Exhibit __
Effective 4/15/2026

Date _____

Affidavit of Eligibility for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting
per the City's Affordable Housing Rules for Unilateral Agreements (2/2010)

Project and Unit		
Project Name **Ahakea at Hoopili**		Applicant name
Unit No.	____ BR / ____ BA	☐ For-sale

Affidavit of Eligibility for AH Unit		
The undersigned Applicant(s) certify the following:		
I am a citizen of the United States or a resident alien.	☐ Yes	☐ No
I am at least eighteen (18) years of age.	☐ Yes	☐ No
I am domiciled in the State of Hawaii and have a bona fide intent to reside in the affordable housing unit.	☐ Yes	☐ No
My total household income does not exceed the allowed annual income for the target group as adjusted for size. See Table A for income limits	☐ Yes	☐ No
I have sufficient gross household income to qualify for the loan to finance the purchase.	☐ Yes	☐ No
I, either individually or with a household member, do not own or have not owned for one year prior to this application, and from date of application to escrow closing, a majority interest in fee simple or leasehold lands suitable for dwelling purposes.	☐ Yes	☐ No
I have not previously received assistance under a program designed and implemented by any State or county agency to assist persons to purchase affordable housing units.	☐ Yes	☐ No
I will be an owner-occupant of the affordable housing unit during the restriction period and cannot rent out the unit during that time.	☐ Yes	☐ No
The City's Affordable Housing Rules provide waivers and exceptions to some requirements under certain circumstances.		

By signing this Affidavit the undersigned represent(s) and affirm(s) that the undersigned has/have read, understand(s) and agree(s) to the above statements.

1) _____ _____
Applicant signature *Print name* *Date*

2) _____ _____
Co-*applicant 1 signature* *Print name* *Date*

3) _____ _____
Co-*applicant 2 signature* *Print name* *Date*

Date _____

Application for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting
per the City's Affordable Housing Rules for Unilateral Agreements (2/2010)

Project and Unit		
Project Name **Ahakea at Hoopili**		Building name (if applicable)
Project address		
Unit No.	____ BR / ____ BA	☐ For-sale

Primary Applicant			
First name			Middle name/ initial
Last name			
Address line 1			
Address line 2			
City	State		ZIP code
Home phone	Mobile phone	Work phone	
Email address			
Photocopy of ID attached:	☐ Hawaii driver's license	☐ Hawaii State ID	☐ Other gov't ID (specify)

Co-Applicant 1 (if applicable)			
First name			Middle name/ initial
Last name			
Address line 1			
Address line 2			
City	State		ZIP code
Home phone	Mobile phone	Work phone	
Email address			
Photocopy of ID attached:	☐ Hawaii driver's license	☐ Hawaii State ID	☐ Other gov't ID (specify)

Co-Applicant 2 (if applicable)		
First name		Middle name/ initial
Last name		
Address line 1		
Address line 2		
City	State	ZIP code
Home phone	Mobile phone	Work phone
Email address		
Photocopy of ID attached: ☐ Hawaii driver's license	☐ Hawaii State ID	☐ Other gov't ID (specify)

Primary Household Member			
First name		Middle name/ initial	
Last name			
Birth date		Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1) below*		Self	
Employer 1			
Address 1		Address 2	
City	State		ZIP code
Start date	Phone		
Employer 2			
Address 1		Address 2	
City	State		ZIP code
Start date	Phone		
Employer 3			
Address 1		Address 2	
City	State		ZIP code
Start date	Phone		

(1) Choices for this category are:
- Self
- Spouse/Partner
- Parent
- Child
- Sibling
- Extended Family
- Friend (not related)
- Caretaker

Please provide a photo ID for every household member

Household Member 2		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer 1		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	
Employer 2		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Member 3		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer 1		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	
Employer 2		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Member 4		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer 1		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	
Employer 2		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Member 5		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer 1		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	
Employer 2		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Member 6		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Member 7		
First name		Middle name/ initial
Last name		
Birth date	Employed? ☐ Yes ☐ No	Full-time student? ☐ Yes ☐ No
Relationship to Primary Applicant *Choose response from options in List (1)*		
Employer		
Address 1	Address 2	
City	State	ZIP code
Start date	Phone	

Household Asset Verification	
Choose asset type from options in List (2) below	
Asset 1 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 2 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 3 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 4 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 5 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 6 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 7 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

Asset 8 Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

(2) Choices for this category are:
- Bonds
- Certificate of Deposit (CD)
- Checking account
- Life insurance
- Mutual funds
- Real estate
- Savings account
- Stock
- Other

Please provide account statements and other supporting documents

Household Income

Please list all income earners, including those part-time and self-employed.
Do not include income of minor children, full-time students up to 23 years old, and live-in aides.

Income -- Household Member 1

Choose income source type from options in List (3) below

Last name	First name
Income source 1 type (3)	Income source 1 Employer name
Annual income	
Income source 2 type (3)	Income source 2 Employer name
Annual income	
Income source 3 type (3)	Income source 3 Employer name
Annual income	
Income source 4 type (3)	Income source 4 Employer name
Annual income	

(3) Choices for this category are:
- Alimony
- Child support
- Gross pay
- Investment income
- No income
- Pension
- Retirement
- Social Security
- Unemployment compensation
- Other

Please provide pay stubs, bank statements and other supporting documents

Income -- Household Member 2

Choose income source type from options in List (3)

Last name	First name
Income source 1 type (3)	Income source 1 Employer name
Annual income	
Income source 2 type (3)	Income source 2 Employer name
Annual income	
Income source 3 type (3)	Income source 3 Employer name
Annual income	

Income -- Household Member 3	
Choose income source type from options in List (3)	
Last name	First name
Income source 1 type (3)	Income source 1 Employer name
Annual income	
Income source 2 type (3)	Income source 2 Employer name
Annual income	
Income source 3 type (3)	Income source 3 Employer name
Annual income	

Income -- Household Member 4	
Last name	First name
Income source 1 type (3)	Income source 1 Employer name
Annual income	
Income source 2 type (3)	Income source 2 Employer name
Annual income	
Income source 3 type (3)	Income source 3 Employer name
Annual income	

Income -- Household Member 5	
Last name	First name
Income source 1 type (3)	Income source 1 Employer name
Annual income	
Income source 2 type (3)	Income source 2 Employer name
Annual income	
Income source 3 type (3)	Income source 3 Employer name
Annual income	

(Add pages as needed)

Income limit, AMI group	
Income limit $ _____	AMI group _____ %

Table A. Household Income Limits for Affordable Housing (2026)

To be eligible for City-regulated Affordable Housing, a household's gross income may not exceed the following limits. These figures are updated annually. **AMI** is the Area Median Income.

	Income limits for Affordable Housing units designated for households earning:			
			120% of AMI	**140% of AMI**
1-person household			$129,360	$150,920
2-person household			$147,840	$172,480
3-person household			$166,320	$194,040
4-person household			$184,800	$215,600
5-person household			$199,680	$232,960
6-person household			$214,440	$250,180
7-person household			$229,200	$267,400

Documentation

Please include the following documentation with this application:

- Applicant AH eligibility affidavit (*Page 1 of this application*)
- Statement that household member does not intend to work for a year (required if no income is selected)
- Most recent two months' pay stubs or other documentation of income, including Social Security and VA benefits
- Most recent two years' tax returns, including W2s, 1099s and applicable schedules
- Most recent two months' bank and other financial institution statements, showing interest rate or interest earned
- Mortgage pre-qualification (for sale) or draft lease agreement (rental)
- Photo ID of all household members
- Other supporting documents (divorce decree, marriage certificate, etc.)
- $75 application review fee. Check payable to "City and County of Honolulu."

Under penalties of perjury, I declare that I have examined all of this application, including accompanying documents, and, to the best of my knowledge, information, and belief, all of the statements contained herein are true, correct and complete.

1) _____ _____
Applicant signature *Print name* *Date*

2) _____ _____
Co-*applicant 1 signature* *Print name* *Date*

3) _____ _____
Co-*applicant 2 signature* *Print name* *Date*