

**Tennessee Housing Development Agency**  
**Next Available Unit – 140% Verification Form**

Internal Revenue Code Section 42(g)(2)(D)(ii) states that if the income of the occupants of a low income unit increases above 140 percent of the income limitation applicable, the unit shall cease to be treated as a low income unit if ANY UNIT in the building (of comparable size, or smaller than such unit) is occupied by a new resident whose income exceeds the income limitation. This form must be included in the resident file for each household whose income increases above the 140% amount allowable under this provision. The completed form will become a part of the resident's file and must be included for review upon inspection of the units by THDA Compliance staff.

**Identification of 140% Over Income Limit**

Household Name: \_\_\_\_\_  
Building Identification: \_\_\_\_\_ Unit Number: \_\_\_\_\_  
Number of Person in the Household: \_\_\_\_\_ Unit Size (Square Footage): \_\_\_\_\_  
Date of Move In: \_\_\_\_\_ Move in Income: \_\_\_\_\_  
Date Recertified: \_\_\_\_\_ Recertification Income: \_\_\_\_\_  
Income Limit at Recertification: \_\_\_\_\_ 140% of Income Limit: \_\_\_\_\_  
Status of Unit After Next Unit Leased: \_\_\_\_\_ Market \_\_\_\_\_ Program

**Identification of Next Unit Leased**

Identify the Next Available Unit rented in the same building (whether market rate or ow-income) on or after the date of the above noted resident's recertification.

Date Unit Leased: \_\_\_\_\_  
Household Name: \_\_\_\_\_ Unit No.: \_\_\_\_\_  
No. Persons in Household: \_\_\_\_\_ Unit Size (sq. ft.): \_\_\_\_\_  
Move In Income: \_\_\_\_\_ Income Limit: \_\_\_\_\_  
Status of Unit at Move in: \_\_\_\_\_ Market \_\_\_\_\_ Program

**Owner Certification**

The undersigned hereby certifies under penalty of perjury that the information contained herein is true and correct to the best of his/her knowledge.

Property Name: \_\_\_\_\_  
Owner Name: \_\_\_\_\_  
Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_