

PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

GENERAL CDBG INTAKE ELIGIBILITY FORM
LIMITED INCOME (LMI) LIMITED CLIENTELE (LMC) / LIMITED JOBS (LMJ) / LIMITED HOUSING (LMH)

NAME:		PHONE:	
ADDRESS:		ZIP:	

Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity: Hispanic Not Hispanic
--	---

Race (Please check the race category which applies to you):

<input type="checkbox"/> White	<input type="checkbox"/> Black/African American	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American & White	<input type="checkbox"/> American Indian/Alaskan Native & White
<input type="checkbox"/> Asian & White	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander	<input type="checkbox"/> Other Multi Racial
<input type="checkbox"/> American Indian or Alaskan Native & Black/African American		

List Yourself and all Other Persons Occupying Home	Relationship	Gender	Age	Employed?
1.	Self			Yes or No
2.				
3.				
4.				
5.				
6.				
7.				
8.				

INCOME VERIFICATION DATA

The assistance you receive is determined in part by the size of your household and your income. All income and assets will require verification before eligibility be granted. Income includes all money coming into the household from all persons over 18 years old. Wages, salaries, tips, commissions; Self-employment income; Retirement, Survivor, or Disability pensions; Social Security or Railroad retirement; Supplemental Security Income, Aid to Families with Dependent Children (AFDC), Temporary Assistance to Needy Families (TANF), Food Stamps, or other public assistance, or public welfare programs; interest, dividends, net rental income, or income from estates or trusts; and any other sources of income received regularly, including Veterans' (VA) payments, unemployment compensation, alimony, and child support must be disclosed.

Household Member	Source of Income	Gross Monthly Amount Received
1.		
2.		
3.		
4.		
5.		

Income Eligibility Acceptable Documentation: Copy of Pay Stubs (from previous employer), Aid to Families with Dependent Children (AFDC) or Temporary Assistance to Needy Families (TANF) Official Printout/letter, Food Stamp Official Printout/letter, Letter confirming amount of unemployment benefits received. proof of child support or alimony. proof of SSA/SSI or Veteran's Benefits, or proof of retirement income. **MUST ATTACH A COPY OF DOCUMENTS. NO EXCEPTIONS.**

I, the undersigned applicant, do hereby authorize **Black Economic Development Coalition, LLC /d/b/a Tools For Change** to verify my personal records, including wages, pensions, and investments. It is understood that this authorization is granted for the sole purpose of certifying my eligibility for federal financial assistance, and that all information acquired in this regard will remain confidential.

BY MY SIGNATURE, I ACKNOWLEDGE THAT ALL INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AM AWARE THAT IF MAKE ANY WILLFUL FALSE STATEMENT IN THIS CERTIFICATION OR ANY OTHER DOCUMENTATION THAT I PROVIDE FOR PROGRAM EUGIBILITY, I MAY BE PUNISHED WITH FINES OR IMPRISONMENT OF UP TO FIVE (5) YEARS, OR BOTH, UNDER SECTION 1001 OF TITLE 18, UNITED STATES CODE, AND I ALSO MAY BE SUBJECT TO CIVIL AND/OR ADMINISTRATIVE PENALTIES AND SANCTIONS.

Signature of Applicant: _____ **Date:** _____

**PUBLIC HOUSING AND COMMUNITY DEVELOPMENT
GENERAL CDBG INTAKE ELIGIBILITY FORM**

DEFINITIONS 124 CFR 570.3

Family means all persons living in the same household who are related by birth, marriage or adoption.

CDBG INCOME ELIGIBILITY	24 CFR 570.208	
Activity classified under family size and income	24 CFR 570.208(a)(2)(i)(B)	24 CFR 570.506(b)(3)(iii)
Activity is classified based on income eligibility requirements that restrict it exclusively to low- and moderate-income persons	24 CFR 570.208(a)(2)(i)(C)	24 CFR 570.506(b)(3)(iii)

Household means all the persons who occupy a housing unit. The occupants may be a single family, one person living alone, two or more families living together, or any other group of related or unrelated persons who share living arrangements. income. For the purpose of determining whether a family or household is low- and moderate-income under subpart C of this part, grantees may select any of the three definitions listed below for each activity, except that integrally related activities of the same type and qualifying under the same paragraph of 570.208(a) shall use the same definition of income. The option to choose a definition does not apply to activities that qualify under 570.208(a)(1) (Area benefit activities), except when the recipient carries out a survey under 570.208(a)(1)(vi). Activities qualifying under 570.208(a)(1) generally must use the area income data supplied to recipients by HUD. The three definitions are as follows:

(i) Annual income as defined under the Section 8 Housing Assistance Payments program at 24 CFR 813.106 (except that if the CDBG assistance being provided is homeowner rehabilitation under 570.202, the value of the homeowner's primary residence may be excluded from any calculation of Net Family Assets); or

Estimate the annual income of a family or household by projecting the prevailing rate of income of each person at the time assistance is provided for the individual, family, or household (as applicable).

Estimated Annual Income shall include income from all family or household members, as applicable. Income or asset enhancement derived from the CDBG-assisted activity shall not be considered in calculating estimated annual income. Law—and moderated income person. means a household having an income equal to or less than the Section 8 low-income limit established by HUD.

Low- and moderate-income person means a member of a family having an income equal to or less than the Section 8 low-income limit established by HUD. Unrelated individuals will be considered as one-person families for this purpose. Low-income household means a household having an income equal to or less than the Section 8 very low-income limit established by HUD.

Low-income person means a member of a family that has an income equal to or less than the Section 8 very low-income limit established by HUD. Unrelated individuals shall be considered as one-person families for this purpose.

	Family Size		Extremely Low (30% of Median)		Very Low (50% of Median)		Low (80% of Median)
<input type="checkbox"/>	1	<input type="checkbox"/>	\$19,000	<input type="checkbox"/>	\$31,650	<input type="checkbox"/>	\$50,650
<input type="checkbox"/>	2	<input type="checkbox"/>	\$21,700	<input type="checkbox"/>	\$36,200	<input type="checkbox"/>	\$57,850
<input type="checkbox"/>	3	<input type="checkbox"/>	\$24,400	<input type="checkbox"/>	\$40,700	<input type="checkbox"/>	\$65,100
<input type="checkbox"/>	4	<input type="checkbox"/>	\$27,100	<input type="checkbox"/>	\$45,200	<input type="checkbox"/>	\$72,300
<input type="checkbox"/>	5	<input type="checkbox"/>	\$31,040	<input type="checkbox"/>	\$48,850	<input type="checkbox"/>	\$78,100
<input type="checkbox"/>	6	<input type="checkbox"/>	\$35,580	<input type="checkbox"/>	\$52,450	<input type="checkbox"/>	\$83,900
<input type="checkbox"/>	7	<input type="checkbox"/>	\$40,120	<input type="checkbox"/>	\$56,050	<input type="checkbox"/>	\$89,700
<input type="checkbox"/>	8	<input type="checkbox"/>	\$44,660	<input type="checkbox"/>	\$59,700	<input type="checkbox"/>	\$95,450

INSTRUCTIONS FOR IMPLEMENTING AGENCY

You must first seek third party verification. This is a verification that is received directly from the source of income. The request can be by mail, fax, or email. It must be clearly evidenced that it was received from the source.



TOOLS FOR CHANGE (TFC) INTAKE FORM

CLIENT #

OFFICE USE ONLY

FEZ

NRSA

In Dade Out of Zone

PERSONAL INFORMATION (PLEASE PRINT)

First Name: _____ Last Name: _____ Home #: _____

Home Address: _____ City: _____ FL Zip: _____

DEMOGRAPHIC INFORMATION

WHITE	BLACK / AFRICAN AMERICAN	ASIAN	AMERICAN INDIAN / ALASKAN NATIVE
NATIVE HAWAIIAN / OTHER PACIFIC ISLANDER	AMERICAN INDIAN / ALASKAN NATIVE & WHITE	ASIAN & WHITE	BLACK / AFRICAN AMERICAN & WHITE
AMERICAN INDIAN / ALASKAN NATIVE & BLACK	OTHER MULTI-RACIAL	ASIAN / PACIFIC ISLANDER	HISPANIC

Are you a veteran? **Yes or No** If so, what branch?

Please circle the appropriate column for your family size and household income.

FAMILY SIZE	EXTREMELY LOW (30% OF MEDIAN)	VERY LOW (50% OF MEDIAN)	Low (80% OF MEDIAN)
1	\$19,000	\$31,650	\$50,650
2	\$21,700	\$36,200	\$57,850
3	\$24,400	\$40,700	\$65,100
4	\$27,100	\$45,200	\$72,300
5	\$31,040	\$48,850	\$78,100
6	\$35,580	\$52,450	\$83,900
7	\$40,120	\$56,050	\$89,700
8	\$44,660	\$59,700	\$95,450

Business Name: _____ Date: _____

Street Address: _____ City: _____ St: _____ Zip: _____

Female Head of Household Male Head of Household New Business Existing Business

Phone #: _____ Fax #: _____ Email: _____

Comment:

Signature: _____ Date: _____

FUNDED BY: MIAMI DADE COUNTY'S PUBLIC HOUSING AND COMMUNITY DEVELOPMENT

TOOLS FOR CHANGE