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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>\$ 2,182.00</b>	\$4,950.00 a month / \$59,400.00
2 bdrm/1 bath	<b>\$ 2,671.00</b>	\$6,360.00 a month / \$76,320.00

- Utilities:** Water, Sewer and Trash 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.
- Community room complete with tables, chairs, TV.
- 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 (\$42.44 for the first 1<sup>st</sup> stall, \$79.57 for each additional)

# APPLICATION FOR HOUSING

Affordable Housing Property

**Please Print Clearly**

This is an application for housing at:	<b>Project:</b>
	<b>Address:</b>
Please complete this application and return to:	<b>Name:</b>
	<b>Address:</b>

Applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this tenant application. Every question **must** be answered. Do **NOT** leave blanks. Use N/A when not applicable.

## A. GENERAL INFORMATION

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

Address: \_\_\_\_\_  
Street Apt.# City State ZIP

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

No. of BR's in current unit: \_\_\_\_\_ Do you  RENT or  OWN (check one)

Amount of current monthly rental or mortgage payment: \$ \_\_\_\_\_

If owned, do you receive monthly rental income from property?  Yes  No (check one)

Check utilities paid by you:  Heat  Electricity  Gas  Other (specify)

Approximate monthly cost of utilities paid by you (excluding phone and cable TV): \$ \_\_\_\_\_

Bedroom size requested:  Studio  One BR  Two BR  Three BR  Handicap BR



**B. HOUSEHOLD COMPOSITION**

	Name	Relationship to head	Birth Date	Age (optional)	SS# (last 4 digits)	Student Y/N
Head		Self				
Co-H						
3.						
4.						
5.						
6.						
7.						
8.						

Will all listed minors be living in the unit at least 50% of the time?  Yes  No  
 If not, explain custody agreement (proof of custody may be required): \_\_\_\_\_

1. Have there been any changes in household composition in the last twelve months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, explain:</i>		
2. Do you anticipate any changes in household composition in the next twelve months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, explain:</i>		
3. Is there someone not listed above who would normally be living with the household?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, explain:</i>		
4. Are you living with anyone now who will not be moving into this unit with you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, explain:</i>		

5. Will all of the persons in the household be or have been full-time students during five calendar months of this year or plan to be in the next calendar year at an educational institution (other than a correspondence school) with regular faculty and students?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**IF YES, ANSWER THE FOLLOWING QUESTIONS (6-10):**

6. Are any full-time student(s) married and filing a joint tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Are any full-time student(s) a TANF or a title IV recipient?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Are any full-time student(s) a single parent living with his/her child(ren) who is not a dependent on another's tax return and whose children are not dependents of anyone other than a parent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Is any student a person who was previously under the care and placement of a foster care program (under Part B or E of Title IV of the Social Security Act)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**C. INCOME**

List ALL sources of income as requested below. If a section doesn't apply, cross out or write NA.

Household Member Name	Source of Income	Gross Monthly Amount
11.	Social Security	\$
12.	Social Security	\$
13.	SSI Benefits	\$
14.	SSI Benefits	\$
15.	Pension (list source)	\$
16.	Pension (list source)	\$
17.	Veteran's Benefits (list claim #)	\$
18.	Veteran's Benefits (list claim #)	\$
19.	Unemployment Compensation	\$
20.	Unemployment Compensation	\$
21.	Public Assistance (Title IV/TANF etc.)	\$
22.	Contributions to the Household (monetary or not)	\$
23.	Full-Time Student Income (18 & Over Only)	\$
24.	Financial Aid (excluding loans)	\$
25.	Annuities (list sources)	\$
26.	Long Term Medical Care Insurance Payments in excess of \$180/day	\$
27.	Scheduled Payments from Investments	\$
28.	Retirement Account Payments (including RMDs)	\$
29.	Income From Rental Property	\$

Household Member Name	Source of Income	Monthly Amount
30.	<b>Employment amount</b>	\$
	Employer:	
	Position Held	
	How long employed:	
31.	<b>Employment amount</b>	\$
	Employer:	
	Position Held	
	How long employed:	



Household Member Name	Source of Income	Monthly Amount
32.	<b>Employment amount</b>	\$
	Employer:	
	Position Held	
	How long employed:	
33.	<b>Previous Employment amount (last 60 days)</b>	\$
	Employer:	
	Position Held	
	How long employed:	
34.	<b>Alimony</b>	
	Do you receive alimony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes list amount you receive.	\$
35.	<b>Child Support</b>	
	Do you receive formal/informal (money, items, etc.) child support?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, list the amount you receive.	\$
36.	<b>Other Income</b>	\$
37.	<b>Other Income</b>	\$
38.	<b>Other Income</b>	\$
39. <b>TOTAL GROSS ANNUAL INCOME</b> (Based on the monthly amounts listed above x 12)		\$
40. <b>TOTAL GROSS ANNUAL INCOME FROM PREVIOUS YEAR</b> (Do <b>NOT</b> leave this blank)		\$
41. Do you anticipate any changes in this income in the next 12 months?		<input type="checkbox"/> Yes <input type="checkbox"/> No
42. Is any member of the household legally entitled to receive income assistance?		<input type="checkbox"/> Yes <input type="checkbox"/> No
43. Is any member of the household likely to receive income or assistance ( <i>monetary or not</i> ) from someone who is not a member of the household as listed on Page 2 etc.)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
44. <i>If yes to any of the above, explain:</i>		
45. Is the income received?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**D. ASSETS (even if jointly held)**

If your assets are too numerous to list here, please request an additional form.  
If a section doesn't apply, cross out or write NA.

46. Checking Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
	#	Bank	Balance \$
	#	Bank	Balance \$

47. Savings Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
	#	Bank	Balance \$
	#	Bank	Balance \$



48. Trust Account	#	Bank	Balance \$	
49. Debit cards not associated with a checking account	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
50. Certificates of Deposit	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
51. Money Market Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
52. Savings Bonds	#	Maturity Date	Value \$	
	#	Maturity Date	Value \$	
	#	Maturity Date	Value \$	
	#	Maturity Date	Value \$	
53. Life Insurance Policy	#		Cash Value \$	
54. Life Insurance Policy	#		Cash Value \$	
55. Mutual Funds	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$
56. Stocks	Name:	#Shares:	Dividend Paid \$	Value \$
	Name:	#Shares:	Dividend Paid \$	Value \$
	Name:	#Shares:	Dividend Paid \$	Value \$
	Name:	#Shares:	Dividend Paid \$	Value \$
57. Bonds	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$

58. Real Estate Property: <b><i>Do you own any property?</i></b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>If yes</i></b> , Type of property	
59. Location of property	
60. Appraised Market Value	\$
61. Mortgage or outstanding loans balance due	\$
62. Amount of annual insurance premium	\$
63. Amount of most recent tax bill	\$
64. Is the property subject to foreclosure, bankruptcy or eviction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>If yes</i></b> , describe:	

65. Have you sold/disposed of any property in the last 2 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>If yes, Type of property:</b>	
66. Market value when sold/disposed	\$
67. Amount sold/disposed for	\$
68. Date of transaction:	

69. Have you disposed of any other assets in the last 2 years (Example: Given away money to relatives, set up Irrevocable Trust Accounts)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, describe the asset:</b>			
70. Date of disposition:			
71. Amount disposed			\$

72. Do you have any other assets not listed above (excluding personal property)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, please list:</b>			

### E. ADDITIONAL INFORMATION

73. Are you or any member of your family currently using an illegal substance?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
74. Have you or any member of your family ever been convicted of a felony?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, describe:</b>			
75. Have you or any member of your family ever been evicted from any housing?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, describe</b>			
76. Have you ever filed for bankruptcy?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If yes, describe</b>			
77. Will you take an apartment when one is available?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Briefly describe your reasons for applying:</b>			

### F. REFERENCE INFORMATION

78. Current Landlord	Name:	
	Address:	
	Cell Phone:	
	Email:	
	How Long?	



79. Prior Landlord	Name:	
	Address:	
	Cell Phone:	
	Email:	
	How Long?	

80. Credit Reference #1:	
Address:	
Account #:	Phone #:

81. Credit Reference #2:	
Address:	
Account #:	Phone #:

82. Personal Reference #1:	
Address:	
Relationship:	Phone #:

83. Personal Reference #2:	
Address:	
Relationship:	Phone #:

84. Personal Reference #3:	
Address:	
Relationship:	Phone #:

85. In case of emergency notify:	
Address:	
Relationship:	Phone #:

<b>G. VEHICLE AND PET INFORMATION (if applicable)</b>			
List any cars, trucks, or other vehicles owned. Parking will be provided for one vehicle. Arrangements with Management will be necessary for more than one vehicle.			
86. Type of Vehicle:		License Plate #:	
Year/Make:		Color:	
87. Type of Vehicle:		License Plate #:	
Year/Make:		Color:	
88. Do you own any pets?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If yes, describe:</i>			



**H. APPLICATION ASSISTANCE**

89. Did anyone help/assist you in filling out this application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, who assisted and what was the reason for the assistance:</i>		

**CERTIFICATION**

I/We hereby certify that I/We Do/Will Not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that my eligibility for housing will be based on applicable income limits and by management’s selection criteria. I/We certify that all information in this application is true to the best of my/our knowledge, and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older, must sign and date the application.

SIGNATURE(S) (***Must be dated***):

_____	_____
(Signature of Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date
_____	_____
(Signature of Co-Tenant)	Date



# Multifamily Housing Case Studies

## A RHIP Training Program

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



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.

<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>	When you answer application questions, you must include the following information:
<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>

## Multifamily Housing Case Studies

### A RHIP 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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<b>Signing the Application</b>	<ul style="list-style-type: none"><li>▫ Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate.</li><li>▫ 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.</li><li>▫ 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.</li></ul>
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<b>Recertifications</b>	<p>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:</p> <ul style="list-style-type: none"><li>▫ All income changes, such as increases of pay and/or benefits, change or loss of job and/or benefits, etc., for all household members.</li><li>▫ Any move in or out of a household member; and,</li><li>▫ 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.</li></ul>
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<b>Beware of Fraud</b>	<p>You should be aware of the following fraud schemes:</p> <ul style="list-style-type: none"><li>▫ Do not pay any money to file an application;</li><li>▫ Do not pay any money to move up on the waiting list;</li><li>▫ Do not pay for anything not covered by your lease;</li><li>▫ Get a receipt for any money you pay; and,</li><li>▫ Get a written explanation if you are required to pay for anything other than rent (such as maintenance charges).</li></ul>
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<b>Reporting Abuse</b>	<p>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.</p>
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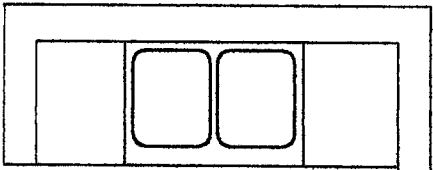
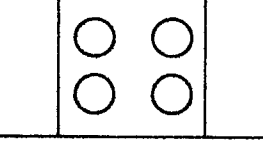
HUD- 1140-OIG THIS DOCUMENT MAY BE REPRODUCED WITHOUT PERMISSION



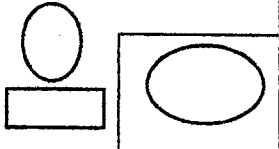


**CLOSET**

**KITCHEN**



**BATH**



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

**CLOSET**

**CLOSET**

**UNIT**

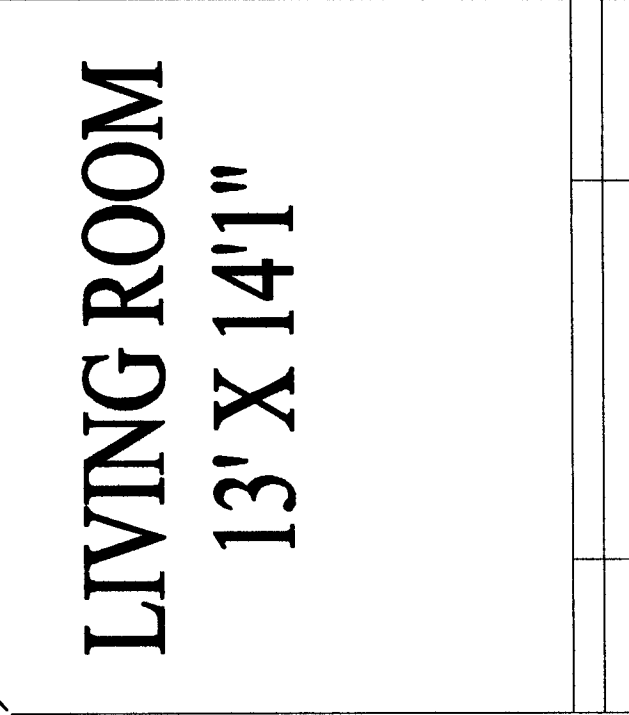
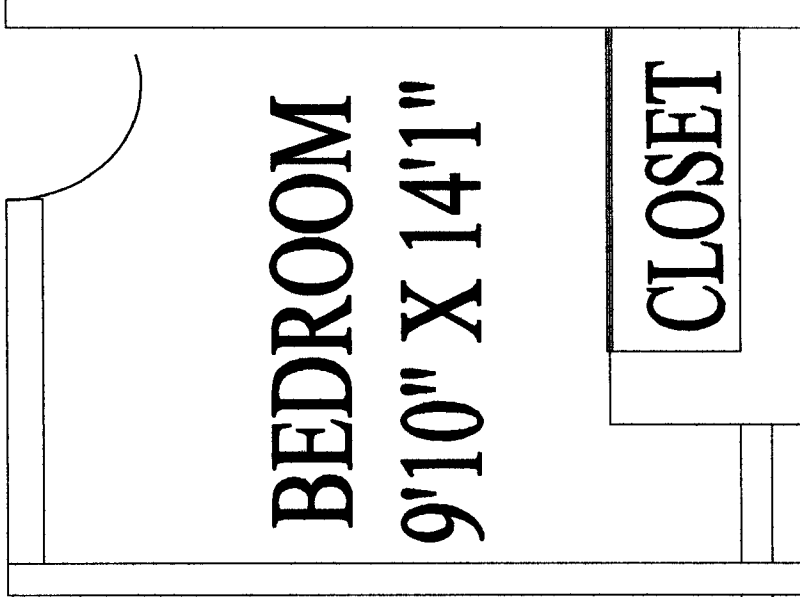
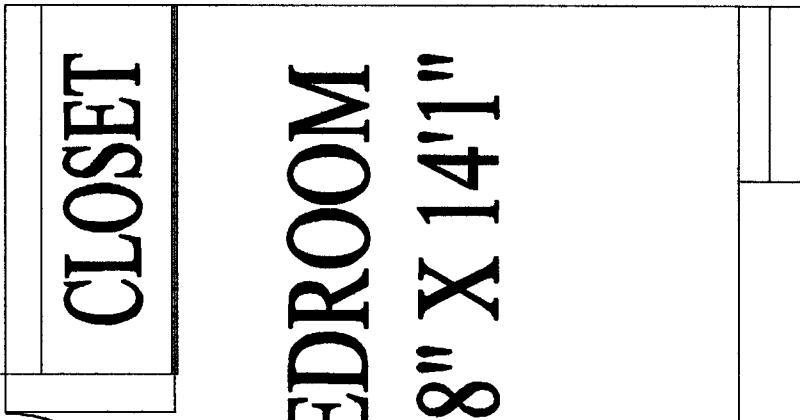
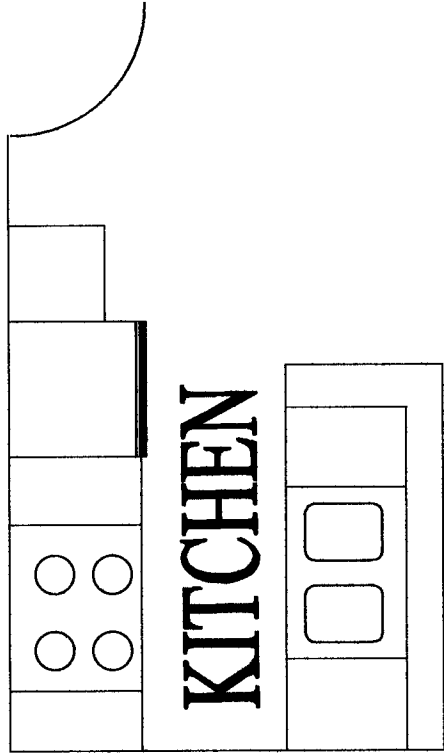
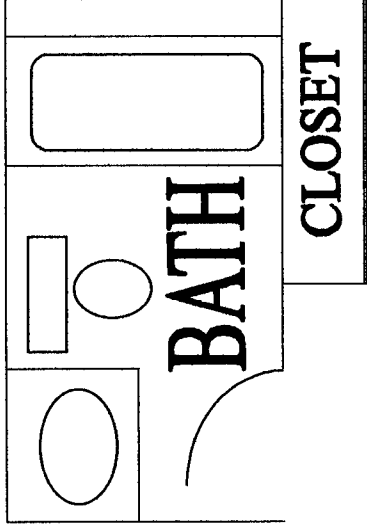
**B**

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

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

# UNIT

# C



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

**CLOSET**

**BATH**

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

**KITCHEN**

***UNIT D***

