

**ADDENDUM A
CITY OF BELLINGHAM
RENT REGULATORY AGREEMENT**

Date: _____

Owner: _____

Subj. Property Address: _____

In consideration for Community Development Block Grant funding for rehabilitation of the subject rental property, I agree to the following terms and conditions:

- 1) Rental unit(s) will be occupied by households who, at the time of unit occupancy, have incomes at or below 80% of the median income for the City of Bellingham as adjusted for family size. (Table provided on page two of Addendum A)
- 2) Compliance information (Exhibit A) will be provided to the City of Bellingham Rental Rehabilitation Program annually (no later than March 31st of each year) on each unit assisted under this program certifying (1) the rent charged, including utilities, and (2) the income of the household at the time of their initial occupancy. I agree to maintain adequate documentation (copies of tax returns, third party verifications of income, IRS W2 Forms, etc.) of each household's income at the time of their occupancy.
- 3) Unit rent, including utilities, will not exceed rent levels specified in the table provided in page two. Maximum rent levels may be adjusted by the Program annually to reflect changes in the Bellingham median income. In calculating maximum rents including utilities, utilities shall include electric, heat, water, sewer, garbage and shall be based on Section 8 Utility Allowances applicable to Bellingham.
- 4) Units rented under HUD Section 8 Rental Assistance Voucher or Certificate Programs are considered to automatically meet the requirement that units be affordable. All units must be maintained to meet Local Housing Standards.
- 5) A certification of completion will be provided to the Program to substantiate participation in the Landlord Training phase of the Bellingham Crime Free Multi-Housing Program offered through the Bellingham Police Department. Single-family projects are not required to attend, however, it is recommended.
- 6) Failure to comply with the terms and conditions of this agreement may, at the City's option, cause the loan amount to become immediately due and payable. In the event of default, the City, at its option, may increase the interest rate to a maximum of twelve percent (12%).

Signed this _____ day of _____, 2009

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UNIT AFFORDABILITY
Effective 3/19/2009

Unit Size	Maximum Rent (including Utilities)
Studio	\$901/mo.
1 Bedroom	\$966/mo.
2 Bedroom	\$1,159/mo.
3 Bedroom	\$1,339/mo.
4 Bedroom	\$1,494/mo.
5 Bedroom	\$1,648/mo.

INCOME TABLE

Number in Family	1	2	3	4	5	6	7	8+
80% of Median	\$36,050	\$41,200	\$46,350	\$51,500	\$55,600	\$59,750	\$63,850	\$68,000

Definition of Household Income:

Household income is based on the following guidelines:

- 1) Gross family income includes income received by all household members, aged 18 years and older, which is taxable under the IRS guidelines.
- 2) The following sources of income, and any other taxable income as defined by the Internal Revenue Code, must be considered in determining gross family income.
 - a. All income in the form of wages, salary, bonuses, and tips.
 - b. The full amount received from social security, pensions, and annuities.
 - c. Payments in lieu of earnings, such as unemployment compensation, other social security benefits, and dismissal wages.
 - d. Benefits in lieu of earnings other than lump sum payments under health and accident insurance.
 - e. Alimony, child support and the like.
 - f. Subsistence allowance or receipts in connection with education or training.
 - g. Income from earning assets.

**EXHIBIT A
CITY OF BELLINGHAM
RENT REGULATORY AGREEMENT
COMPLIANCE INFORMATION**

Date: _____

UNIT NUMBER: _____

Unit Address: _____

Unit Type: _____ Studio or
_____ Bedrooms

Occupant: _____

Number in Household: _____

Gross Annual Household Income: \$ _____

_____ Unit is rented under Section 8 Rental Assistance/Certificate

(If unit is not rented under Section 8 Program, please complete the following)

Rent Paid by Tenant: \$ _____/Month

	<u>Tenant Pays</u>	<u>Landlord Pays</u>
Check Utilities:		
Heat	_____	_____
Electric	_____	_____
Water/Sewer	_____	_____
Garbage	_____	_____

Date: _____

UNIT NUMBER: _____

Unit Address: _____

Unit Type: _____ Studio or
_____ Bedrooms

Occupant: _____

Number in Household: _____

Gross Annual Household Income: \$ _____

_____ Unit is rented under Section 8 Rental Assistance/Certificate

(If unit is not rented under Section 8 Program, please complete the following)

Rent Paid by Tenant: \$ _____/Month

	<u>Tenant Pays</u>	<u>Landlord Pays</u>
Check Utilities:		
Heat	_____	_____
Electric	_____	_____
Water/Sewer	_____	_____
Garbage	_____	_____

I certify the above information to be true.

Signature: _____

Date: _____

Date: _____

UNIT NUMBER: _____

Unit Address: _____

Unit Type: _____ Studio or
_____ Bedrooms

Occupant: _____

Number in Household: _____

Gross Annual Household Income: \$ _____

_____ Unit is rented under Section 8 Rental Assistance/Certificate
(If unit is not rented under Section 8 Program, please complete the following)

Rent Paid by Tenant: \$ _____/Month

	<u>Tenant Pays</u>	<u>Landlord Pays</u>
Check Utilities:		
Heat	_____	_____
Electric	_____	_____
Water/Sewer	_____	_____
Garbage	_____	_____

Date: _____

UNIT NUMBER: _____

Unit Address: _____

Unit Type: _____ Studio or
_____ Bedrooms

Occupant: _____

Number in Household: _____

Gross Annual Household Income: \$ _____

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Check Utilities:		
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Electric	_____	_____
Water/Sewer	_____	_____
Garbage	_____	_____

I certify the above information to be true.

Signature: _____

Date: _____