

WORKFORCE HOUSING DENSITY BONUS

TENANT APPLICATION- 2025

All information submitted on this Workforce Housing Density Bonus Tenant Application will be used to determine that occupancy characteristics are compliant with the Declaration of Restrictions Work Force Housing Agreement Imposing Covenants and Restrictions on Real Property made the _____ between _____ and the City of St. Petersburg, recorded in O.R. Book _____, Pg. _____ of the Public Records of Pinellas County, Florida.

A. General Household Information:

1. Tenant Name(s): _____ Unit #: _____

2. Head of household (check one):

☐ Male ☐ Female

3. Head of household's age (check one): ☐

☐ 0-25 ☐ 26-40 ☐ 41-61 ☐ 62+

4. Number of bedrooms (check one):

☐ 1 Bedroom ☐ 2 Bedrooms ☐ 3 Bedrooms ☐ 4 or more bedrooms

5. Total number of persons that will live in the unit (check one):

☐ 1 ☐ 2 ☐ 3 ☐ 4
☐ 5 ☐ 6 ☐ 7 ☐ 8
☐ 9 or more

B. Rent:

1. Monthly rent: \$_____ (not to exceed the published FHFC SHIP 80% and 120% **OR** 150% income and rent limits **(150% only applicable for grandfathered Workforce Housing Density Bonus units approved prior to 8/23/2018).*

C. Mortgage Payment (if applicable):

1. Estimated monthly mortgage loan principal and interest payment: \$_____

2. Estimated month payment for taxes and insurance: \$_____

3. Estimated monthly condominium or homeowner association dues and/or fees: \$_____

4. TOTAL estimated monthly mortgage payment (PITI, Fees & Dues): \$_____

D. Gross Annual Income

Please check the appropriate **FAMILY HOUSEHOLD SIZE** and **TOTAL HOUSEHOLD INCOME** box below.
BEFORE COMPLETING: REFER TO THE ATTACHED 2025 FHFC SHIP INCOME LIMITS (150% only applicable for grandfathered Workforce Housing Density Bonus units approved prior to 8/23/2018).

☐ **1 Person Household**

<input type="checkbox"/>	150%	\$80,281 to \$109,537
<input type="checkbox"/>	120%	\$58,450 to \$87,600
<input type="checkbox"/>	80%	at or below \$58,450

☐ **5 Person Household**

<input type="checkbox"/>	150%	\$135,241 to \$169,042
<input type="checkbox"/>	120%	\$90,151 to \$135,240
<input type="checkbox"/>	80%	at or below \$90,150

☐ **2 Person Household**

<input type="checkbox"/>	150%	\$100,081 to \$125,160
<input type="checkbox"/>	120%	\$66,801 to \$100,080
<input type="checkbox"/>	80%	at or below \$66,800

☐ **6 Person Household**

<input type="checkbox"/>	150%	\$145,201 to \$181,537
<input type="checkbox"/>	120%	\$96,851 to \$145,200
<input type="checkbox"/>	80%	at or below \$96,850

☐ **3 Person Household**

<input type="checkbox"/>	150%	\$112,681 to \$140,872
<input type="checkbox"/>	120%	\$75,150 to \$112,680
<input type="checkbox"/>	80%	at or below \$75,150

☐ **7 Person Household**

<input type="checkbox"/>	150%	\$155,281 to \$194,085
<input type="checkbox"/>	120%	\$103,501 to \$155,280
<input type="checkbox"/>	80%	at or below \$103,500

☐ **4 Person Household**

<input type="checkbox"/>	150%	\$125,161 to \$156,457
<input type="checkbox"/>	120%	\$83,451 to \$125,160
<input type="checkbox"/>	80%	at or below \$83,450

☐ **8 Person Household**

<input type="checkbox"/>	150%	\$165,240 to \$206,580
<input type="checkbox"/>	120%	\$110,201 to \$165,240
<input type="checkbox"/>	80%	at or below \$110,200

Making any false, fictitious, or fraudulent statements or representations, making or using a false writing or document knowing the same to contain any false, fictitious, or fraudulent statements or entry is a crime.

Tenant/Buyer Signature

Date

Telephone Number

DEVELOPER CERTIFICATION

I certify that I, representing _____, certify compliance with the conditions and obligations as stated in the Workforce Housing Density Bonus Agreement. The unit referenced above is either being rented or sold to a family qualified and eligible under the Workforce Housing Density Bonus Agreement and the rent or mortgage payment meet the requirements of the program in accordance with the attached chart.

Developer Signature: _____ Title: _____

DEFINITION OF HOUSEHOLD INCOME

The Workforce Housing Density Bonus Program guidelines requires that the income of all persons, related or unrelated, 18 years of age or older, who are or will be residing in the household, be included in the calculation of income for this program. Unlike income that is averaged for credit underwriting, this program is concerned with income of all members of the household, which is anticipated to continue over the next 12 months. Current gross monthly income is multiplied by 12 to determine "total current annualized income." Gross monthly income is the sum of monthly gross pay, plus any addition from overtime, part-time employment, bonuses, self-employment, dividends, interest, royalties, pensions, VA compensation, income received from trust and income received from business activities or investments, the continuation of which is probable, based on foreseeable economic circumstances.

NOTICE OF APPROVAL or REJECTION by the CITY OF ST. PETERSBURG, HOUSING & COMMUNITY DEVELOPMENT DEPARTMENT

The City of St. Petersburg has received the Workforce Housing Application Form ("Application") from _____, submitted by the Developer on behalf of the above referenced potential renter of a for-rent Workforce Housing Unit ("Unit"). The Application has been reviewed for concurrence of eligibility this _____ day of _____, 20__.

The City of St. Petersburg has found the applicant to be **compliant** with the requirements of the Workforce Housing Bonus Density/Intensity Agreement Program and concur with the Developer that the applicant is income eligible.

The approved Application shall be valid for one-hundred-eighty (180) days from the date of approval and must be valid at the time the Unit is occupied by the Applicant. The Developer may extend validity for an additional thirty (30) days if the Income Certification expires prior to occupancy with affidavit from the renter that no change in income has occurred.

Approved: _____

Date: _____

OR

The City of St. Petersburg has found the applicant to be **non-compliant** with the requirements of the Workforce Housing Bonus Density/Intensity Agreement Program and **do not** concur with the Developer that the applicant is income eligible.

Rejected: _____

Date: _____

Reason: _____
