

Participant Name:

Effective Date:

**Resident Rent Calculation Worksheet**

(1)		Annual Income from all sources
(2)		Income Exclusions
(3)	\$	- Annual Income

## Calculating Adjusted Income

## Dependent Allowance

(4)		0 Number of Dependents
(5)	\$	- Multiply Line 4 by \$480

## Child Care Allowance

(6)	\$	- Anticipated Unreimbursed Expenses for Care of Children
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## Disabled Assistance Allowance

(7)		Disabled Assistance Expenses
(8)	\$	- Multiply Line 3 by 0.03
(9)	\$	- Subtract Line 8 from Line 7
(10)		Family Member Earnings which were dependent on the disabled assistance expenses
(11)	\$	- Lesser of Lines 9 or 10

## Medical Expenses/Elderly Family Allowances

(12)	\$	- List Total for Medical Expenses
(13)	\$	- If Line 9>0, enter amount from Line 12, otherwise add Line 7 and 12 and subtract Line 8.
(14)	\$	400.00 Elderly/Disabled Allowance ( Enter \$400, if applicable)

## Adjusted Income

(15)	\$	400.00 Total Income Adjustments (Add Lines 5, 6, 11,13, and 14)
(16)	\$	- Adjusted Income (Subtract Line 15 from Line 3)

## Resident Rent Determination

(17)	\$	- 30% of Monthly Adjusted Income (Divide Line 16 by 12 and multiply by 0.3)
(18)	\$	- 10% of Monthly Income (Divide Line 3 by 12 and multiply by 0.1)
(19)		Portion of welfare payment designated by the agency to meet the family's housing cost, if applicable.
(20)	\$	- Enter the Largest of Lines 17, 18 or 19. <b>This is the amount per month that must be charged for resident rent.</b>

## Determining Resident Rent for Units where Utilities are not included in Rent

(21)	\$	- Utility Allowance
(22)	\$	- Resident Rent (Subtract Line 21 from Line 20)
(23)	\$	- Utility Reimbursement (Only if Line 22<0, This is the amount that must be paid <u>to</u> the resident as a utility reimbursement.)

Manager/Date:

Name of staff who completed form/Date:

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Determining Residential Rent and Rental Subsidy		
(24)		Gross Tenant Rent (Utility Allowance + Rent)
(25)	\$ -	Adjusted Monthly Income
(26)	\$ -	Rental Subsidy - Amount CSD Pays to LL
(27)	\$ -	Resident Portion of Rent
(28)	\$ -	CSD Rental Subsidy
(29)	\$ -	Net Tenant Rental Amount (excludes Utility Allowance)

Manager/Date:

Name of staff who completed form/Date: