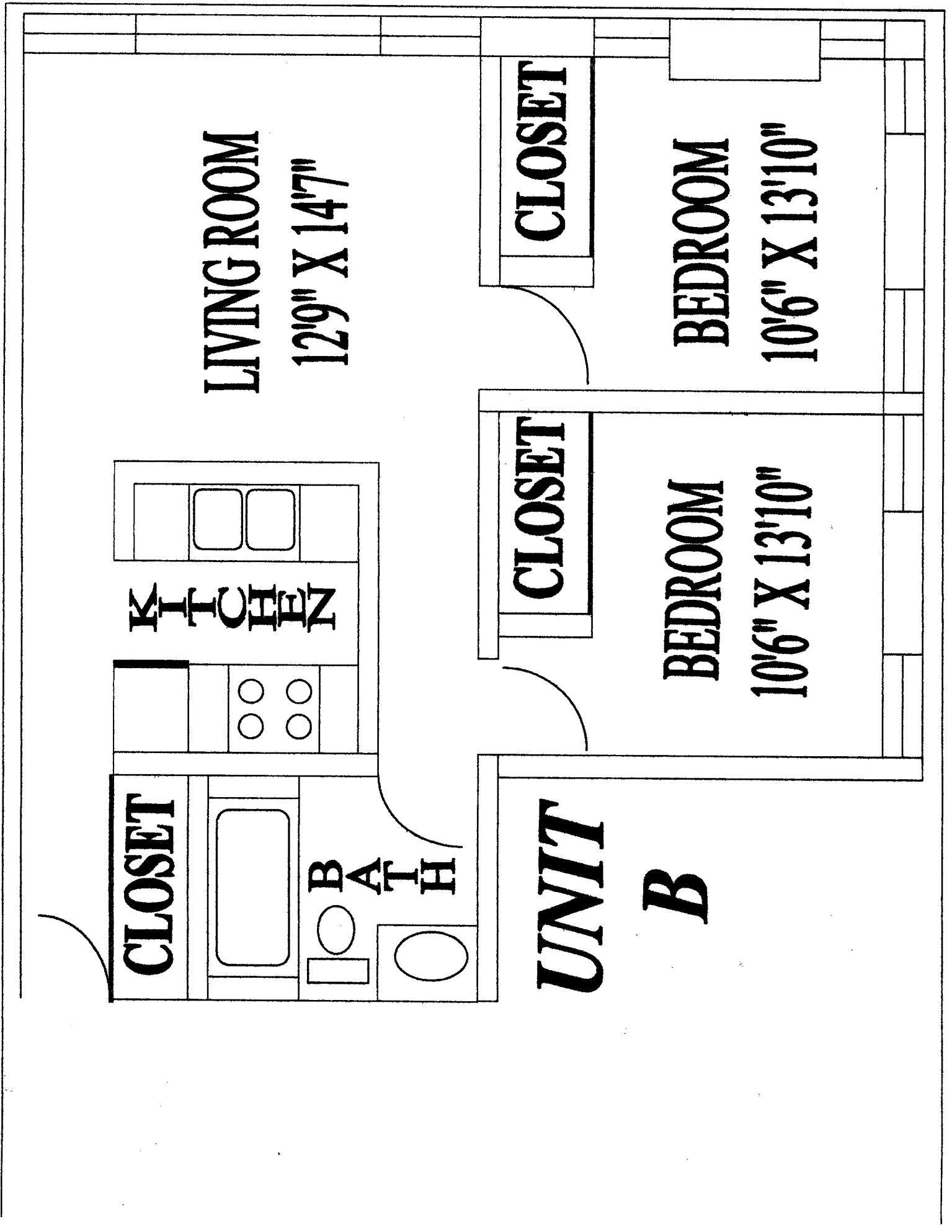
**CLOSET**

**B**

**UNIT**

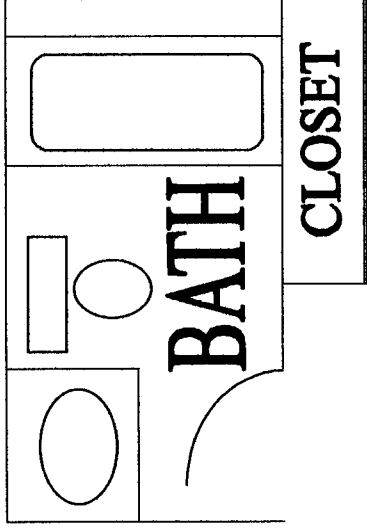
**BEDROOM**  
**10'6" X 13'10"**

**BEDROOM**  
**10'6" X 13'10"**



# UNIT

## C



**KITCHEN**

**BATH**

**CLOSET**

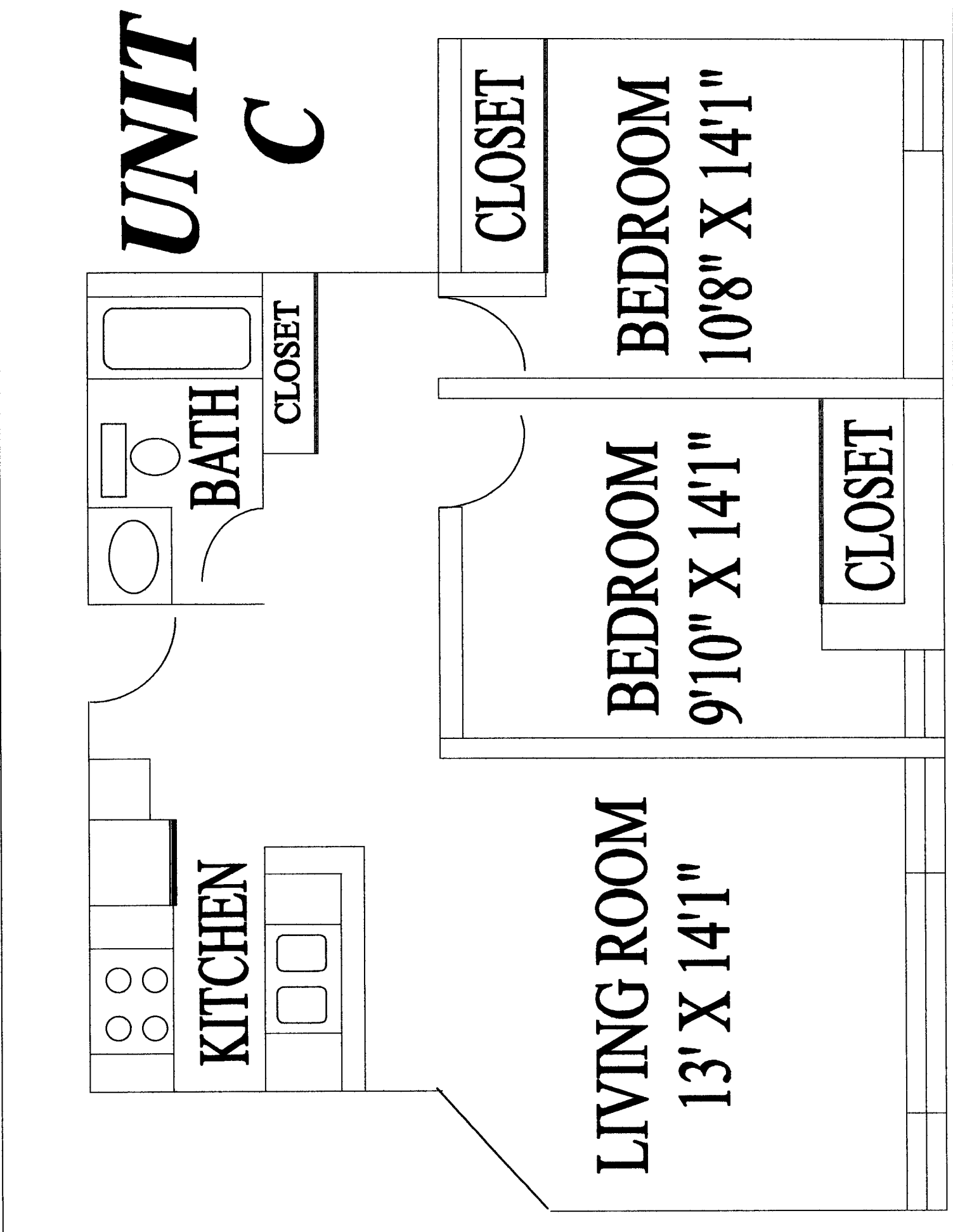
**LIVING ROOM**  
**13' X 14'1"**

**BEDROOM**  
**9'10" X 14'1"**

**BEDROOM**  
**10'8" X 14'1"**

**CLOSET**

**CLOSET**





**BEDROOM**  
**10'10" X 10'8"**

**CLOSET**

**BATH**

**LIVING ROOM**  
**12'4" X 14'10"**

**KITCHEN**

***UNIT D***

