STATE OF HAWAII
HAWAII HOUSING FINANCE AND DEVELOPMENT CORPORATION
("HHFDC")

APPLICATION PACKET

AFFORDABLE UNITS

KAHUINA

A FOR-SALE CONDOMINIUM HOUSING PROJECT,
HONOLULU, OAHU, HAWAII

DEVELOPER:

KAKAAKO BLOCK C LLC
AN AFFILIATE OF STANFORD CARR DEVELOPMENT, LLC

EXCLUSIVE PROJECT BROKERS*:

PACIFIC ISLAND REALTY LLC (RB-17549)

PRIMARY PROPERTIES, INC DBA
ENGEL & VÖLKERS HONOLULU (RB-18072)

live@mykahuina.com | (808) 229-3800 | mykahuina.com

The information included in the Application and Information Packets is not an offer to sell any unit in the project, only to provide information of HHFDC's requirements to purchase a unit developed under HHFDC's affordable sales program. Any information about the proposed project or any unit, including prices, design and availability are preliminary and subject to change.

03.2026

IMPORTANT INSTRUCTIONS

This is the **Application Packet** for the affordable units in the Project. The **Project Information Packet** (is considered a part of the Application Packet) **contains important and general information**, such as the Project information, the Hawaii Housing Finance and Development Corporation's (HHFDC)s requirements to purchase an affordable unit, Commonly Used Terms, such as First-Time Homebuyer, Household Income Limits and Eligible Purchaser; and copies of supplemental forms, if required, such as the Co-Applicant Application, Co-Signor Affidavit and Verification of Employment forms. For a list of minimum and additional required documents, acceptable forms of verification/supporting documents, or further explanation of what needs to be submitted with your application form, refer to the attached: (i) Application Submittal Checklist on the next page and (ii) the Exhibit A - Document Checklist (referred to the "Document Checklist"), after the application form. The attached checklists are provided to assist you with gathering your required documents and submitting them together with your application form. **It is recommended you read through the information carefully** to avoid delay in submitting your "Complete Application Packet" to the Exclusive Project Brokers* named on the cover page (collectively, the "Kahuina Sales Team"). **Refer to the Appendix 1** of the Information Packet **for the definition of a "Complete Application Packet."**

To become an Eligible Purchaser, interested persons must be determined by the HHFDC to be an applicant who (1) is a First-Time Homebuyer or a Qualified Resident and (2) demonstrates a need for affordable housing and meets all eligibility, asset and income requirements. To confirm your eligibility to purchase an affordable unit under HHFDC's Affordable Sales Program, HHFDC will review your Completed Application Packet upon receipt from the Kahuina Sales Team. *HHFDC will rely on your submitted information to make the final determination of eligibility, in its sole discretion.*

To complete the Application form, fill out all sections (A-H) and answer all questions as applicable to your household; list all sources of income for household members, 18 years and older, including unemployed adult household members, if there are any (spouse, adult children), who must state $0 income on the worksheet; then, read the Declaration and Acknowledgement in section I. **If you agree with the HHFDC's Affordable Sales Program requirements, sign where indicated.**

Submit your "Complete Application Packet" by ELECTRONIC UPLOAD or IN-PERSON to the Kahuina Sales Team at the Sales Gallery. See next page.

Incomplete, mailed, or faxed applications are not acceptable and are cause for automatic rejection by the Exclusive Project Brokers, or automatic disapproval by the HHFDC.*

Completed applications will be accepted and processed on a first-come, first-serve basis until the project is closed.

Direct all your questions to the *Kahuina Sales Team at (808) 229-3800 or send an email to live@mykahuina.com .

APPLICATION SUBMITTAL CHECKLIST

For Applicant Use Only – Keep for your Records

This checklist is provided **to assist you with compiling and submitting** a "Complete Application Packet." Refer to the enclosed Exhibit A - Document Checklist, for additional information that may be applicable to your application and attach the requested information. **Incomplete, mailed, or faxed applications are not acceptable and will automatically be rejected by the Kahuina Sales Team or disapproved by the HHFDC.**

****If you need assistance to complete your application, contact your Project Sales Team agent.**

AT MINIMUM, COMPLETE, SIGN and UPLOAD the following:	**ATTACH the following if applicable to your application or household**
○ Pre-qualification letter from one of the preferred lenders specified in the Information Packet and *if applicable,* ○ Applicant & Co-Signor Affidavit ○ Applicant & 1% Co-Mortgagor Affidavit ○ Gift Letter ○ APPLICATION TO PURCHASE form ○ Most **CURRENT** paystubs/income statements for **all employed** household members 18 years and older. **IMPORTANT:** Paystubs must be dated within the last 1-2 months of the signed application date. ○ 1-month consecutive paystubs ***with VOE*** form signed by your employer; ***or*** ○ 2-months consecutive paystubs, no VOE: **# of paystubs, if paid:** Each Week – 10 Every 2 Weeks – 6 Each Month – 2 2x a Month – 4 ○ W-2, 1099-Misc, and any other reported income statements as required by the IRS or state tax office. ○ Copy of ***signed*** current year, or most recently filed, Federal and State Income Tax return ***with*** all schedules.	❖ **Refer to the Information Packet for the following SUPPLEMENTAL FORMS.** ○ Adult Household Member Acknowledgement with Exhibit A – Document Checklist ○ Acknowledgement of Prior Purchase of Affordable Property ○ Affidavit as to Applicant's Legal/Physical Custody of Children ○ Real Estate Disclosure Statement with required property ownership documents ○ Verification of Employment ("VOE") **NOTE:** For ***Co-Applicant Application***, use **Application To Purchase** form and check box at top to change use to Co-Application. ❖ **Refer to Exhibit A – Document Checklist for additional details of acceptable forms of the following:** ○ Proof of Divorce, Widower, or Legal Separation ○ Proof of Property Ownership ○ Proof of Self Employment ○ Proof of Legal Dependents and/or Additional ○ Proof of Resident Alien status ○ Proof of Hawaii Residency

Direct all your questions to the: **KAHUINA SALES TEAM**
live@mykahuina.com | (808) 229-3800

Kahuina Sales Gallery
1100 Alakea Street, Suite 102
Honolulu HI 96813
Monday to Saturday: 10:00 am to 5:00 pm

COMPLETED APPLICATIONS ACCEPTED ON A FIRST-COME, FIRST-SERVED BASIS

Complete & submit this form (1)

KAHUINA

APPLICATION RECEIPT#: _____

Assigned by the Project Sales Team

For HHFDC Use Only _____ HHFDC DATE

☐ **Approved QR**
Selection#: **QV**_____
☐ 1xHB
☐ Resident Alien Card
Expire Date:

☐ Prequalification Letter
☐ COM ☐ COS ☐ GIFT$

☐ **Incomplete Application**

☐ **Disapproved QR**, e.g., over-income, no need, etc.
Refer to HHFDC's Disapproval Letter

Before completing the Application, read the IMPORTANT INSTRUCTIONS.

* **"Applicant"** means the Primary Person applying to purchase a unit in the Project *and if applicable,* the Applicant's Spouse, Co-Applicant and Co-Applicant's Spouse.
This project is being built and sold under the HHFDC Program.

Complete all sections below. If not applicable, indicate "NA".

(A):	Applicant Name:		SS#: XXX-XX-	
	Spouse Name (S):		SS#: XXX-XX-	
	Mailing Address:			
	Best Email:		Best Tel:	

What is your Total No. of Primary Buyers (0)

(B):	Additional Household Members – First & Last Name	Add SS# for Household Members ONLY for 18-yrs & older occupants		
1.		xxx-xx-		AGE:
2.		xxx-xx-		AGE:
3.		xxx-xx-		AGE:
4.		xxx-xx-		AGE:

What is your Total No. of Additional Household Members, if any (0)

(C):	If applicable, Co-Applicant (COA) Name ("Additional Buyers")	Check, if no Co-applicant ☐	
1.	COA1:	SS#: XXX-XX-	
2.	COA1-Spouse:	SS#: XXX-XX-	
3.	COA2:	SS#: XXX-XX-	

What is your Total No. of Additional Buyers, if any (0)

(D):	Applicant* acknowledges **(1)** receipt and review of the Project Information Packet as part of this Application Packet; **(2)** the total number of household buyers and household size; **(3)** applications that are INCOMPLETE, MAILED or FAXED are not acceptable and is ***cause for automatic rejection or disapproval by the Exclusive Project Brokers or the HHFDC;*** **and (4)** that the information provided is true and correct.	Y ☐ N ☐	
		Total # of Buyers:	0
		Total Household Size:	0

KAHUINA, A FOR-SALE HOUSING PROJECT

HHFDC Application to Purchase Real Property Under 201H, HRS

☐ ******If checked, use this as a *CO-APPLICANT form*|| **Applicant Name:**

A.	**APPLICANT INFORMATION**		**SPOUSE INFORMATION**	
1.	**First Name**		**First Name**	
2.	**Middle Name**		**Middle Name**	
3.	**Last Name**		**Last Name**	
4.	☐ Married or Domestic Partnership (recognized under operation of law); *also check one, if applicable:* ☐ legally separated; ☐ separated, pending divorce or ☐ living apart ☐ Single: *also check one* → ☐ never married; ☐ legally divorced; ☐ widowed			
5.	**Residence** ☐ Rent ☐ Live w/ Parents ☐ Own* No. of Yrs. at this Address? **Address:**			
B.	**CO-APPLICANT, if any – *Refer to Exhibit A, Section B***		Check if No Co-Applicant ☐	
	Name:			

C.	**ELIGIBLITY REQUIREMENTS - *Refer to Exhibit A, Section C***			**Applicant (A)**	**Spouse (S)**
1.	Are you a U.S. Citizen?			Y ☐ N ☐	Y ☐ N ☐
2.	Are you a Resident Alien?			Y ☐ N ☐	Y ☐ N ☐
3.	Date of Birth & (AGE)	(A)	(S)	AGE	AGE
4.	Are you domiciled in Hawaii?			Y ☐ N ☐	Y ☐ N ☐
5.	Are you a legal resident of Hawaii?			Y ☐ N ☐	Y ☐ N ☐
6.	Are you physically residing in Hawaii?			Y ☐ N ☐	Y ☐ N ☐
7.	Do you or any current or intended household member own any leasehold and/or fee simple property(ies)/lands suitable for dwelling purposes anywhere in the world? *Refer to Exhibit A – Section C.3*			Y ☐ N ☐	Y ☐ N ☐
8.	Have you owned property within a year of the date of this application? ***If (No), skip to #9.** **If (YES)**, when did you own it? When was it sold? Property Address, City, State, Zip:			Y ☐ N* ☐	Y ☐ N* ☐
9.	Have you ever purchased an affordable unit/property sold or developed by or in partnership with a *government* agency such as a State of Hawaii agency, i.e. HCDA, HHFDC or its predecessor agencies; or a County or DPP agency? *Refer to Exhibit A – Section C.4*			Y ☐ N ☐	Y ☐ N ☐

10.	Before this application, were you included as a household member on another person's application? ***If (No), skip to #11**		Y ☐ N*☐	Y ☐ N*☐
	If (Yes), are you still residing with the person?		Y ☐ N ☐	Y ☐ N ☐
	If (Yes), which project are you residing in?	**(A) Project Name**		
		(S) Project Name		
11.	Have you turned in an application for any government sponsored affordable project, such as the HCDA, City & County, DPP, or HHFDC? ***If (No), skip to next section D, below**		Y ☐ N*☐	Y ☐ N*☐
	If (Yes), were you approved to purchase a unit?		Y*☐ N ☐	Y*☐ N ☐
	***If (Yes),** did you sign a contract?		Y*☐ N ☐	Y*☐ N ☐
	If (Yes), for which Agency & what is the project name?	(A) ☐ HHFDC ☐ HCDA ☐ DPP ☐ Another County (specify)		
		Project Name:		
		(S) ☐ HHFDC ☐ HCDA ☐ DPP ☐ Another County (specify)		
		Project Name:		

D. HOUSEHOLD COMPOSITION INFORMATION - *Refer to Exhibit A, Section D*

Refer to the Project Information Packet for additional explanation of the following terms, if necessary.
○ (Legal) Dependent(s) include persons claimed on Income Tax Returns, expectant child, foster children, and hanai children. ○ Non-Dependent household members include persons who are related by blood, marriage, operation of law and/or legal custody who are currently living with or intend to live with Applicant in the property who do not depend on Applicant and/or Spouse as their sole source of provision.
☑ Adult (18-years & older) household members must complete the ***Adult Household Member*** form. *See Exh A.*

	List Additional Household Member Name	Gender	Age☑	Relation to Applicant	Legal ○ Dependent?	Non ○ Dependent?	Status (ex: Student, Working)
D1					☐	☐	
D2					☐	☐	
D3					☐	☐	
D4					☐	☐	

E. Skip this section (not applicable).

THIS SECTION FOR HHFDC USE ONLY

F.	**EMPLOYMENT INFORMATION - *Refer to Exhibit A, Section F***	
1.	Employer Name:	Employer Name:
2.	Employer: Address:	Employer: Address:
3.	Job Title:	Job Title:
4.	Check one: ☐ Full Time ☐ Part-Time Yrs. on this job: Yrs. in this line of work:	Check one: ☐ Full Time ☐ Part-Time Yrs. on this job: Yrs. in this line of work:
5.	How often are you paid? ☐ Weekly ☐ Monthly ☐ Every 2 weeks ☐ Twice a Month	How often are you paid? ☐ Weekly ☐ Monthly ☐ Every 2 weeks ☐ Twice a Month
6.	☐ Self-Employed – Start Date? GET Filing? ☐ Monthly ☐ 6-months ☐ Annually	☐ Self-Employed - Start Date? GET Filing? ☐ Monthly ☐ 6-months ☐ Annually

G.	**APPLICANT'S FINANCIAL ABILITY TO PURCHASE *Refer to Exhibit A, Section G***		
1.	Are you receiving financial assistance to purchase a unit? **If (Yes*),** check the type of assistance below **and** attach the required document: ☐ Co-Signor Affidavit ☐ 1% Co-Mortgagor Affidavit ☐ Gift Funds Letter	Y* ☐ N ☐	Y* ☐ N ☐
2.	Do you have funds available for initial deposit and down payment?	Y ☐ N ☐	Y ☐ N ☐

THIS SECTION FOR HHFDC USE ONLY

H. HOUSEHOLD INCOME ELIGIBILITY WORKSHEET – *Refer to Exhibit A, Section H*

❖ **Important:** All household income must be listed below for adult household members 18 years and older. Adult household members who do not receive income must state their income as $0 and affirm no income by signing below. If additional space is needed, duplicate this worksheet.

	Type of Income	Applicant (a)	Spouse (b)	Other: Adult Household Member (c)	Co-Applicant (d)	Co-Applicant Spouse (e)	Other: Adult Household Member (f)
A. Employment Income - *Refer to Exhibit A, section H* ***and ATTACH copies of (2) months current paystubs.*** *If you only received (1) month of paystubs, also attach HHFDC's completed and signed Verification of Employment form. Refer to Supplemental forms section of the Information Packet.*							
1.	Current Monthly Base Pay						
2.	Tips and/or Commissions						
3.	COLA						
4.	Military Allowances (BAH, subsistence, etc.)						
B. Self-Employment Income - *Refer to Exhibit A, section H.*							
5.	Net Income						
C. Additional monthly and/or Periodic Income* **Refer to Federal and/or State Income Tax Returns;* ***ATTACH copies of signed returns and ALL Schedules of your filed tax returns, as appropriate.***							
6.	Dividends						
7.	Interest						
8.	Pension, Annuity Distributions						
9.	VA Compensation						
10.	Net Rental Income						
11.	Business Income & Investments						
12.	Royalties						
**** Refer to your Divorce Decree & ATTACH copy of your FINAL, certified decree***							
13.	Alimony **Received**						
14.	Child Support **Received**						
**** Refer to your Benefit Letter*** *received at the start of the calendar year* ***& ATTACH*** *copy of checks received or other acceptable supporting documents. See Exh A.*							
15.	Social Security Benefits						
16.	Public Assistance						
17.	Unemployment Benefits						
18.	Sick Pay – TDI						
19.	Income from Trusts						
20.	Distribution from Deferred Compensation Plan						
21.	**Other**, pls. specify						
D.	**Gross Monthly Income (Total of Sections A thru C)**	0.00	0.00	0.00	0.00	0.00	0.00
E.	**Yearly Household Income (Line D multiplied by 12)**	0.00	0.00	0.00	0.00	0.00	0.00
F.	**Total Annual Household Income (Sum of line E, (a) thru (f): $**	0.00					

The undersigned Applicant and if applicable, Spouse, Co-Applicant, Co-Applicant Spouse, and/or additional adult household member(s), hereby certify that the information listed above is true and correct to the best of my knowledge and will be used by HHFDC to determine the Applicant's total household income eligibility. Applicant understands that income eligibility approval is required at time of HHFDC application review only, except in cases of status changes to the identity of the eligible purchaser or property ownership, then recalculation of the total household income, will be required. This worksheet is made a part of the Application to Purchase Real Property under 201H, HRS.

(a) **Applicant Name**		**Signature**		Date	
(b) **Spouse Name**		**Signature**		Date	
(c) **Adult Household Member Name**		**Signature**		Date	
(d) **Co-Applicant Name**		**Signature**		Date	
(e) **Co-Applicant Spouse**		**Signature**		Date	
(f) **Adult Household Member Name**		**Signature**		Date	

I. DECLARATION & ACKNOWLEDGEMENT OF HHFDC ELIGIBILITY

EACH APPLICANT, APPLICANT'S SPOUSE AND ALL CO-APPLICANTS (collectively referred to as "Applicant") HEREBY DECLARE THAT APPLICANT IS ELIGIBLE TO PURCHASE A DWELLING UNIT UNDER CHAPTER 201H, HAWAII REVISED STATUTES (HRS) AND RELATED HAWAII ADMINISTRATIVE RULES (HAR) CHAPTER 15-308; AND FURTHER ACKNOWLEDGE & AGREE THAT:

1. Applicant affirms that they **have received, read, understand and accept** the Project Information Packet, which is a part of this Application.
2. Applicant affirms that **all information provided on and attached to this application are true** and supports the "APPLICATION TO PURCHASE A REAL PROPERTY UNDER CHAPTER 201H, HRS"; shall become the property of HHFDC for purposes of determining Applicant's eligibility to purchase **and will not be returned**.
3. Applicant must **inform HHFDC in writing** through the Exclusive Project Broker of any significant change(s) to the Applicant stated on the application that may affect eligibility to purchase.
4. **If approved, Eligible Purchasers must notify the HHFDC of status changes to the identity of the eligible purchaser and property ownership, from date of HHFDC's approved application until recordation of the purchase of the property. "Identity" means the eligible purchaser stated on HHFDC's approved application receipt** *, not the marital status*.
5. Applicant agrees to update this application one year from HHFDC's determination of eligibility if applicant did not select a unit; if the unit purchased has not closed; approximately (1) year prior to closing; and/or when requested by HHFDC in its sole discretion.
6. In accordance with applicable sections of Chapter 201H, HRS and related HAR, **the purchase of an affordable unit is subject to and restricted or encumbered with the following:**
   a. **HHFDC's use, sale, and transfer restrictions ("Buyback Program Restriction") which means**, HHFDC has the first option to purchase the property during the buyback restriction period and must consent in writing to certain activities related to liens made on the property and ownership changes, among other things. Refer to the Information Packet for hi-lites of the Buyback Program;
   b. **HHFDC's Shared Appreciation Equity ("SAE Program") restriction, if any, which means**, HHFDC must be paid its share of net appreciation in the property when the property is sold, transferred, rented or not owner-occupied, and must consent in writing to certain activities related to title of the property, among other things. Refer to the Information Packet for hi-lites of the SAE Program; and
   c. **Owner occupancy of the property** as the primary residence at all times for as long as the Buyback Program Restriction and/or SAE Programs are effective.
7. At time of unit/lot selection, Applicant agrees to have at least one Applicant present, as a representative authorized to select a unit on behalf of the Applicant and to cooperate with the unit selection requirements.
8. **Applicant understands that making any false statements knowingly in connection with this application shall constitute perjury and is a crime punishable under the provision of the Hawaii Penal Code; and is cause for automatic disqualification from this Program and future HHFDC projects.**

Print Applicant Name	Applicant Signature	Date
Print Applicant Spouse Name, if applicable	Spouse Signature	Date

EXHIBIT A – DOCUMENT CHECKLIST

Review this additional information to understand and verify all eligibility, asset and income requirements; and **attach all supporting documentation as may be required or applicable to your household and application**. Refer to the Project Information Packet for detailed information, such as submittal of an incomplete application and Supplemental Forms, if required (Appendix 2). ❖**Important: (R) means required of all applicants.**

A. Applicant Information & Spouse Information (Application - Section A)

1. If married or legally separated, pending divorce or living apart, the "Spouse" section of the application, must be completed. If legally separated, provide copy of certified separation decree in its entirety.
2. If single due to divorce or widowed, attach the following as applicable.
   - Copy of certified final divorce decree in its entirety. *One-page acknowledgement is not acceptable.*
   - Copy of decedent's death certificate.
3. If you are currently residing in a property owned by applicant and/or household member, refer to section C.3, below; ***and attach*** copy of requested supporting documents as indicated on the form.

B. Co-Applicant Identification (Application - Section B)

1. If applying with a Co-Applicant, **co-applicant must *complete a separate*** HHFDC Application to Purchase Real Property Under 201H (the "Application") form and check the box immediately under the title.
2. **IMPORTANT: Persons who are 18 years and older and not married, not related by blood or operation of the law to the applicant/spouse and are residing with or will reside in the unit, must complete and submit the Application form as a Co-Applicant, not as a Household Member**.
3. **IMPORTANT: Persons who *are* related by blood or operation of the law to the applicant/spouse and intend to be on title with the applicant/spouse, must complete and submit the Application form as a Co-Applicant**.

C. HHFDC Eligibility Requirements (Application - Section C)

1. Citizenship
   - If you are a Resident Alien, submit copy of your valid Resident Alien card (front & back).
   - Persons with temporary resident alien cards are ineligible until resident alien status is confirmed and received.
2. Legal & Physical Resident in Hawaii
   - **(R)** Submit a ***signed*** copy of the most recently filed State of Hawaii Income Tax Returns & all applicable schedules. **If self-employed**, submit last two (2) years with all schedules**.**
   - **(R)** Submit a ***signed*** copy of the most recently filed Federal Income Tax Returns & all applicable schedules. **If self-employed**, submit last two (2) years with all schedules, such as Schedules SE/C.

- If a recent resident to Hawaii and no Hawaii state tax returns were filed at time of application, **submit *signed* copies of your last filed tax return for the state you lived in prior to moving to Hawaii together with 1-month current pay statements showing Hawaii state withholdings *and* one (1) of the following:**
  - Valid Hawaii state ID or Driver's License; **or** Hawaii Voter Registration Certificate
- If a recent college graduate has no tax returns, and was claimed as a dependent on parents' tax returns, please **submit a *signed* copy of parents' most recently filed State of Hawaii Income Tax Returns & Federal Income Tax Returns with all applicable schedules**.
- **If not required to file taxes, provide a State tax office transcript affirming you are not required to file taxes.**

IMPORTANT: If taxes were filed electronically, **provide required filing tax forms for submittal, not those marked "Keep for your Files". Sign where required and attach.** Do not submit signed, one-page acknowledgement of electronic filing statement. *HHFDC requires a copy of your signed, filed tax forms (i.e. Form 1040, HI N-11).*

IMPORTANT. Applicant and/or household member determined to have circumvented the rules to purchase in the Project shall be automatically disqualified from participating in this Project and all future projects.

3. Property Ownership
   - Complete supplemental form, Real Estate Disclosure Statement; ***and attach*** copy of requested supporting document(s) as indicated on the form.
4. Prior Purchase of Affordable Property
   - Complete and sign supplemental form, Acknowledgment of Prior Purchase of Affordable Property; ***and attach*** copy of requested supporting documents as indicated on the form.

D. Household Composition Information (Application – Section D)

1. Household members 18 years and older who are residing with or will be residing in the purchased dwelling **and will not be on title** to the property with applicant/spouse, must complete and attach the following.
   - Completed and **signed** supplemental form, Adult Household Member Acknowledgement.
   - If employed, submit all applicable documentation according to Section H.1, below.
   - If unemployed **or** retired **and** receiving assistance income, refer to Section H.3, below and submit all applicable documentation for all sources of income.
   - If adult child is a college student, attach copy of official college transcript.

IMPORTANT: Persons who are 18 years and older and not married, not related by blood or operation of the law to the applicant/spouse, and are residing with or will reside in the unit, must complete the Application as a Co-Applicant, not as a Household Member,

2. (Legal) Dependents NOT claimed on the income tax return. Attach the following, as applicable .If expecting a child, submit doctor's certification to include expectant child as part of total household size. If not received, expectant child will not be included in total household size.
   - If newborn, submit copy of birth certificate or hospital certificate.

- If foster or hanai child:
  - Complete, notarize and attach supplemental form, Affidavit as to Applicant's Legal/Physical Custody of Children; **and** attach copy of requested supporting document(s) as indicated on the form.
- If children are born when unmarried or from a previous marriage other than applicant or co-applicant, then
  - Complete, notarize and attach supplemental form, Affidavit as to Applicant's Legal/Physical Custody of Children; **and** attach copy of requested supporting document(s) as indicated on the form.
- **If in the process of securing legal custody** of a minor child or disabled adult, the **process must be complete to claim and include** children as a part of the total household size.

E. Skip this section (not applicable).

F. Employment Information (Application - Section F)

1. Refer to section H below for more information of the required documents HHFDC needs to determine your total household income; ***and*** attach as applicable.
2. If self-employed, refer to section H.2, below; ***and*** attach all required documents.

G. Applicant's Financial Ability to Purchase (Application – Section G)

1. If applicant requires or intends to obtain financial assistance, such as the following, notify your selected lender to include the information on your prequalification letter.
   - If Co-Signor, complete, sign, and notarize supplemental form, Applicant and Co-Signor Affidavit. Co-signors need not be related.
   - If Co-Mortgagor, complete, sign and notarize supplemental form, Applicant and 1% Co-Mortgagor Affidavit. Co-mortgagor must be related.
   - If obtaining Gift Funds, submit a signed Gift Funds letter provided by a project lender. Giftor must be a relative, as defined by Fannie Mae and Freddie Mac guidelines, as may be amended. **Gift funds are limited to 35% of the purchase price of the buyer's preferred unit, in U.S. currency.**

H. HHFDC Household Income(+) Eligibility Worksheet (Application – Section H)

(+)**Income is primarily defined as** "money received, especially on a regular basis, for work or through investments; and shall also include money received from sources as follows and listed on the HHFDC Household Income Worksheet. Refer to Appendix 1 of the Information Packet for further explanation. **All persons 18 years & older** living or intending to live in the purchased unit **must disclose all income, if any. If unemployed or not receiving income, you must state $0 and acknowledge no income by signing the income worksheet.**

HHFDC, in its sole and absolute discretion, shall determine TOTAL HOUSEHOLD INCOME as the sum of the gross **monthly** income received from all household members, 18 years and older, from income generating sources such as, the **primary job** before taxes, or a compilation of various part-time jobs comprising 40 hours per week, tips, cost of living allowance (COLA), basic allowance for housing (BAH), dividends, interest, royalties, pensions or annuity distribution, Veterans Administration (VA)

compensation, net rental income, business income & investments, alimony, child support, social security benefits, public assistance, unemployment compensation, sick pay, income from trusts, distribution from deferred compensation plan, and other income from sources such as welfare benefits, workers compensation, aid to families with dependent children, tax-exempt interest income**. HHFDC DOES NOT INCLUDE** overtime income, bonuses and other income from part-time employment if in addition to a primary job, unless it is part of primary job (i.e. retail or auto sales or service (waiter) industry.

1. Employment Income – For all household members 18 years and older:
   - **(R)** Submit copies of employment pay statements **dated within 1-2 months of the signed application date,** as follows:
     - 1-month pay statements **and** complete supplemental form, Verification of Employment (VOE); ***or***
     - 2-month pay statements, **if no** VOE form

   ❖ **Important:** One (1) month pay statements means,
     - 5 consecutive pay statements, if paid weekly;
     - 3 consecutive pay statements, if paid every 2 weeks;
     - 2 consecutive pay statements, if paid 2x a month;
     - 1 pay statement, if paid monthly.

     - If submitting two months' pay statements, submit double the amount of pay statements as described above.
   - **(R)** Submit copies of all income reporting statements such as Form W-2, 1099-Misc, bank statements, etc., submitted with your filed tax returns.

2. Self-Employment Income:
   - Submit ***signed*** copies of the most current year's General Excise Tax (GET) filing; if none, provide copies of payments received (e.g. copies of checks); **and**
   - Submit ***signed*** copies of the Annual GET filing for the most current two (2) years; **and**
   - Submit ***signed*** copies of last two (2) years Federal and Hawaii state tax returns with all attached Schedules.

3. Additional monthly and/or Periodic Income, such as financial assistance, supplemental benefits and the like;
   - Submit copies of the most current benefits letter **and** bank statement confirming receipt of payment such as:
     - Copy of certified program notice confirming annual payment.
     - Copy of Form 1099-MISC.

I. Applicant's Signed Declaration & Acknowledgement of Eligibility (Application – Section I)

1. Applicant and Spouse, if any, **must sign.** ***Electronic signatures are allowed.***

END OF EXHIBIT A