



Clinton Housing Development Company

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**LOW-INCOME LEASE RIDER**  
**LOW INCOME HOUSING TAX CREDIT**

**THIS RIDER, AN INCOME CERTIFICATION, AND AN INCOME VERIFICATION  
MUST BE OBTAINED FROM ALL TENANTS OF APARTMENTS FOR WHICH LOW-  
INCOME HOUSING TAX CREDITS ARE REQUIRED.**

Tenant: \_\_\_\_\_  
(If there is more than one adult occupant, each one must complete and sign a rider and attachments.)

Lease Term: \_\_\_\_\_ Apt. #: \_\_\_\_\_  
(Starting and Ending Dates)

Building  
Address: \_\_\_\_\_

The undersigned tenant hereby certifies and agrees as follows:

1. **Income Certification:** My income certification is true, correct, and complete.
2. **Income Verification:** The Owner or Property Manager has my permission to verify my income from all sources
3. **Student Status:** I understand that this apartment cannot be occupied entirely by full-time students unless the household meets an allowable tax credit exemption.
4. **False Statements/Certification:** If my income certification and/or any lease application submitted by me is false, or if I fail to provide annual certifications, the Owner or Property Manager will have the right to terminate my lease and recover possession of my apartment to the fullest extent permitted under applicable law.

I understand that the Owner and Property Manager are relying on my income certification in accepting me as a tenant, and that the Owner will be seriously harmed if my income does not qualify the apartment for low-income tax credits. This rider shall be considered part of my lease.

Date: \_\_\_\_\_, 20\_\_\_\_\_

Tenant:

Owner:

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Signature of Applicant/Tenant

Joe Restuccia, Treasurer,

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