		Last Compl	ete Update:	4/16/2024			AREA:	Makiki		
PROJECT NAME:	1506 I	P'IKOI AF	ARTMEN	ITS			PROJECT TYPE:	Family		
ADDRESS:	, 1506 Piik	coi St.					PHONE: 808-536-1506			
CITY:	Honolulu		STATE: HI	ZIP:	96822		FAX:			
MANAGER	R: Pam Sa	ıkai			APPLY ADI	DRESS:		OUT-OF-STATE		
APPLY TO	D: Contact	Pam Sakai fo	r an application)				APPLICATION ACCEPTED:		
APPLY ATTN	N:									
	: 808-536	6-1506		F	AX: 973-0605	EMAIL:	pams@hsiservices.	net		
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
S	studio:		800			1	2			
One	Bdrm:		900			1	3			
Two	Bdrm:		1200			4	5			
Three	Bdrm:		1500			5	7			
Four	Bdrm:									
AGE CRITERIA:				UTILITIES INCLU	sewer, and refuse	3	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 3 AIT LIST (Months): 9 /AITLIST		
				WAITLIS ⁻ PARKING INFO:	FOR PARKING:	PET INFO		PETS OK: NO		
AN OWN RESI		SET LIMITS: PROPERTY:			,	GENERAL	. INFO:			
ASSET LIMIT INF				LEASE:		Call for ap office Two 3 & 2 All applica homeless	n: Request by email opointment to pick up 2 story walk up build ants must be experie ness, sheltered or u	p from manager's ings. encing nsheltered, prior		
INCOME CRITERIA: Must not exceed 50% of HUD Oahu AMI; 1 person - \$45,850; 2 persons - \$52,400; 3 - \$58,950; 4 - \$65,500; 5 - \$70,750; 6 - 76,000; 7 - \$81,250			FURNISHED:		conviction offender.	icy at the project. N I two years prior; no Must show legal res lust be able to pay r ees.	registered sex sidency if not a			
I-PERSON MAXIN	IUM MON	THLY INCOM	≣:	3821		Į				
2-PERSONS MAXI	IMUM MO	NTHLY INCOM	ΛE:	4367						

Last Com	plete Update:	4/12/2024			AREA:	Moiliili	
DJECT NAME: 1727 SOUTH I	BERETANIA	STREET			PROJECT TYPE:	Family	
ADDRESS: 1727 S. Beretania St.					PHONE : 808-944		
CITY: Honolulu	STATE: HI	ZIP:	96826		FAX: 955-591	5	
MANAGER: Josephine Michael			APPLY AD	DRESS:		OUT-OF-STA	
APPLY TO: Housing Solutions, Ir	nc.					APPLICATIO	
APPLY ATTN:							
PPLY PHONE: 808-944-5020			FAX: 955-5915	EMAIL:	Website: https://ww Email: josephine@h	w.hsiservices.ne isiservices.net	
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio: 0	0						
One Bdrm: 18	942		600	2	4		
Two Bdrm: 5	1131		700	5	7		
Three Bdrm: 0							
Four Bdrm: 0							
neless and have at least one child und lates are required every 6 months for waitlist. E CRITERIA: or older.		WAITLI	ST FOR PARKING:		MINIMUM W/ ESTIMATE MAXIMUM W/ ESTIMATE TO REMAIN ON W CALL EVERY	(Months):	
		PARKING INFO): YES	PET INFO:	Р	ETS OK:	
ASSET LIMITS:							
N OWN RESIDENTIAL PROPERTY:				GENERAL	-		
SET LIMIT INFO:		Month-to-month size or risk o child			ow-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-5. Applicants must be homeless or at isk of being homeless and have at least one child under 18. Laundry facilities on site for a ee.		
OME CRITERIA:							
x \$25,260 1 bdrm x \$33,930 2 bdrm		FURNISHED:					
ERSON MAXIMUM MONTHLY INCON		0		ļ			

Last Complete Upda	te: 4/11/2024	AREA: Wahiawa
ROJECT NAME: 220 California		PROJECT TYPE: Elderly
ADDRESS: 220 California Ave.		PHONE: 808-220-7671
CITY: Wahiawa STATE	HI ZIP: 96786	FAX: 808-484-4051
MANAGER: Darlene Higa	APPLY ADDRE 98-030 Hekaha Aiea, Hawaii 96	Street #26 OUT-OF-STAT
APPLY TO: Property Profiles Inc. Attn: Darlene Higa		ACCEPTED YES
APPLY ATTN: Property Management Division		EMAIL: darlene@pro808.com
APPLY PHONE: 808-220-7671	FAX: 808-484-4051	
Unit Type: Number of UNITS: REN	INCOME SO ET:	MAXIMUM Number of People People: CAREGIVER Allowed:
Studio:		
One Bdrm: 41 925	1470 403	1 2
Two Bdrm:		
Three Bdrm:		
Four Bdrm:		NO
ixed rent of \$850; 50% AMI tificate holders need not meet the minimum gross come requirement. Confirmation letter is sent after application is received. Inform management if contact information a application changes GE CRITERIA: Il residents must be 55 or older	(\$25 per month)	MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months):
	WAITLIST FOR PARKING: PARKING INFO: NO I	PET INFO: PETS OK: YES
	1 stall for each unit	
ASSET LIMITS: NONE	_	
AN OWN RESIDENTIAL PROPERTY: YES SSET LIMIT INFO:		GENERAL INFO: Opened 2007. Picnic Area, Community
	LEASE:	meeting room, elevator, private park with BBQ area, victory garden, visitor parking, on-site manager. 2 handicapped accessible units. Coin operated laundry on each floor.
COME CRITERIA:	FURNISHED:	*Failure to respond to communication from management in a timely manner will result in
0% AMI: 1 person \$45,850; 2 persons \$52,400 ood stamps accepted to help meet min. income iteria.	Partly furnishedmajor appliances; vinyl flooring, garbage disposal, walk in shower.	being removed from the waitlist.
PERSON MAXIMUM MONTHLY INCOME:	3820	
PERSONS MAXIMUM MONTHLY INCOME:	4366	

Last Complete Update:	4/12/2024			AREA:	Waikiki
ROJECT NAME: 436 ENA ROAD - CLOS	ED			PROJECT TYPE:	Family
ADDRESS: 436 Ena Rd.				PHONE:	
CITY: Honolulu STATE: H	ZIP:	96815		FAX:	
MANAGER: UNDER CONSTRUCTION		APPLY ADD Appointmen			OUT-OF-STAT APPLICATIO
APPLY ATTN:					ACCEPTED
			EMAIL:		
APPLY PHONE:	FAX:	:			
Unit Type: Number of UNITS: RENT: Studio: One Bdrm:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Two Bdrm:					
Three Bdrm:					
Four Bdrm:					
ENT INFO: RENT IS 30% OF INCOME:	UTILITIES INCLUDE Electric and water	D:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA:				TO REMAIN ON V	
		OR PARKING:		CALL EVERY	Į.
	PARKING INFO:		PET INFO	:	PETS OK: NO
ASSET LIMITS:					
AN OWN RESIDENTIAL PROPERTY:			GENERAL	. INFO:	
SSET LIMIT INFO:	LEASE:				
ICOME CRITERIA:					
	FURNISHED:				
PERSON MAXIMUM MONTHLY INCOME:	0]		
PERSONS MAXIMUM MONTHLY INCOME:	0				

	Last Compl	ete Update:	5/23/2023			AREA:	Waikiki		
	HAU VIST	Ά				PROJECT TYPE:	Elderly		
ADDRESS: 2428 T	usitala St.					PHONE: 808-926	-6700		
CITY: Honolu	lu	STATE: H	I ZIP:	96815		FAX:			
MANAGER: Berna	dette Tai			APPLY AD 2428 Tusita	ala St		OUT-OF-STA		
APPLY TO: Ainaha	au Vista			Honolulu, H	11 96815		APPLICATIO		
APPLY ATTN: Reside	ent Manager's O	office					YES		
APPLY PHONE: 808-7	38-3100		F	AX: 735-1978	EMAIL:	https://www.location able-rentals	nsrentals.com/affo		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
Studio:									
One Bdrm:	99	1225	2xrent	403					
Two Bdrm:	7	1470	2xrent	607					
Four Bdrm:		J		J	J	J	YES		
Units - 30%AMI studio Units - 50% AMI 1 Bed Units - 50%AMI 2 Bedr ection 8 certificate holde GE CRITERIA: I residents must be 62 o	room - \$1053.00 coom - \$1195.00 rs need not mee)	Electric, water, ar	for Parking:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 2 AIT LIST (Months): 6 /AITLIST		
			PARKING INFO:		PET INFO	: F	PETS OK: NO		
A AN OWN RESIDENTIAI	SSET LIMITS: L PROPERTY:		18 tenant/ 5 hand \$40/mo. Once all assigned, occupa restricted to tenar own a vehicle.	stalls ncy to be	GENERAL	. INFO:			
SET LIMIT INFO:			LEASE:			Opened 2007. Has Social Worker on site part time. 6 handicapped units. Community room			
			1 year		with kitch park/Victo 6 visitor p	itchen; picnic area, transportation, private /ictory Garden or parking stalls, coin laundry on ground Funding: Low Income Housing Tax			
COME CRITERIA: % of AMI: 1 person \$27	450: 2 persons	\$31 350	FURNISHED:		Credits (50 % of	AMI)			
00% of AMI: 1 person \$27,450; 2 persons \$31,350 00% of AMI: 1 person \$45,750; 2 persons \$52,250 Food stamps accepted to help meet min. income riteria. Sect 8 certificate holders need not meet nin. income requirements.			Partly furnished appliances only; I	Partly furnishedmajor appliances only; has A/C, window blinds, disposal, vinyl					
ERSON MAXIMUM MO	NTHLY INCOM	E:	3675						

		Last Comp	lete Update:	5/23/2023			AREA	Waikiki
ROJECT NAME:		HAU VIST					PROJECT TYPE	Elderly
ADDRESS:	2426 Tu	usitala St.					PHONE: 808-92	6-6700
CITY:	Honolul	u	STATE: HI	ZIP:	96815		FAX:	
MANAGER: Bernadette Tai APPLY TO: Ainahau Vista II				APPLY ADDRESS: 2428 Tusitala St Honolulu, HI 96815				OUT-OF-STAT
								ACCEPTED:
APPLY ATTN		ent Manager's C 88-3100	office	F/	AX:	EMAIL:	https://www.locatic able-rentals	nsrentals.com/afford
]								
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	15	1140	2x rent	377			
	Bdrm:	47	1225	2x rent	420			
	Bdrm:							
Three E								
Four E	Bdrm:				J		J	YES
RENT INFO: REI 6 units - 30% AM 9 units - 50% AM 41 units - 50% AM 6 units - 60% AM	II studio II studio II 1 bedri	- \$574 per mon - \$901 per mon room - \$966 pe	th th er month	UTILITIES INCLU Electricity, Water,			TOT/ MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:							TO REMAIN ON V	
55+				WAITLIST	FOR PARKING:		CALL EVERY	-
				PARKING INFO:		PET INFO	:	PETS OK: NO
	A	SSET LIMITS:		22 parking stalls, to 50% and 60% , month				
AN OWN RESID		PROPERTY:				GENERAL		
ASSET LIMIT INFO	0:			LEASE:		Locked er Communi	ity room for recreati	onal and
INCOME CRITERI	A:			1				
Maximum Income 30% AMI \$2 50% AMI \$4		· \$31,350/y · \$52,250/y	r r	FURNISHED: Range/Oven, Gar Refrigerator/Free: floor covering, Wi	zer, Resilient			
-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	4410		Į		
2-PERSONS MAXI			ME:	5040				

			lete Update:	11/2/2021			AREA:	McCully
OJECT NAME:			STA				PROJECT TYPE:	Elderly
ADDRESS:	1828 Yo	oung St.					PHONE: 808-949	
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX: 949-523	8
MANAGER	R: Yvette	James, Reside	ent Manager		APPLY ADI			
APPLY TO	D: Locatio	ons			P.O. Box 22 Honolulu, H			OUT-OF-STAT APPLICATIO ACCEPTED
	I: Prope	rty Managemen	t Division					YES
APPLY PHONE	:: 808-73	38-3100			FAX: 735-1978	EMAIL:	http://www.locations ble-rentals.aspx	srentals.com/afford
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	studio:							
One	Bdrm:	53	1100	2xrent	420			
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
meet min incom	MI rent \$ hits; food ne requir		tion 8	Electric, water,			MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
SE CRITERIA:				μ.			ESTIMATE TO REMAIN ON W	
residents must	t be 55 o	r older					CALL EVERY	-
					ST FOR PARKING: D: NO	PET INFO): F	ETS OK: NO
				14 parking sta	lls; \$40/ month			r
	A	SSET LIMITS:	NONE					
		PROPERTY:	YES			GENERAL	-	
SET LIMIT INF	0:			LEASE:		is receive		
						closet in b bars, no t on every		ower with grab
		510: 2 poroopo	¢21.440	FURNISHED:			ocial worker	
0% of AMI: 1 person \$27,510; 2 persons \$31,440 0% of AMI: 1 person \$45,850; 2 persons \$52,400 reference for 30% units given to lowest income 20%AMI) minimum income is 2x rent			major applianc	es, vinyl flooring, linds, a/c. garbage		prox. 9/2006 LIHTC, RHTF, Secti	on 8	
						NO RESP	PONSE IN 2020. LAS	ST UPDATE 2019
ERSON MAXIM	IUM MO	NTHLY INCOM	E:	3820				
RSONS MAXI		ONTHLY INCO	ME:	4366				

	Last Compl	ete Update:	10/15/2021			AREA:	Palama
PROJECT NAME:	BANYAN STRE	ET MANO	R			PROJECT TYPE:	Family
ADDRESS:	1122 Banyan St.					PHONE: 808-843	3-0021
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 376-0042	
	8: Jodie Sakai 9: Banyan Street Manor			APPLY AD 1122 Banya Honolulu HI	an St.		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Jodie Sakai						YES
	E: 808-843-0021			FAX: 376-0042	EMAIL:	manager@banyans	streetmanor.com
s	tudio:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 12 Bdrm: 42				1	6	
Three	Bdrm:						
Four	Bdrm:						
30% of adjusted n Must respond to c	NT IS 30% OF INCOME nonthly gross income. communication from man r or be removed from wa	agement	UTILITIES INCI Hot and cold wa	LUDED: ater, Trash, Sewer		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 24 AIT LIST (Months): 84
Head of household	d must be 18 years or old	der at the		ST FOR PARKING:		CALL EVERY	
time of application).		PARKING INFO		PET INFO	: I	PETS OK: NO
AN OWN RESIL	ASSET LIMITS: DENTIAL PROPERTY: O:	NONE	LEASE: 1 Year		Send requent		ssed stamped
INCOME CRITER	IA:		FURNISHED: Partly furnished appliances only		NO RESP	PONSE IN 2023.	
I 1-PERSON MAXIN	IUM MONTHLY INCOME	E:	3525		Į		
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	4029				

		Last Comp	lete Update:	6/30/2023			AREA:	Ala Moana
OJECT NAME:	BIRC	H STREE	T APART	MENTS			PROJECT TYPE:	Family
ADDRESS:	916 Bir	ch St.					PHONE: 808-597	-8963
CITY:	Honolul	u	STATE: HI	ZIP:	96814		FAX: 589-289	7
MANAGER APPLY TO		ons			APPLY AD P.O. Box 22 Honolulu, H	2420		OUT-OF-STA APPLICATIO ACCEPTED
APPLY ATTN	I: Proper	rty Managemen	nt Division					YES
APPLY PHONE	: 808-73	38-3100			FAX: 735-1978		http://www.locations ble-rentals.aspx	srentals.com/afford
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
	Bdrm: Bdrm:	52	1458	2.5xrent	600			YES
Three	Bdrm:							
Four	Bdrm:							YES
its are advertise ction 8 certifica oss income requ E CRITERIA:	te holdei	rs need not me		Water, sewer a	& trash		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 1 AIT LIST (Months): 6
ad of household	d must b	e 18 years or o	lder	WAITL	ST FOR PARKING:		CALL EVERY	
				PARKING INF	O: NO	PET INFO	: F	ETS OK: NO
		SSET LIMITS:						
AN OWN RESIE SET LIMIT INF		_ PROPERTY:	NO	LEASE:		GENERAL	. INFO: LIHTC, RHTF	
				1 year		Ask mana	ns: from website gement to mail it om Locations ofifice	
aximum Yearly I berson \$50,640 bersons \$57,840 bersons \$65,100 bersons \$72,300)))			FURNISHED: Partly furnishe appliances onl				
ERSON MAXIN	IUM MO	NTHLY INCOM	1E:	4220		ļ		
ERSONS MAXI	MUM M	ONTHLY INCO	ME:	4820				

Last Comple	ete Update:	10/18/2021			AREA:	Chinatown
CHINATOWN G	ATEWAY	PLAZA			PROJECT TYPE:	Family
1031 Nuuanu Ave.			PHONE: 808-524-3737			
Honolulu	STATE: HI	ZIP:	96817		FAX: 528-529	9
		er	Chinatown	Gateway Plaza		OUT-OF-STATE
: Hawaiian Affordable P	roperties					ACCEPTED: YES
I: Dolores Ma						0
: 808-524-3737		F	AX: 528-5299	EMAIL:		
Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
tudio: 1	1100	2050	500	1	2	YES
Bdrm: 199	1200	2160	555	1	3	YES
Barm:			J	1	J	NO
e low rent of a range. 80% AMI - \$1300; 120% - (Market) \$1500.	6 AMI -	UTILITIES INCLU Water + Sewer	DED:		MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
residential history is not	VoritionIo					
	der at the				CALL EVERY	
			F	PET INFO.	F	LIS OK. INO
		depends on rent a	amount.	GENERAL	INFO	
,				Participati	ng in the City Housi	ng
		1 year				
IA:		FURNISHED:				
1 person 2 person	2					
	CHINATOWN G 1031 Nuuanu Ave. Honolulu R: Shen Huang, Resident Randeatte McEnroe Pl D: Hawaiian Affordable Pl I: Dolores Ma I: Bolores Ma I: 808-524-3737 I Type: Number of UNITS: Itudio: 1 Bdrm: 199 Bdrm: 199	1031 Nuuanu Ave. Honolulu STATE: HI R: Shen Huang, Resident Manager Randeatte McEnroe Property Manage D: Hawaiian Affordable Properties I: Dolores Ma I: Dolores Ma I: Type: Number of UNITS: RENT: 1100 Bdrm: 199 I: Dolores Ma I: Type: Number of UNITS: RENT: 1100 Bdrm: 199 Bdrm: 1200 Bdrm: 199 I: Dolores Ma 100 Bdrm: 1200 Bdrm: 199 I: S0% OF INCOME: NO 0 Pow rent of a range. 80% AMI - \$1300; 120% AMI - (Market) \$1500. I residential bistonuis pot varifiable 1 Must be 18 years or older at the n. NONE ASSET LIMITS: NONE NO	CHINATOWN GATEWAY PLAZA 1031 Nuuanu Ave. Honolulu STATE: H ZIP: Resident Manager Randeatte McEnroe Property Manager P: Hawaiian Affordable Properties B: Dolores Ma E: 808-524-3737 Function Image: Mumber of UNITS: RENT: Image: Mumber: Image: Image: <td< td=""><td>CHINATOWN GATEWAY PLAZA 1031 Nuuanu Ave. Honolulu STATE: HI ZIP: 96817 R: Shen Huang, Resident Manager Randeatte McEnroe Property Manager APPLY AD Chinatown 1031 Nuua Honolulu, H B: Dolores Ma SQ FT: of UNITS: RENT: NOME SQ FT: SQ FT: 1100 R:: Number of UNITS: RENT: 100 SQ FT: 500 Bdrm: 199 1200 2160 Bdrm: 2050 555 Bdrm: 2160 555 Bdrm: Water + Sewer Water + Sewer 80% AMI - \$1300; 120% AMI - - (Market) \$1500. VITILITIES INCLUDED: Water + Sewer S0% AMI - \$1300; 120% AMI - - (Market) \$1500. NO Parking starts at \$40 mo. and depends on rent amount. ASSET LIMITS: NONE NO Parking starts at \$40 mo. and depends on rent amount. DENTIAL PROPERTY: NO LEASE:</td><td>CHINATOWN GATEWAY PLAZA 1031 Nuuanu Ave. Honolulu STATE: H Honolulu STATE: H ZP: 96817 Randeatte McEnroe Property Manager Randeatte McEnroe Property Manager Hawaiian Affordable Properties Hawaiian Affordable Properties Chinatown Gateway Plaza 1031 Nuuanu Avenue Hawaiian Affordable Properties EMAL: Chinatown Gateway Plaza 1031 Nuuanu Avenue Honolulu, Hawaii 96817 It Dolores Ma E: 808-524-3737 FAX: 528-5299 I'Type: Number of UNITS: RENT: NCOME Required: SQ FT: Itudio: 1 1000 2050 500 Bdrm: Bdrm: Bdrm: Bdrm: S0% AMI - (Market) \$1500. VITILITIES INCLUDED: Water + Sewer S0% AMI - \$1300; 120% AMI - (Market) \$1500. ASSET LIMITS:</td><td>CHINATOWN GATEWAY PLAZA PROJECT TYPE: 1031 Nuuanu Ave. PHONE: [308-524] Fax: 528-529 Honolulu STATE: [H] ZIP: 96817 AREA: PHONE: [308-524] Fax: 528-529 APPLY ADDRESS: Chinatown Gateway Plaza Chinatown Gateway Plaza 1031 Nuuanu Avenue Hawaiian Affordable Properties Honolulu, Hawaii 96817 E: Bobres Ma EMAIL: E: Bobres Ma EMAIL: E: Bobres Ma EMAIL: I'Type: [VUMTS: RENT: [NUMber of UNITS: RENT: [NUMber of UNITS: RENT: 1100 2050 500 1 2 Bdrm: [199] 1200 2160 555 1 3 Bdrm: [190] 1200 2</td></td<>	CHINATOWN GATEWAY PLAZA 1031 Nuuanu Ave. Honolulu STATE: HI ZIP: 96817 R: Shen Huang, Resident Manager Randeatte McEnroe Property Manager APPLY AD Chinatown 1031 Nuua Honolulu, H B: Dolores Ma SQ FT: of UNITS: RENT: NOME SQ FT: SQ FT: 1100 R:: Number of UNITS: RENT: 100 SQ FT: 500 Bdrm: 199 1200 2160 Bdrm: 2050 555 Bdrm: 2160 555 Bdrm: Water + Sewer Water + Sewer 80% AMI - \$1300; 120% AMI - - (Market) \$1500. VITILITIES INCLUDED: Water + Sewer S0% AMI - \$1300; 120% AMI - - (Market) \$1500. NO Parking starts at \$40 mo. and depends on rent amount. ASSET LIMITS: NONE NO Parking starts at \$40 mo. and depends on rent amount. DENTIAL PROPERTY: NO LEASE:	CHINATOWN GATEWAY PLAZA 1031 Nuuanu Ave. Honolulu STATE: H Honolulu STATE: H ZP: 96817 Randeatte McEnroe Property Manager Randeatte McEnroe Property Manager Hawaiian Affordable Properties Hawaiian Affordable Properties Chinatown Gateway Plaza 1031 Nuuanu Avenue Hawaiian Affordable Properties EMAL: Chinatown Gateway Plaza 1031 Nuuanu Avenue Honolulu, Hawaii 96817 It Dolores Ma E: 808-524-3737 FAX: 528-5299 I'Type: Number of UNITS: RENT: NCOME Required: SQ FT: Itudio: 1 1000 2050 500 Bdrm: Bdrm: Bdrm: Bdrm: S0% AMI - (Market) \$1500. VITILITIES INCLUDED: Water + Sewer S0% AMI - \$1300; 120% AMI - (Market) \$1500. ASSET LIMITS:	CHINATOWN GATEWAY PLAZA PROJECT TYPE: 1031 Nuuanu Ave. PHONE: [308-524] Fax: 528-529 Honolulu STATE: [H] ZIP: 96817 AREA: PHONE: [308-524] Fax: 528-529 APPLY ADDRESS: Chinatown Gateway Plaza Chinatown Gateway Plaza 1031 Nuuanu Avenue Hawaiian Affordable Properties Honolulu, Hawaii 96817 E: Bobres Ma EMAIL: E: Bobres Ma EMAIL: E: Bobres Ma EMAIL: I'Type: [VUMTS: RENT: [NUMber of UNITS: RENT: [NUMber of UNITS: RENT: 1100 2050 500 1 2 Bdrm: [199] 1200 2160 555 1 3 Bdrm: [190] 1200 2

		Last Comp	lete Update:	4/12/2024			AREA:	Chinatown
ROJECT NAME:	CHIN		MANOR				PROJECT TYPE:	Family
ADDRESS:	175 Nor	th Hotel St.					PHONE: 808-54	5-1996
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 536-680	08
MANAGER:	Susan	Chen			APPLY AD On-Site	DRESS:		OUT-OF-STAT
APPLY TO:	Chinat	own Manor						APPLICATIO ACCEPTED
APPLY ATTN:	Winnie	Louie						YES
APPLY PHONE:	808-54	5-1996		F	AX: 536-6808	EMAIL:	winniel@hawaiiaffc	rdable.com
Unit ⁻	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	udio:	89	612	2.5x rent	310	1	2	YES
One B								
Two B								
Four B								NO
10 sq ft \$612 30 sq ft \$636 50 sq ft \$646 lust respond to co a timely manner	ommunic to rema	cation from mar	nagement	Water			MINIMUM W ESTIMATE MAXIMUM W	(Months):
GE CRITERIA:							ESTIMATE TO REMAIN ON V	· · ·
ead of household		e 18 years or ol	der at the	WAITLIST	FOR PARKING:		CALL EVERY	
me of application.				PARKING INFO: Parking not availa	able	PET INFC): I	PETS OK: NO
	A	SSET LIMITS:	NONE	-				
		PROPERTY:	YES			GENERAL		
SSET LIMIT INFC):			LEASE: 1 year			open until decision	
				i yeai			2 adults only	
	۹:							
laximum Annual Iı persons - \$66,84		1 person - 58,		FURNISHED: Partly furnished appliances only, t				
PERSON MAXIMU	JM MOI	NTHLY INCOM	E:	4875		<u> </u>		
PERSONS MAXIN	лим мо	ONTHLY INCO	ME:	5570				

	Last Comple	ete Update:	7/27/2023			AREA	Ewa	
PROJECT NAME: D.	E. THOMPSC	N VILLA	GE (EWA VIL	LAGE ELC	DERL	PROJECT TYPE	Elderly	
ADDRESS: 91-	1295 Renton Rd.					PHONE: 808-68	1-4960	
CITY: Ewa	a Beach	STATE: H	ZIP:	96706		FAX: 681-49	60	
,			,					
MANAGER: Su	isan Lee, EAH			APPLY AD	DRESS:		OUT-OF-STATE	
APPLY TO: Cl	osed for application						APPLICATION ACCEPTED:	
APPLY ATTN:							YES	
APPLY PHONE: 80	8-681-4960		F	AX:	EMAIL:			
Unit Typ	e: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studi	0:							
One Bdrr	n: 84	0		600	1	3	YES	
Two Bdrr								
Three Bdrr								
Four Bdrr	n:	ļ]	J		NO	
RENT INFO: RENT I rent is 30% to a maxim allowance = \$1001 Deposit is based on in responsible for updatim such as phone numbe	num of \$1165 minus come. **Applicants a ng any change in info	\$68 utility	UTILITIES INCLU Water; \$68 utility Utility Allowance	allowance	ige	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24	
AGE CRITERIA:								
Head, co-head, or spo older, or disabled (sec provide a doctor's note	tion 515). If disabled e (disability does not	l, please need to be	WAITLIST PARKING INFO:	FOR PARKING	PET INFO	CALL EVERY	PETS OK: YES	
disclosed) or copy of S	SSI/SSDI benefit lette	er.	Parking included		Service ar	nimal only, with MD	letter, max 30 lbs.	
	ASSET LIMITS:				J			
AN OWN RESIDEN ASSET LIMIT INFO:	TIAL PROPERTY:	YES			GENERAL	INFO: d in 2023. Acc units	s: 7 total. 5 for	
income from assets ca	annot put applicant o	LEASE: wheelcha 1 year hearing i Caregive outside h			ir w/ 1 for sight imp npairment. Priority	airment, 2 for given to 30% AMI. MD letter; can work nt dies, under age		
INCOME CRITERIA:					eligible. F	unding: Farmers H ation. CCH Shoppir	ome	
Minimum income: Ten resources after rent to expenses (food, electri	afford own basic livi		FURNISHED: opened 1			1992. Must respond to communication anagement in a timely manner to remain		
-PERSON MAXIMUM	MONTHLY INCOME	::	4575		J			
2-PERSONS MAXIMUN	M MONTHLY INCOM	IE:	5225					

	Last Compl	ete Update:	4/12/2024			AREA:	Ewa	
ROJECT NAME: FRA		VISTAS E	WA			PROJECT TYPE:	Elderly	
ADDRESS: 91-147	'1 Miula St.					PHONE: 808-681-4000		
CITY: Ewa B	each		ZIP:	96706		FAX: 681-400	1	
MANAGER: Comr	nunity Director -	Geraldine Bare	eng		ula St, 7000		OUT-OF-STAT	
APPLY TO: Franc	siscan Vistas Ewa	a		Ewa Beach	i, HI 96706		APPLICATION ACCEPTED:	
APPLY ATTN: Attn:	Leasing Office						YES	
APPLY PHONE: 808-6	81-4000		F	FAX: 681-4001	EMAIL:	assistant@Francisc www.Franciscanvis		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	126	1290	2Xrent	530	1	n/a		
Two Bdrm:	23	1512	2Xrent	750	1	n/a		
Three Bdrm:								
Four Bdrm:							YES	
 1 bedroom units w/\$57 w/\$664 rent with minimun \$1176 - \$1380; Min. incor certif. holders. Min incom Stamp/Rent subsidy. 	n income require me not needed fo	ment of or Sec 8	Water, Sewer +	Trash		MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6	
AGE CRITERIA:	a of application of	and for all				TO REMAIN ON W CALL EVERY	-	
52 years of age at the tim applicants.	e or application a	and for all	WAITLIS PARKING INFO:	T FOR PARKING:			ETS OK: NO	
			Parking based o 102 stalls total		PET INFO Service ar			
AN OWN RESIDENTIA	ASSET LIMITS:	YES			GENERAL	. INFO:		
ASSET LIMIT INFO:			LEASE:			: Community cente room, kitchen, activ		
Assets are taken into con income eligibility.	sideration in dete	ermining	1 year		room, fith	ess room, salon and each building.		
NCOME CRITERIA:			ļ			30% AMGI, 1 unit @ @ 60% AMGI	2 50% AMGI	
30% AMI - 1 person - ma \$31,440 60% AMI - 1 person - ma max - \$55,020	· · · ·		FURNISHED: Each unit has ele refrigerator, disp conditioner, and	osal, air	Ask mana	n: iciscanvistasewa.coi igement to mail it om manager's office		
PERSON MAXIMUM MC		≣:	4410		<u> </u>			
-PERSONS MAXIMUM M	IONTHLY INCON	ИЕ:	5040					

	L	ast Comp.	lete Update:	11/2/2021			AREA:	Aiea	
PROJECT NAME:	HALAW	A VIEV	V				PROJECT TYPE:	Family	
ADDRESS:	, 99-009 Kala	loa St.					PHONE: 808-488-3613		
CITY:	Aiea		STATE: HI	ZIP:	96701		FAX: 486-615	0	
	: Tammy K. : Halawa Vie	·			APPLY ADI 99-009 Kala Aiea HI 967	aloa St.		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	I: Manageme	ent Office						NO	
APPLY PHONE	: 808-488-36	613			FAX: 486-6150	EMAIL:	tammy@pacificdg.c	om	
Unit		umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:								
	Bdrm:							YES	
Three	Bdrm:	52	0		630 840	1	5	YES	
	Bdrm:	56 12	0		1080	4	9	YES	
RENT INFO: RE Limited number of Two bdrm: \$948 - Three bdrm: \$105 Four bdrm: \$1147 Updates not requi	Section 8 ur \$1500 maxin 3 - \$1850 ma - \$2000- max red to remain	iits num. iximum. iimum	<u> </u>	UTILITIES INCL Electricity, gas a			TOTA MINIMUM W/ ESTIMATE MAXIMUM W/ ESTIMATE	(Months): 12	
AGE CRITERIA:							TO REMAIN ON W		
Head of household	d must be 18	years or o	lder	WAITLIS PARKING INFO Parking included		PET INFO	CALL EVERY	(Months): 0 ETS OK: NO	
AN OWN RESID		T LIMITS: OPERTY:		when asking for	2nd stall.	GENERAL	.INFO:		
ASSET LIMIT INF				LEASE:		OPEN FC - mdihaw			
				1 year; then mo	nth-to-month		from manager's offic	be	
INCOME CRITERI	IA:			J					
Max Income for Sepersons: \$27,850;			24,750; 3	FURNISHED:					
AMGI 30%, 50%, limit for LIHTC			income	Partly furnished appliances only					
1-PERSON MAXIM	IUM MONTH	LY INCOM	E:	ļ		<u> </u>			

	Last Comp	lete Update:	5/7/2024			AREA	Kalaeloa
OJECT NAME: HAL	<mark>E HA'I KA'</mark>	OPUA (B	uilding 37)			PROJECT TYPE	Family
ADDRESS: Building	g 37, 91-1039 S	hangrila				PHONE: 808-68	2-1949
CITY: Kapole	i		ZIP:	96707		FAX: 682-19	70
APPLY TO: 91-10	or@Cantwell-And 78 Yorktown St.		Management Kapole	APPLY AD 91-1078 Yo Kapolei HI	orktown St.		OUT-OF-STA APPLICATIO ACCEPTED
HI 967 APPLY ATTN: Cloud	-	_C / Attn: Leas	ing Team				YES
APPLY PHONE: 808-6	82-1949		F	AX : 682-1970	EMAIL:	CloudbreakComm CloudbreakHawaii	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	38	825	1.5 x rent	221	1	1	
One Bdrm:							
Two Bdrm:							
Three Bdrm:							
Four Bdrm:							YES
its are single room occu r independent single vet		le housing				MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	(Months):
GE CRITERIA:							-
ngle, adult and/or vetera	ans		-	FOR PARKING:		CALL EVERY	
			PARKING INFO: 1 stall per unit	NO	PET INFO	:	PETS OK: NO
А	SSET LIMITS:						
AN OWN RESIDENTIA					GENERAL	INFO:	
SET LIMIT INFO:		-	LEASE: 12 month lease, r	month to month	Communi	ity Kitchen, Commu ity coin-laundry area , walk-up stairway.	
			thereafter		Applicatio	n:	
COME CRITERIA:					Cloudbrea	by email to: akHawaii@Cantwel	
oplicant must make 1.5 t sustain rental amount.	imes the rent ar	nd be able	FURNISHED: Fully furnished, A shower and roll ir available		applicatio	agement to email or n.	ver rental
PERSON MAXIMUM MO	NTHLY INCOM	E:	0		J		
ERSONS MAXIMUM M			0				

Last Complete Upda	ite: 6/30/2023	AREA: Ala Moana
OJECT NAME: HALE KEWALO APA	RTMENTS (Closed for ap	PROJECT TYPE: Family
ADDRESS: 450 Piikoi St.		PHONE: 808-589-1845 ext 15
CITY: Honolulu STATE	: HI ZIP: 96914	FAX: 589-1841
MANAGER: Hawaii Affordable Properties, In	ic. APPLY A	ADDRESS: OUT-OF-STA
APPLY TO:		APPLICATIO ACCEPTED
APPLY ATTN:		
APPLY PHONE: 808-589-1845 x15	FAX:	EMAIL:
Unit Type: Number of UNITS: REN	T: Minimum INCOME Required: SQ FT:	MINIMUM Number of People People: CAREGIVER Allowed:
Studio: 0		
One Bdrm: 27 111	6 530	1 2
Two Bdrm: 71 161.		2 5
Three Bdrm: 29 184	1 1071	5 7
Four Bdrm: 0		
% AMI Bdrm \$656 (7 apts); 2 Bdrm \$787 (6 apts) %AMI Bdrm \$ 1,116 (20 apts); 2 Bdrm \$1318 (45 apts) % AMI Bdrm \$1,612 (20 apts); 3 Bdrm \$1841 (20 apts) GE CRITERIA: The person in the household must be 18 years or der	Solar Hot Water Heating, Sewer, Trash Collection, and water WAITLIST FOR PARKING PARKING INFO:	MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months):
ASSET LIMITS:		fresh/tropical water fish in tank not exceeding
AN OWN RESIDENTIAL PROPERTY:	LEASE:	GENERAL INFO: 5/7/19 - Closed for application. Standford Carr Development - 1100 Alakea Street, Honolulu 96813 808-521-4009 L.I.H.T.C.
COME CRITERIA:	ļ	Tenants mus pay for utilities such as: electricity, cable, and internet
come Limit Al 30% 50% 60% person \$27,450 \$45,750 persons \$31,350 \$52,250 \$62,700 persons \$35,280 \$58,800 \$70,560 persons \$39,180 \$65,300 \$78,360	FURNISHED:	Rents and Income are subject to change
ERSON MAXIMUM MONTHLY INCOME:	0	g.
ERSONS MAXIMUM MONTHLY INCOME:	0	

I	_ast Complete U	pdate: 1	/21/2022			AREA:	Waipahu
PROJECT NAME: HALE K	UHA'O We	einberg				PROJECT TYPE:	Family
ADDRESS: 94-909 Kau	'olu Pl.					PHONE: 808-678	-0892
CITY: Waipahu	ST	ATE: HI	H ZIP: 96797			FAX: 678-088	7
	51/		2 " .	96797			
MANAGER: Marisa Oln	neda-Macias, Res	s. Mgr.		APPLY AD		#220	OUT-OF-STATE
APPLY TO: 1-800-466- Macias 702	-7722 - Trisha Ba 2-259-1903	uman, COS; or	⁻ Marisa Olmeda	St Paul M	rsity Ave. West, N 55114	#330	APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 808-678-08	392		FA	X: 651-209-662		ousing@accessibl	espace.org
	umber UNITS: R		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	18	i i		520		2	YES
Two Bdrm:	6	i —		773		4	YES
Three Bdrm:	— ́ _	i —					
Four Bdrm:	—						
RENT INFO: RENT IS 30% C	DF INCOME: YE	SUTI Wa	LITIES INCLUD ter	ED:		TOTA MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (Months): 12
AGE CRITERIA: Head of household must be 18	vears or older ar	od .			-	O REMAIN ON W CALL EVERY (
have a qualifying disability.			WAITLIST F RKING INFO:	OR PARKING:	PET INFO:		ETS OK: YES
			imum parking a		PET INFO.	1	ETS OK. ITES
ASSE AN OWN RESIDENTIAL PR					GENERAL I	NFO:	
ASSET LIMIT INFO:	ļ		SE:			ai w/ bbq, roll in sh	
					units, heigh opened in 2	ent center, ceiling fa t-adjustable work s 2000 UD Section 811/PF	tations
INCOME CRITERIA:					COS and R	es Manager are of f = caretaker and s	f-site
Maximum annual income: 1 person \$36,650; 2 persons \$ \$47,100; 4 persons \$52,300	41,850; 3 person:		RNISHED:			NSE IN 2021 - La	
					ļ		

1-PERSON MAXIMUM MONTHLY INCOME:

	Last (Complete Update:	1/21/2022			AREA:	Pearl City
ROJECT NAME:	HALE LAU	LIMA (HPHA	-lee) - NOT .	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	, 1184 Waimano ⊦	lome Rd.				PHONE: 808-483	-2550
CITY:	Pearl City	STATE:	II ZIP:	96782		FAX: 483-255	2
MANAGER	: Marcus Asami			APPLY AD	DRESS:		
APPLY TO			3	1002 North Honolulu, H NOT ACCE		OUT-O APPLI PLICATIONS ACC	
APPLY ATTN	: Oahu applicatio NOT ACCEPTI	ns office NG APPLICATIONS	5				NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL: n	phaishereforyou.o	rg
Unit	Type: Numbe of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:						
Two I	Bdrm: 20			771	2	6	YES
Three I	Bdrm: 16			893	3	8	YES
Four I	Bdrm:						
hange or check ti assword is neede 	go to: hpha.myhou heir status. A use ed to access their 8/2/2016****** d must be 18 year	rname and account.	WAITLI PARKING INFO	ST FOR PARKING:	PET INFO:	ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY F mals ok, but only c	AIT LIST (Months): 60 (AITLIST (Months): PETS OK: YES
	ASSET LIN	ITS: NONE			the categor	ies listed below: nder 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPE				GENERAL I	NFO:	
SSET LIMIT INF Cannot own a hou	-		LEASE: 1 year		homeless in displaced.	NCES: Domestic V n transitional shelte ed Low Inc Pub Hs	ers; involuntary
COME CRITERI	IA:		,			ons must be 3 yrs a hamphetamine or s	
persons - \$60,90 persons - \$76,10	Income: 1 person 00; 3 persons - \$6 00; 5 persons - \$8 00; 7 persons - \$9	8,500; 2,200;	FURNISHED: Partly furnishe appliances onl				
PERSON MAXIM	IUM MONTHLY IN	ICOME:	4570		ļ.		
PERSONS MAXI	MUM MONTHLY	INCOME:	5220				

		Last Comp	lete Update:	6/30/2023			AREA	: Moiliili
PROJECT NAME:	HALE	E MAKAN	<mark>A O MOILI</mark>	ILI			PROJECT TYPE	Elderly
ADDRESS:	2139 Al	garoba St.					PHONE: 808-73	5-9099
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX:	
MANAGER APPLY TO		Development, Ir	nc.		APPLY AD 3165 Waial Honolulu, H	lae Avenue, Su	uite 200,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:							
APPLY PHONE	: 808-73	5-9099			FAX: 781-292-342		mdihawaii.com/mc	biliili
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	80	962					
One E	Bdrm:	24	1024				3	
Two E	Bdrm:		0					
Three E	Bdrm:		0					
Four E	Bdrm:		0		ļ			YES
30%AMI Studio (4 units) \$962; 60% A 30%AMI One bdrm bdrm (20 units) \$1 \$1243 - Preference Chaice Voucher AGE CRITERIA: Age 55 plus for all AN OWN RESIE ASSET LIMIT INFO	AMI Stud n (2 units 024; 60% e for pers resident A: DENTIAL	lio (4 units) \$11 s) \$587; 50%Al %AMI One bdrr sons with a Ho s. SSET LIMITS:	I66 MI One n (2 units) using	WAITLI PARKING INFO Parking curren		PET INFO	MINIMUM V ESTIMATE MAXIMUM V ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 1 VAIT LIST (Months): 3 WAITLIST (Months): 0 PETS OK:
INCOME CRITERI		NTHLY INCOM		FURNISHED: Full range, refr garbage dispos	igerator and sal.		space for residents	
2-PERSONS MAXI				5225				

	Last Comp	lete Update:	2/7/2022			AREA:	Nanakuli	
OJECT NAME:	HALE MAKAN	A O'NANAI	KULI			PROJECT TYPE:	Family	
ADDRESS:	89-201 Lepeka Ave.					PHONE: 808-620	-9037, 808-754-7	
CITY:	Wai'anae	STATE: HI	ZIP:	96792		FAX: 620-903	8	
APPLY TO	t: Annie Au Hoon, Resid D: Hale Makana O'Nana I: Application Division	-	ark Development	Main Office	ka Ave., E101		OUT-OF-STA APPLICATIO ACCEPTED YES	
APPLY PHONE	: 808-735-9099, then 1			FAX: 781-295-3427	, a	ww.mdihawaii.con Inniea@mdihawaii.	com	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One I	tudio: Bdrm: 15 Bdrm: 8	0			1	3		
Three I		0			2	5 7	YES	
						ESTIMATE MAXIMUM W. ESTIMATE	AIT LIST	
	d must be of adult age a Iti-family Complex incluc es.		WAITLIS PARKING INFO: Adequate parkir		PET INFO:	TO REMAIN ON W CALL EVERY P ion considered for	(Months): 1 ETS OK: NO	
AN OWN RESIE	ASSET LIMITS: DENTIAL PROPERTY:		who can show v license, current safety check and	alid driver's car registration,	GENERALI			
SET LIMIT INF	O:		LEASE: 1 year Recertification a	innually	Resident m Gated com 3 ground-flo 1bdrm)	oor handicaped uni		
NCOME CRITERIA: ncome Limit 30%AMI 40% AMI person \$21,120 \$28,160 persons \$24,120 \$32,160 persons \$27,150 \$36,200 persons \$30,150 \$40,200 persons \$32,580 \$43,440			FURNISHED: Stove, Refrigera	itor	Application 4-3 bdrm u impaired ar	ADA parking, ramps. Application available at www.mdihawaii.com 4-3 bdrm units are ADA for hearing/vision impaired and these are on the 2nd floor. NO RESPONSE in 2021. Last completed update 5/27/20.		
ERSON MAXIM	IUM MONTHLY INCOM	IE:	2346					
PERSONS MAXI	MUM MONTHLY INCO	ME:	2680					

	Last Com	olete Update:	1/4/2022			AREA:	Kapolei
PROJECT NAME:	HALE MOENA	KUPUNA				PROJECT TYPE:	Elderly
ADDRESS:	1020 Wakea St.					PHONE: 808-466	6-0801
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 466-080)2
	,	ļ	,				
MANAGER	!:			APPLY AD 1020 Wake	DRESS: a Street, Suite	110.	OUT-OF-STAT
APPLY TO	: Manager's Office			Kapolei, HI	,	,	APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	: 808-466-0801			FAX: 466-0802		Website: www.oahu Email: HMK@tmo.o	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:	1258					
One	Bdrm:	1417					
Two	Bdrm:	1701					
Three	Bdrm:						
Four	Bdrm:						
Section 8 accepte Non-refundable ap money order (no c \$500 Security Dep cash or credit card	oplication fee of \$30 in cash). posit in check or money ds).	check or v order (no	All utilities inclu	uded.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:	rad to romain on waitlis	+	-			TO REMAIN ON W	
Applicants must b	e 55 or older.		ν/Διτι ι	ST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	F	PETS OK: YES
	ASSET LIMITS:		is ample stree	ved basis. There t parking for		er apartment with a veight limit of 30lbs	\$350 one-time pet
	DENTIAL PROPERTY:		visitors and ex	tra resident cars.	GENERAL	-	
ASSET LIMIT INF	0:		LEASE:		Huge wind Undercabi Lobby, Tra Covered P	wers and grab bars ows that open; Bre net lighting; Ish Chute,TV Loung arking, 9,166 Sq. F smoking allowed on	athtaking views; ge t. Recreation
INCOME CRITER					High-spee	d elevators, walkab mt, community gar	le neighborhood;
Income Maximum 30% AMI, 55% AN			FURNISHED: AC, window bl disposal, high		building ac Security ca laundry;24 Trash roon	, , , ,	areas; on-site naintenance
1-PERSON MAXIM	IUM MONTHLY INCOM	ΛE:	0				
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	0				

	Last Compl	ete Update:				AREA:	Kapolei
PROJECT NAME:	HALE MOENA	OHANA				PROJECT TYPE:	Family
ADDRESS:	1055 Alohikea St.					PHONE:	
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX:	
MANAGER	:			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO	:						APPLICATION ACCEPTED:
APPLY ATTN	:						
APPLY PHONE	:			FAX:	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
SI	tudio:						
One E	3drm:						
Two E							
Three E Four E					<u> </u>		
RENT INFO: REI	NT IS 30% OF INCOME	: UT	TILITIES INCI	LUDED:		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months):
AGE CRITERIA:			WAITII	ST FOR PARKING:		TO REMAIN ON W CALL EVERY	
		PA			PET INFO		ETS OK: YES
ļ					One time 30lbs and	bet fee: \$350 cat/do breed restrictions a	g weight limit of oply
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				I GENERAL	INFO:	
ASSET LIMIT INFO			ASE:		Covered p controlled communit	barking garage, laun access, elevator, tra y center, lobby, recr y garden and bike ro	ash chute, eational deck,
INCOME CRITERI	A:						
		FL	JRNISHED:				

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	2/7/2022			AREA	Pearl City
ROJECT NAME:	HALE MOHALU	J II Family	1			PROJECT TYPE:	Family
ADDRESS: 7	81 + 779 Kamehameh	a Hwy				PHONE: 808-45	6-9420
	Pearl City	STATE: HI	ZIP:	96782		FAX:	
MANAGER:					ameha Hwy., P	earl City,	OUT-OF-STATI
APPLY TO:	Locations			Hawaii 967	82		APPLICATION ACCEPTED:
APPLY ATTN:							
APPLY PHONE:	808-456-9420			FAX: 456-9406		ttp://www.location le-rentals.aspx	srentals.com/afforda
Unit T	ype: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stu	dio:						
One Bo							
		950	2.5x rent	595 751			
Three Bo		1325					YES
		J	,	,	,	,	
10 2-Bdrm Units a 116 2-Bdrm Units a 42 3-Bdrm Units a	t 50% AMGI	NO	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 /AIT LIST (Months): 60
OL ONTENIA.				ST FOR PARKING:		CALL EVERY	-
			PARKING INF		PET INFO:		PETS OK: NO
	ASSET LIMITS:						
	NTIAL PROPERTY:				GENERAL I		
ASSET LIMIT INFO:			LEASE:		4 handicap On-site ma Landscape	ped units; nager d community area talls with 3 bdrm u	
NCOME CRITERIA:	:				Application	s:	
50% of AMI: 1 Perso	on \$25,320, 2 persons on \$42,220, 2 persons on \$50,640, 2 persons	\$48,200		osal, refrigerator, window coverings,	walk in (ap office entra 2020 Updat	plication box outs nce) te - Info from Web DNSE IN 2023. La	osite
PERSON MAXIMU	M MONTHLY INCOME	:	3517		je.		
PERSONS MAXIM	UM MONTHLY INCOM	1E:	4017				

		Last Compl	lete Update:	2/7/2022			AREA:	Pearl City	
OJECT NAME:	HAL	E MOHALI	<mark>J II SENIO</mark>	R		F	PROJECT TYPE:	Elderly	
ADDRESS:	785 Ka	mehameha Hwy	1			I	PHONE: 808-456	-9420	
CITY:	Pearl C	ity	STATE: HI	ZIP:	96782		FAX : 456-940	6	
MANAGER	R: Kainoa	a Aitaro			APPLY AD		ion 614	OUT-OF-STAT	
APPLY TO): Locati	ons			Property Management Division, 614 Kapahulu Ave., Suite 102, Honolulu, Hawaii 96815				
APPLY ATTN	1:							YES	
APPLY PHONE	: 808-4	56-9420			FAX: 456-9406		tp://www.locations e-rentals.aspx	rentals.com/afford	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
	Bdrm:	163	1470	2 x rent	432				
	Bdrm:								
Three									
Four	Bdrm:			ļ	ļ	J		YES	
9 Units - 30%Al 0 Units - 60% A od stamp &/or h ed to meet min.	MI - \$92	25 subsidy (Sect 8)	may be	Electricity, wat	er & sewer		MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (Months):	
E CRITERIA:						т	O REMAIN ON W		
plications accept	pted up t	nd older at occu to 6 months prio		WAITLI PARKING INF		PET INFO:	CALL EVERY (Months):	
plicant reaching					ble on a first come				
N OWN RESI		SSET LIMITS: PROPERTY:	NONE			I GENERAL IN	NEO.		
SET LIMIT INF				LEASE:		155 unit plus	s 8 handicap-acce		
				6 months - mo year - some u		services; loc laundry; two convenient t	Iding with activities ked entry doors; of elevators at both o bus and shoppir nager. Financed i	oin-operated buildings; ng; on site	
							ITČ, RHTF, HMMI		
ximum Income 1 Pers % AMI \$26,46 % AMI \$52,92	son 60/yr	2 Persons \$30,340/yr \$60,480/yr		refrigerator/fre	arbage disposal, ezer, vinyl flooring, ngs,air conditioner	Applications (application 2021 Update	: locationsrentals. box outside of ren e - Information fror NSE IN 2023. Las	tal office) n Website	
ERSON MAXIM	IUM MO	NTHLY INCOM	E:	4410		ļ			
ERSONS MAXI		ONTHLY INCOM	ME:	5040					

		Last Compl	ete Update:	6/29/2023			AREA:	Pearl City	
PROJECT NAME:	HALE	MOHAL	J SENIOR	APARTME	NTS		PROJECT TYPE:	Elderly	
ADDRESS:	800 Thire	d St.					PHONE: 808-456	-0368	
CITY:	Pearl Cit	v	STATE: HI	ZIP:	96782		FAX: 456-088	5	
		,	<u> </u>	J					
		Semana, Resi	dent Manager		APPLY ADI 800 Third Si Pearl City H	t.		OUT-OF-STATE APPLICATION	
APPLY TO	: Hale Mo	ohalu Office						ACCEPTED:	
APPLY ATTN	l:							YES	
APPLY PHONE	: 808-456	6-0368			FAX: 456-0885	EMAIL:	halemohalu@cbmg	roup.net	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	45	878	2x rent	420	1	2	YES	
One	Bdrm:	132	898	2x rent	526	1	2	YES	
	Bdrm:								
Three									
Four I	Bdrm:					J	ļ	YES	
132 efficiency one people, \$898mon 32 regular one bed Must respond in a from management	droom apt timely ma	ts \$973/mon anner to comm	unication	Water, sewer, g	arbage		MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE ((Months): 9	
AGE CRITERIA: One member mus	t be 55+:	The other men	ber can				TO REMAIN ON W CALL EVERY (-	
be any age	100 001,			WAITLIS PARKING INFO	ST FOR PARKING:	PET INFO		ETS OK: YES	
ļ					d; First come first		s under 40 lbs, neute license. \$100 pet de	ered or spayed w/	
AN OWN RESI		SET LIMITS:				GENERAL			
ASSET LIMIT INF	0:			LEASE:		Funding:	RHTF	Distance	
If residential property owned, 2% of the value (minus mortgage owed) is added to the annual income. Income from assets is included w/income limit or .06% whichever is greater			come.	LEASE: Caregi 6 months; then month-to-month outside 12 months for studios Must h persor persor			egivers are allowed with MD letter; can work ide home. t have 5 years landlord history and 2 conal references ned 1996		
INCOME CRITERI							ty room, laundry, bb tle service	q area	
Min. income = 2x n Maximum Annual \$45,850, 2 person (efficiency/1bdrm) \$62,880;	Income: 5 s- \$52,40	50% AMI- 1 pei 0 (studio)		FURNISHED: Partly furnishec appliances only	Imajor ⁄. Ceiling fans, tub	>7 yrs fo	ap accessible units r criminal record HOME subsidies		
P 1-PERSON MAXIM	IUM MON	THLY INCOM	≣:	3798		k			
2-PERSONS MAXI	МИМ МО	NTHLY INCOM	IE:	5240					

	Last Comp	lete Update:	7/27/2023			AREA:	Pearl City	
PROJECT NAME:	HALE O' HAUG	OLI				PROJECT TYPE:	Elderly	
ADDRESS:	950 Luehu St.					PHONE: 808-45	5-4744	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX: 455-43	84	
MANAGER	: Collette Sanchez, Ma Riyah, Assistant Man			APPLY ADI On-Site; Ma	DRESS: nager's Office	(#102)	OUT-OF-STATE APPLICATION	
APPLY TO							ACCEPTED: YES	
APPLY ATTN				FAX: 455-4384		bhauoli@cmiweb.r vww.haleohauoli.c		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One I	tudio: Bdrm: 99	0		497		3	YES	
Three I	Bdrm: Bdrm: Bdrm:							
5	NT IS 30% OF INCOME aximum rent, 30% of inc		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24	
	d must be 62 years or o	lder, or	WAITLI	ST FOR PARKING:		TO REMAIN ON V CALL EVERY	-	
disabled, spouse o	can be 18 and older.		PARKING INF	D:		dogs or cats, but r	PETS OK: YES	
	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	-		
ASSET LIMIT INFO	O: ceed maximum income		LEASE: 1 year; then m	onth-to-month	busline, be shopping, o Manager o tour.		ed, close to call and arrange a	
INCOME CRITERI	IA:		FURNISHED:		Section 8 Transporta	Funding: Low Income Housing Tax Credit 50%		
			appliances, lin cabinet space,	denergy efficient en closet,lots of , self-cleaning ady, blinds, carpets				
]			

1-PERSON MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	5/8/2024			AREA:	Chinatown
OJECT NAME:	HAL	E PAUAHI	TOWER	5			PROJECT TYPE:	Family
ADDRESS:	155 No	rth Beretania St.					PHONE: 808-532	-3535
CITY:	Honolu	lu	STATE: H	ZIP:	96817		FAX: 532-353	6
MANAGER	t: Micha	el Johnson			APPLY AD On-Site	DRESS:		OUT-OF-STA
APPLY TO):				On one			APPLICATIO ACCEPTED
	l:							NO
APPLY PHONE	: 808-5	32-3535		F	FAX: 532-3536	EMAIL:	n/a	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	110	1212	2.5xrent	560	1	3	YES
Two	Bdrm:	214	1455	2.5xrent	729 - 745	2	5	YES
Three	Bdrm:	72	1130	2.5xrent	937 - 959	3	7	YES
Four	Bdrm:							NO
		cation from man ain on the waitlis		Sewer Trash pick up			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 2 AIT LIST (Months): 6
ead of household ne of application		e 18 years or ol	der at the	WAITLIS	T FOR PARKING:		CALL EVERY	(Months):
				PARKING INFO: \$60/month - 1st \$90/month - 2 ca	car	PET INFO	: Р	ETS OK: NO
		SSET LIMITS:	NONE	below market re \$40/mo		J		
AN OWN RESII SET LIMIT INF		L PROPERTY:	NO			GENERAL	-	
				LEASE: 1 year		Ask mana Send requert envelope Send requert	agement to mail it uest with self addres uest by fax om manger's office	sed stamped
COME CRITER						Fully equi	pped Laundry Room ooms, sprinkler/smo	ke/audio alarm
erson - \$67,700 2 37,000; 4 person	2 persor is - \$96,i 150; 7 p	for Below Marke is - \$77,350; 3 p 650; 5 persons - ersons - \$119,85	ersons - \$104,400;	FURNISHED: Partly furnished- appliances only. drapes, garbage	Tub, carpet,		garden area	
ERSON MAXIN	IUM MO	NTHLY INCOME	≣:	5642		Į.		
PERSONS MAXI	MUM M	ONTHLY INCOM	/IE:	6446				

		Last Compl	ete Update:	10/15/2021			AREA:	Lanakila
PROJECT NAME:	HALE	E PO'AI - N	IOT ACC	EPTING APP	LICATIONS	S	PROJECT TYPE:	Elderly
ADDRESS:	1001 No	orth School St.					PHONE: 808-832	2-3445
CITY:	l Honolul	u		ZIP:	96817		FAX: 832-17	95
MANAGER	: Joseph	n Baxa			APPLY AD	DRESS:		
APPLY TO): Hawaii	Affordable Prop	perties Inc.		Apply On-S	Site		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Joanna	a Li						NO
APPLY PHONE	: 808-83	32-3445		F	AX: 832-1795	EMAIL:	http://hawaiiafforda properties/	ble.com/residential-
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	80	170	NO	390	1	1	YES
One	Bdrm:	126	195	NO	544	2	2	YES
Тwo	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
Rent is 30% of inc 1bdrm \$195. All h floor Security Deposit e *********WL CLOS	andicap	ped units are on I month's rent.		Electricity and wa	ter		MINIMUM W ESTIMATE MAXIMUM W	(Months): 60
AGE CRITERIA:				le.			ESTIMATE TO REMAIN ON V	
One member mus (Caregivers must		; spouse must b	e 55+.	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	CALL EVERY	-
ļ	A	SSET LIMITS:	YES	Parking included parking in back	Guest			
AN OWN RESI						GENERAL	. INFO:	
ASSET LIMIT INF 1 person: \$38,60 2 people: \$44,100	00			LEASE: 1 year; renewable following recertifie		tenant die move to a the 1st flo Yearly inc	s, spouse may rem studio unit. 18 har or. ome recertification	ndicap units all on
INCOME CRITER	IA:			r		Transport	multi-purpose room ation to Shopping a	
Maximum Annual 2 persons - \$39,20		1 person - \$34,	300	FURNISHED: Partly furnished appliances only	major	Must resp	Charities Hawai'l ond to communicat ent iin a timely mar	
1-PERSON MAXIM	IUM MOI	NTHLY INCOME	 ≣:	2858		ļ		
2-PERSONS MAXI	MUM MO	ONTHLY INCOM	IE:	3266				

		Last Compl	ete Update:	1/6/2022			AREA:	Barbers Point
PROJECT NAME:	HALE	E UHIWAI	NALU (Bı	uildings 34 a	nd 35)		PROJECT TYPE:	Single Veterans
ADDRESS:	91-1078	3 Yorktown St.					PHONE: 808-682	2-1949
CITY:	Kapolei			ZIP:	96707		FAX: 682-197	0
	RTaylo	le Taylor, Direct or@Cantwell-An		/ Management APPLY ADDRESS: 91-1078 Yorktown St. Kapolei HI 96707		orktown St.		OUT-OF-STAT
	Kapole	'8 Yorktown St. ei HI 96707 preak Hawaii LL	C / Leasing Te	eam				ACCEPTED: YES
APPLY PHONE:			5		AX: 682-1970	EMAIL:	CloudbreakCommu CloudbreakHawaii@	
Unit ⁻	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Str One B	udio:	80 / 50	1350	1.5 x rent	208-374	1	1	
Two B								
Three B								
Four B				1	J	J	J	NO
RENT INFO: REN A clean + sober en \$1200 - \$1350 Bldg 34 - 80 units; Accept HUD VASH subsidies. All units	vironme Bldg.35 I vouche	ent for veterans. - 50 units. er and other ren	t	UTILITIES INCLUDED: Electric, water, sewer, trash			TOTAL UNITS: 130 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):	
AGE CRITERIA:							TO REMAIN ON W	· · · ·
SINGLE ADULT VI	ETERAN	NS		WAITLIST PARKING INFO:	FOR PARKING	PET INFO	CALL EVERY	-
		SSET LIMITS:		1 stall per unit				
AN OWN RESID ASSET LIMIT INFC		PROPERTY:		ļ		GENERAL	INFO: RHTF, Formerly US	Vote
				LEASE: 1 year		Dpened ir 5 handica Case Mar	n August 2001	
						Applicatio Email: Clo	n: oudbreakHawaii@Ca	antwell-
Affordable housing \$250 - \$84,600 per		Depending on su	ibsidy type)	FURNISHED: Fully furnished, A	AC	Anderson ask mana	.com gement to email it	
						ļ		

Last Complete Upda	te: 10/18/2021			AREA:	Waianae
ROJECT NAME: HALE WAI VISTA I				PROJECT TYPE:	Family
ADDRESS: 86-084 Farrington Hwy.				PHONE: 808-696	-8258
CITY: Waianae STATE	HI ZIP:	96792		FAX: 696-825	8
MANAGER: Marisela Mora			rington Hwy		OUT-OF-STAT
APPLY TO: Locations LLC		Waianae, H Attn: Office			APPLICATIO
APPLY ATTN:					YES
APPLY PHONE: 808-696-8258		FAX: 696-8259	EMAIL:	http://www.locations ble-rentals.aspx	
Unit Type: Number of UNITS: REN	T: Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:					
One Bdrm:					
Two Bdrm: 63 1250) 1.5 x rent	595			
Three Bdrm: 21 1425	5 1.5 x rent	751			
Four Bdrm:					YES
Two Bdrm (50% AMI*) = 1177 (3 two bdrms an ndicap accessible) Two Bdrm, end unit (50% AMI*) = 1202 Bdrm (50% AMI*) = 1374 (1 three bdrm is	e own electricity			ESTIMATE MAXIMUM W ESTIMATE	
GE CRITERIA:				TO REMAIN ON W	
ead of household must be 18 years or older	WAITI	IST FOR PARKING:		CALL EVERY	-
	PARKING INF		PET INFO	: F	ETS OK: NO
ASSET LIMITS: NONE		urrent motor ration & insurance additional stalls	fish ok		
AN OWN RESIDENTIAL PROPERTY: YES	\$50/month		GENERAL	INFO:	
SET LIMIT INFO:	LEASE:			lawaiʻi Housing Deve Low Income Housing	
	12 months		RHTF Applicatio	m: locationsrental.cc m manager's office	-
COME CRITERIA:	,			oplicants are contact interest is needed.	ted via mail when
0% of AMI: 1 person \$26,460; 2 persons \$30,240 0% of AMI: 1 person \$44,100; 2 persons \$50,400			Locked lo parking, c	bby doors, security o oin-op laundry facilit anager's office.	cameras, visitor y on each floor.
ERSON MAXIMUM MONTHLY INCOME:	3675		J		
PERSONS MAXIMUM MONTHLY INCOME:	4200				

	Last	Complete Update:	10/18/2021			AREA:	Waianae
ROJECT NAME:	HALE WA	I VISTA II				PROJECT TYPE:	Family
ADDRESS:	86-086 Farringto	on Hwy.				PHONE: 808-696	-8258
CITY:	Waianae	STATE: H	ZIP:	96792		FAX: 696-825	9
-	R: Barbara Ramo	S		APPLY AD 86-084 Far Waianae, H	rington Highway	,	OUT-OF-STAT
APPLY TO	D: Locations LLC						ACCEPTED: YES
APPLY ATTN	1:				FMAIL - F	http://www.locations	srentals.com/afforda
APPLY PHONE	: 808-696-8258		F	FAX: 696-8259		ple-rentals.aspx	Siemais.com/anorat
Unit	t Type: Numb of UNI		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio:						
	Bdrm: 99	1177	2.5 x rent	595			
Three	Bdrm: 33	1374	2.5 x rent	751			
Four	Bdrm:						YES
7 Two Bdrm (30% 33 Two Bdrm (50 (60% AMI) end ur 33 3 Bdrm (60% A * AMI- see income	9% AMI*) = \$117 hits -= \$1202; 33; AMI*) = \$1374		Water, sewer, ga	arbage		MINIMUM W ESTIMATE MAXIMUM W	(Months): 1 AIT LIST
GE CRITERIA:			ļ.			ESTIMATE TO REMAIN ON W	
	d must be 18 yea	ars or older	WAITLIS	T FOR PARKING:		CALL EVERY	
			PARKING INFO:	NO	PET INFO:	F	PETS OK: NO
	ASSET	MITS: NONE	1st stall free, ad \$50/month	ditional stalls	fish ok		
AN OWN RESI	DENTIAL PROPE				GENERAL	INFO:	
SSET LIMIT INF	O:		LEASE: 12 months		Funding: L RHTF	awai'i Housing Devo ow Income Housing accessible units - F	g Tax Credits;
	IA: rson \$26,460; 2 p	orconc \$20,240;	I FURNISHED:		Application locationsre	ntal.com	
50% of AMI: 1 per	rson \$44,100; 2 p n 52,920; 2 perso	ersons \$50,400;	Stove, Oven, Re disposal, blinds	frigerator only,	Waitlist ap	m manager's office plicants are contac nterest is needed.	
PERSON MAXIM	IUM MONTHLY I	NCOME:	4410		J		
PERSONS MAX	IMUM MONTHLY	INCOME:	5040				

Last Complete Updat	e: 5/28/2024	AREA: Haleiwa
ROJECT NAME: HALEIWA SENIOR CI	TIZEN HOUSING CENTER	PROJECT TYPE: Elderly
ADDRESS: 66-477 Paalaa Rd.		PHONE: 808-637-6455
CITY: Haleiwa STATE:	HI ZIP: 96712	FAX:
MANAGER: Thomas Dulan, Resident Manage	er APPLY ADDRESS: 1165 Bethel St. 2nd Honolulu, HI 96813	APPLICATION
APPLY ATTN:		ACCEPTED:
APPLY PHONE: 808-539-9564	EN FAX: 637-7044	IAIL:
Unit Type: Number of UNITS: RENT	Minimum INCOME Required: SQ FT: Of Ped	ber Number of CAREGIVER
Studio:		
One Bdrm: 63 0		
Two Bdrm:	_	
Four Bdrm:		
RENT INFO: RENT IS 30% OF INCOME: YES Deposit of market rent - \$885	UTILITIES INCLUDED: Water, \$85 utility allowance	TOTAL UNITS: MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): 48
GE CRITERIA:		TO REMAIN ON WAITLIST
Head of household OR spouse must be 62 years old or mobility-disabled. Family members can be children. Roommate must be 18+, caregiver must be 18+	PARKING INFO: NO PET	INFO: PETS OK: NO
ASSET LIMITS: NONE	Parking not included and is limited.	
AN OWN RESIDENTIAL PROPERTY:		ERAL INFO:
ASSET LIMIT INFO:		ding: 100% Section 8 buiilding ndicapped units
NCOME CRITERIA:		
Follows HUD guidelines.	FURNISHED: Partly furnishedmajor appliances only, tub or walk in shower	
PERSON MAXIMUM MONTHLY INCOME:	4254	
PERSONS MAXIMUM MONTHLY INCOME:	4354	

Last	Complete Update:	5/23/2024			AREA:	Kakaako	
OJECT NAME: HALEKAU	WILA PLACE	APARTMEN	ITS	I	PROJECT TYPE:	Family	
ADDRESS: 665 Halekauwila	St.				PHONE: 808-537	-9000	
CITY: Honolulu	STATE: HI	ZIP:	96813		FAX:		
MANAGER: Danielle Delga	do			DRESS:			
APPLY TO: Indigo Real Est	ate Services, Inc.			nter, 665 Haleka olulu, Hi. 96813		OUT-OF-STAT APPLICATIO ACCEPTED	
APPLY ATTN: Live@halekauv	vilaplaceapts.com						
APPLY PHONE: 808-537-9000			FAX: 728-0985	EMAIL: w	ww.halekauwilapla	aceapts.com	
Unit Type: Numb of UNI		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio: 26	1329	2 x Rent	396	1	2		
One Bdrm: 72	1410	2 x Rent	535	1	3		
Two Bdrm: 82	1660	2 x Rent	684	2	5		
Three Bdrm: 18	1889	2 x Rent	1511	4	7		
Four Bdrm: 0	0					YES	
ay be approved with cosigner (wh ore of 774 & earns 4 x rent) or inc ore 625 - 900 have unconditional	creased deposit;	water/sewer/tra	sh included		ESTIMATE MAXIMUM W ESTIMATE	AIT LIST	
GE CRITERIA:		ωαιτι ις	ST FOR PARKING:	т	O REMAIN ON W CALL EVERY		
		PARKING INFO	-	PET INFO:	P	ETS OK: YES	
ASSET LI		1 free parking s Contact Diamon additional stalls	nd Parking for				
AN OWN RESIDENTIAL PROPE	RTY:			GENERAL II	NFO:		
SET LIMIT INFO:		LEASE:		Funding: Hu Square foot	Funding: Hula Mae bonds, LIHTC, HUD, HCD/ Square footage range - Studio - 396 - 424; 1		
		12 months		bedroom - 5 bdrm - 1093	535 - 597; 2 bdrm · 3 - 1511.	- 684-782; 3	
COME CRITERIA:					ng building, laundry Iccess building	v on site,	
aximum annual income: peson: \$58,500 5 pe persons: \$66,850 6 pe persons: \$75,100 7 pe persons: \$83,520	FURNISHED: Tub, ceiliing far carpeting in beo		Application: www.halekauwilapalceapartments.com pick up from manager's office				
PERSON MAXIMUM MONTHLY I	NCOME:	4875		Į			
PERSONS MAXIMUM MONTHLY	INCOME:	5570					

	Last Co	mplete Update:	7/16/2020			AREA:	Chinatown
ROJECT NAME:	HALEWAI'O	LU SENIOR	RESIDENCE	S		PROJECT TYPE:	Elderly
ADDRESS:	1331 River St.					PHONE: 808-808	-1331
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER APPLY TO	 R: Michaels Manager Fautanu D: drop by 	nent; Resident Ma	nager - Cheryl-Anne		DDRESS: .tmo.com/hsr		OUT-OF-STATE APPLICATION ACCEPTED:
	l: : 808-439-6490		F	AX:	EMAIL:	https://info.tmo.com LiveAtHSR.com	ı/hsr
				~ .			
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:	1304	2 X Rent				
Two	Bdrm:	1627	2 X Rent				
Three	Bdrm:						
Four	Bdrm:						
free rent.	1 bedroom only.		Water, sewer & ti			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 0 AIT LIST (Months): 12 /AITLIST
			WAITLIST PARKING INFO:	FOR PARKING	PET INFO	y F	ETS OK: YES
			unreserved garag	ge parking		son, 30 lb. limit unles	- ŋ
	ASSET LIMIT DENTIAL PROPERT				GENERAL		
ASSET LIMIT INF			LEASE:		Controlled private do room with	d access to building; og park; 2 activity roo kitchen; community alking track; bike pa	oms; Community courtyard and
INCOME CRITER	IA:		,				
60% AMI - 1 perso), 60 & 80% AMI. on - \$27,450; 2 perso on -\$54,900; 2 perso on - \$73,200; 2 perso	n - \$62,700	FURNISHED:		-		
-PERSON MAXIM	IUM MONTHLY INC	OME:	6100		μ		
-PERSONS MAXI	MUM MONTHLY IN	COME:	6967				

	Last Com	plete Update:	7/15/2020			AREA:	Lanakila	
PROJECT NAME: H	ALI'A HALE	- NOT AC	CEPTING AP		NS	PROJECT TYPE:	Elderly	
ADDRESS: 85	1 North School St.					PHONE: 808-586-7595		
CITY: Ho	nolulu	STATE: HI	ZIP:	96817		FAX: 586-752	26	
J								
MANAGER: Th	nomas Ling							
APPLY TO: Ha	awaii Affordable Pr	operties Inc.		Apply on-s	ite		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN: Jo	oanna Li						NO	
APPLY PHONE: 80	08-586-7595		F	AX:		http://hawaiiafforda properties/	ble.com/residential-	
Unit Typ	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studi	io: 31	170	NO	408	1	1	YES	
One Bdr	m: 10	195	NO	540	2	2	YES	
Two Bdr	m:							
Three Bdr	m:							
Four Bdr	m:						YES	
rent is 30% of income \$195. Security deposit equa Wait time for 1 bdrm Wait time for 2bdrm: 6	l to 1 month's rent. 72 months		Electricity and wa	ater		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 72 AIT LIST	
AGE CRITERIA:						TO REMAIN ON W		
One member must be Caregivers must be 18		t be 55+;	WAITLIST	FOR PARKING	:	CALL EVERY	(Months): 12	
			PARKING INFO: Parking included	YES	PET INFO:	F	PETS OK: NO	
r.	ASSET LIMITS	: YES						
AN OWN RESIDEN	ITIAL PROPERTY:	NO			GENERAL	-		
ASSET LIMIT INFO: Asset Limit: 1 person - \$38,600 2 persons - \$44,100			LEASE. tenant 1 year; renewable yearly following recertification			Caregivers are allowed with MD letter. If elderly enant dies, spouse must transfer to studio unit. Opened 1995 ame w/l as Hale Po'ai		
			1		Meeting ro	ated laundry oom w/kitchen and v	wheelchair	
Maximum Annual Incc 2 persons - \$39,200.	ome: 1 person - \$34	4,300;	FURNISHED: Partly furnished appliances only.		accessible Funding: I NO RESP update 3/*	Jnknown ONSE IN 2021. Las	st completed	
1-PERSON MAXIMUM	MONTHLY INCOM	ME:	2858		ļ			
2-PERSONS MAXIMUI	M MONTHLY INCO	OME:	3266					

	Last Comp	lete Update:	2/7/2022			AREA:	Chinatown	
ROJECT NAME: H	ARBOR VILL	AGE				PROJECT TYPE:	Family	
ADDRESS: 901	River St.					PHONE: 808-528	-2753	
CITY: Hor	nolulu	STATE: HI	ZIP:	96817		FAX: 566-091	4	
MANAGER: St	nirley Fludd			APPLY AD 901 River S			OUT-OF-STAT	
APPLY TO: Lo	cations LLC			Honolulu, H	H 96817		APPLICATION ACCEPTED:	
APPLY ATTN: Af	fordable Housing D	ept.					YES	
APPLY PHONE: 80	8-625-9573		F	AX: 521-2714	EMAIL:	locationsrentals.cor rentals.aspx	n/affordable-	
Unit Typ	e: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studi	0:							
One Bdrr	n: 60	1495		575	1	3		
Two Bdrr	n: 30	1990		750	2	5		
Three Bdrr	n:							
Four Bdrr	n:						YES	
% AMI: 1 Bdrm \$1, 3drm \$1,270; 2 Bdrr 0% AMI: 1 Bdrm \$1 0% AMI: 1 Bdrm \$1	n \$1355; 410; 2 Bdrm \$1710	. ,	Water + Sewer			MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): AIT LIST (Months):	
BE CRITERIA: ead of household mu	ist be 18 years or o	lder				TO REMAIN ON W CALL EVERY		
	·		WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	: F	PETS OK: NO	
			Parking included				P	
	ASSET LIMITS:	NONE						
AN OWN RESIDEN	TIAL PROPERTY:	NO			GENERAL			
SET LIMIT INFO:			LEASE:		.	20 UPDATE - Info from website		
			1 year			PONSE in 2021. Las d - prior to 2020.	st update	
COME CRITERIA:								
1 2 % \$49,020 \$55,980 % \$65,360 \$74,640 20%\$98,040 \$111,96 51,200 (5 persons)	\$84,000 \$93,280 \$	\$100,800	FURNISHED: Partly furnished appliances only	major				
ERSON MAXIMUM	MONTHLY INCOM	IE:	8170		J			
PERSONS MAXIMUN	M MONTHLY INCO	ME:	9330					

	Last Com	olete Update:	1/21/2022			AREA:	Kalihi
OJECT NAME:	HAUIKI HOME	<mark>S (HPHA-</mark> I	hon) - NOT /	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	1564-1673 Meyers St.					PHONE: 808-832	2-3336
CITY:	Honolulu	STATE: HI	ZIP:	96819		FAX: 832-338	35
MANAGER:	: Julie Wiggett , Acting	g Manager		APPLY ADI 1002 North			OUT-OF-STAT
APPLY TO:	: HPHA NOT ACCEPTING A	PPLICATIONS		Honolulu, H NOT ACCE	I 96817 PTING APPLIC	CATIONS	APPLICATIO ACCEPTED
APPLY ATTN:	: Oahu applications of NOT ACCEPTING A	fice					NO
APPLY PHONE:				FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:						
One B							VEO
Two B		0		786	2	6	YES
Four B		0		1110	4	10	YES
1.00.2		0	ļ	,	,	,	120
ree Bdrm - \$152 plicants who are ha.myhousing.co	e Bdrm - \$108; Two B ;; Four Bdrm - \$180. A on the waitlist are to g om to change or check e and password is nee	All HPHA go to: c their	Water and allow	ance for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 3 AIT LIST (Months): 6
ad of household	must be 18 years or		WAITLIS	T FOR PARKING:		CALL EVERY	-
er ******* CLOSED	8/2/2016*****		PARKING INFO	NO	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:	YES]		
	ENTIAL PROPERTY:	NO			GENERAL		
nes the applicabl	y: se on Oahu. Assets lin e income for admissio continued occupancy.		LEASE: 1 year		1.)The Eld Veterans v Families of was detern	DUSING PREFERE erly 2.) The Displac v/ service connecte f deceased veteran nined to be service erans 6.) Families ru	ced 3.) Disabled d disabilities 4.) s whose death connected. 5.)
						al Shelters 7.) All of	
rsons \$42,800; 4 ust be <50% area	n \$33,300; 2 persons \$ 4 person \$47,550. Fan a AMI unless displaced , then <80% median is	nily income d by	FURNISHED: Partly furnished appliances only	major	Funding: S	State Pub Hsing 100 ons must be 3 yrs	
ERSON MAXIMI	UM MONTHLY INCOM	٨E:	3450		Į.		
ERSONS MAXIN	MUM MONTHLY INCC	ME:	4895				

	Last Comp	lete Update:	10/20/2021			AREA:	Moiliili
ROJECT NAME: HA	JSTEN GAI	RDENS				PROJECT TYPE:	Elderly
ADDRESS: 808 H	lausten St.					PHONE: 808-94	7-3423
CITY: Hono	lulu	STATE: HI	ZIP:	96826		FAX: 955-610	05
MANAGER: Gera Indiç	aldine D. Bareng, jo Real Estate Se		ager	APPLY AD 808 Hauste Honolulu H	en St.		OUT-OF-STAT
APPLY TO: Man	ager's Office				1 90020		ACCEPTED:
APPLY ATTN: Busi	ness Manager						YES
APPLY PHONE: 808-	947-3423			FAX: 955-6105	EMAIL:	manager@hausten www.indigorealesta	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:		0		550	1	2	YES
Two Bdrm:							
Three Bdrm:							ļ
Four Bdrm:				J			NO
All rents are 30% of inco applicant must be kept o AGE CRITERIA:		rmation for	\$47 allowance fr water, sewer an	or electricity and all d gas		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 24 AIT LIST (Months): 60 /AITLIST
Head of household must must be 62+. Caregiver			WAITLIS	T FOR PARKING:	_	CALL EVERY	
proof of caregiving.			PARKING INFO Parking include available		PET INFC	ALLOWED. Servic	PETS OK: YES
	ASSET LIMITS:				J		
AN OWN RESIDENTI. ASSET LIMIT INFO:	AL PROPERTY:	NO			GENERAL	INFO: "lanai" area in front	of units in central
			LEASE: 1 year		Funding: Onsite lat Applicatio	area on each floor Section 8 100% undry facilities	
NCOME CRITERIA:					envelope		
Maximum Annual Incom 50% Income Limits 1 person \$42,200 2 persons \$48,200	e:		FURNISHED: Partly furnished refrigerator, mic wood floors and	rowave. Vinyl		om manager s onice	
-PERSON MAXIMUM M	ONTHLY INCOM	E:	3517		Į		
-PERSONS MAXIMUM	MONTHLY INCO	ME:	4017				

OJECT NAME: HIBISCUS HILLS APAR	TMENTS		F	AREA: PROJECT TYPE:	Waipahu Family
ADDRESS: 94-1121 Ka Uka Blvd.				PHONE: 808-676	
				FAX: 808-676	
CITY: Waipahu STATE: HI	ZIP:	96797		1000 010	
MANAGER: Tashan Pacheco, Resident Manage	r	APPLY ADDR	ESS:		OUT-OF-STA
APPLY TO:					APPLICATIO
APPLY ATTN:					
APPLY PHONE: 808-676-3533	FAX:	676-3533		ww.EAHHousing.c -management@ea	
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:		MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:		¦			
Two Bdrm: 80 1650	2.5x rent	588	1		
Three Bdrm:		¦			
Four Bdrm:					YES
NT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INCLUDED		_	ΤΟΤΑ	L UNITS: 80
550 - \$1650	Water, sewer, trash			MINIMUM W	
				MAXIMUM W/ ESTIMATE (-
E CRITERIA:			т	O REMAIN ON W CALL EVERY (-
ad of Household 18+	WAITLIST FOR				
	PARKING INFO: \$25 1st stall, \$75 2nd	NO	PET INFO:	P	ETS OK: NO
ASSET LIMITS:		Stall			
N OWN RESIDENTIAL PROPERTY: YES			GENERAL IN	NFO:	
SET LIMIT INFO:	LEASE:		On-site man On-site laun	ager dry facilities	
	1 year		Accepts Sec	ction 8	
OME CRITERIA:	J			I to request applic manager's office	
x income for 50 units is 80% AMI income limits on 30 units	FURNISHED: Partly furnishedmajo appliances only; ceiling condition		www.EAHH	ousing.org	
	J				

		Last Comp	lete Update:	4/17/2024			AREA:	Kakaako
PROJECT NAME:	HON	UAKAHA					PROJECT TYPE:	Elderly
ADDRESS:	St.						PHONE: 808-272	-5937
CITY:	Honolul	u	STATE: HI	ZIP:	96813		FAX: 781-295	-3427
	p		μ	ļ				
		Taaga - Senior Development Ind	Property Mana	ger	APPLY AD Attn: Mana 545 Queen		u, HI 96813	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Afforda	able Housing D	ept.					YES
APPLY PHONE	: 808-40	04-9260		F	AX:	EMAIL: I	nelent@mdihawaii.	com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	141	1050	2x rent	350	1	2	YES
One	Bdrm:	9	1300	2x rent	488	1	2	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
AGE CRITERIA: All persons in hou	sehold n	nust be 62 years	s or older.	WAITLIST PARKING INFO: Car stall is \$100	FOR PARKING: YES			(Months): 0 AIT LIST (Months): 8 /AITLIST
1				motorcycle/scoot	ter stall is \$80	Service and	mais ok	
AN OWN RESI		SSET LIMITS:		mo; requests are wait list, stalls av		GENERAL	INFO:	
ASSET LIMIT INF			1	LEASE: 12 months		conditionin Transporta Catholic Cl Social serv	are allowed with M g. tion to shopping av narities Hawaii ices on site, part-ti narities Hawaii.	ailable through
	IA:					opened 19 Funding: L	95	
Must be below 60 ⁶ 1 person: \$55,020 2 persons: \$62,88)			FURNISHED: Major appliances tiles, walk in sho		handicap u 3 for vision	nits-1 one bed, 7 s	
I 1-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	4585		J		
2-PERSONS MAXI		ONTHLY INCO	ME:	5240				

	Last Comp	lete Update:	1/21/2022			AREA:	Kahaluu
ROJECT NAME: HOC	KIPA KAH	IALU'U (H	PHA-wind) -	NOT ACC	EPTIN	PROJECT TYPE:	Family
ADDRESS: 47-330	Ahuimanu Rd.					PHONE: 808-233	3-3766
CITY: Kaneol	ne	STATE: HI	ZIP:	96744		FAX: 233-376	69
		••••••		30744			
MANAGER: Rober	rta Kahele						
APPLY TO: HPHA NOT /	ACCEPTING AF	PPLICATIONS		Honolulu,	n School St. HI 96817 EPTING APPLIC	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN: Oahu	applications offi						NO
APPLY PHONE: 808-8			F	AX: 832-3461	EMAIL: h	phaishereforyou.c	org
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	8	0		549	1	4	YES
Two Bdrm:	32	0		697	2	6	YES
Three Bdrm:	16	0		891	3	8	YES
Four Bdrm:							
he waitlist are to go to: hp change or check their stat bassword is needed to act www.cl.OSED 8/2/2014 AGE CRITERIA: Head of household must b	tus. A username cess their accou	e and ınt.	WAITLIST PARKING INFO:	FOR PARKING	PET INFO:	ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY F mals ok, but only o	AIT LIST (Months): 60 VAITLIST (Months): PETS OK: YES
Ą	SSET LIMITS:	NONE			U U	ies listed below: nder 25 lbs) or cat	t
AN OWN RESIDENTIA	L PROPERTY:	NO	<u> </u>		GENERAL I	NFO: NCES: Domestic \	lialanaa viatima
Cannot own a house on C)ahu		LEASE: 1 year			n transitional shelt	,
					Funding: Fe	ed Low Inc Pub Hs	sing 100%
						ons must be 3 yrs hamphetamine or	
Acome Eligibility = 80% of Aaximum Annual Income Persons - \$60,900; 3 pe persons - \$76,100; 5 pe persons - \$88,300; 7 pe persons - \$100,450	: 1 person - \$53 rsons - \$68,500 rsons - \$82,200	, ,	FURNISHED: Partly furnished appliances only n			DNSE IN 2019 eted update 10/05	/2017
PERSON MAXIMUM MC	NTHLY INCOM	E:	4570		μ		
PERSONS MAXIMUM M	ONTHLY INCO	ME:	5220				

		Last Compl	ete Update:	11/2/2021			AREA:	Kalihi
PROJECT NAME:	ISLA	ND WEST					PROJECT TYPE:	Family
ADDRESS:	607 Nor	th King St.					PHONE: 808-847	-8465
CITY:	l Honoluli		STATE: HI	ZIP:	96817		FAX: 808-442	-0407
		u			00011			
MANAGER APPLY TO	Manag	er	ing Manager; I	inda West, Office	APPLY AD On-Site 9a	DRESS: am - 5pm M - I	-	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Linda V	West						NO
APPLY PHONE	: 808-84	7-8465		F	AX:	EMAIL:	Linda@HSIservices	s.net
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	400	750	1400	144	1	2adlt,1kid	YES
One E	Bdrm:	3	1565	2750	300	1	3adlt,1kid	
Two E	Bdrm:	1	1800	3050	400	2	4adlt,1kid	
Three E	Bdrm:							
Four E	Bdrm:							NO
RENT INFO: REI Building A - rent is Building B - rent is [169 sq. ft] Min Income requir Plus \$100 for extra timely meaned to r	\$700 - N \$750 - N ement wa a person.	Min income = \$1 Min income = \$1 aived if have rep . Respond to ma	400 600 payee;	UTILITIES INCLU Electricity and wa			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 1
AGE CRITERIA:							TO REMAIN ON W	
Head of household time of application		e 18 years or ol	der at the	WAITLIST	FOR PARKING:		CALL EVERY	
				PARKING INFO:	YES	PET INFO:	F	PETS OK: NO
1				\$35/month (first c served basis)	come - first			
		SSET LIMITS:						
AN OWN RESID		PROPERTY	NO	LEASE:			bed access is from p	
				LEASE: Month-to-month; Section 8 vouche		in own refr	all rooms with no k ⁱⁱ igerator and hot pla re unfurnished.	
INCOME CRITERI	A:							
No maximum annu	ual incom	ne.		FURNISHED: No carpet. Not fu	ırnished.			
ļ				<u> </u>		ļ		

		Last Comp	olete Update:	1/4/2022			AREA	Waipahu	
PROJECT NAME:	JACK	HALL					PROJECT TYPE		
ADDRESS:	94-827 K	uhaulua St.					PHONE:	,	
CITY:	Waipahu		STATE: HI	ZIP:	96797		FAX:		
MANAGER	R: Jesse Jo	ohnasen			APPLY AD	DRESS:		OUT-OF-STATE	
APPLY TO	D: https://w	ww.jackhallw	/aipahu.com/					APPLICATION ACCEPTED:	
	۷:							YES	
	<u>=:</u> 808-468	-5102			FAX: 949-7211		https://www.jackha hello@indigoreale		
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Studio: Bdrm:	104	0	NO	559			YES	
	Bdrm:	40	0	NO	793			YES	
Three	Bdrm:								
Four	Bdrm:							NO	
RENT INFO: RE 30% to a max of \$ (minus \$103 util. a for two bedrooms Maximum amount	\$877 for or allowance) (minus \$2	ne bedroom 30% to a ma 50 util. allowa	ax of \$1022 ance)	bedrm; \$250 f	llowance \$103 for 1	nge	MINIMUM V ESTIMATE MAXIMUM V	E (Months): 12	
Į	lo ure oubj			Į.				(Months): 24	
AGE CRITERIA: Head of household	d must be	18 years or o	older	\\/\/\TI	IST FOR PARKING:		TO REMAIN ON CALL EVERY		
				PARKING INF		PET INFO	:	PETS OK: NO	
				Parking includ	led				
AN OWN RESI		SET LIMITS:				GENERAL			
ASSET LIMIT INF	:O:			LEASE:		Section 8	Project Based Sub	osidy	
Income from asse income limit.	ets cannot	make tenant	go over	1 year; then m	onth-to-month	**Applicar	ble 1 bdrm units. hts on waitlist MUS as change in phon		
INCOME CRITER max income: 1 be		9,200; 2 bedr	oom \$50,880	FURNISHED: Partly furnishe appliances on					
I 1-PERSON MAXIM	IUM MON	THLY INCON	1E:	4475		ļ			
2-PERSONS MAXI		NTHLY INCC	ME:	5113					

	Last Comp	lete Update:	10/6/2023			AREA:	Chinatown	
OJECT NAME:	KAAHUMANU	HOMES (H	<mark>IPHA-hon) -</mark>	NOT ACCE	EPTIN	PROJECT TYPE:	Family	
ADDRESS:	Alokele & Kaiwiula St.,	Waiakamilo Rd	. & McNeill St.			PHONE: 808-832-3153		
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 832-31	88	
,		, <u> </u>	,					
MANAGER:	Cynthia Yoshida - Ma	inager			DRESS:		OUT-OF-STAT	
APPLY TO:	HPHA NOT ACCEPTING AF	PPLICATIONS		Honolulu, ł		CATIONS	APPLICATION ACCEPTED:	
APPLY ATTN:	Oahu applications off						NO	
APPLY PHONE:			F	AX: 832-3461	EMAIL: I	hphaishereforyou.c	org	
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER	
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:	
	udio:							
One B		0		714	2	6	YES	
Three B		0		888	3	8	YES	
Four B	drm:							
GE CRITERIA:	eir status. A usernam d to access their accou /2/2016****** must be 18 years or o	unt.	WAITLIST PARKING INFO:	FOR PARKING	PET INFO:		VAIT LIST (Months): 60 VAITLIST (Months): 9 PETS OK: 9 YES	
	ASSET LIMITS:	NONE			the catego	imals ok, but only ries listed below: nder 25 lbs) or cat		
AN OWN RESID	ENTIAL PROPERTY:				GENERAL			
SSET LIMIT INFC annot own a hous):	,	LEASE: 1 year		homeless i displaced.	NCES: Domestic V in transitional shelt ed Low Inc Pub He	ers; involuntary	
						ons must be 3 yrs thamphetamine or		
persons - \$60,900 persons - \$76,100	ncome: 1 person - \$53 0; 3 persons - \$68,500 0; 5 persons - \$82,200 0; 7 persons - \$94,350	, , ,	FURNISHED: Partly furnished appliances only	major		ONSE IN 2023		
PERSON MAXIMU	JM MONTHLY INCOM	IE:	4570		ļ			
PERSONS MAXIN	IUM MONTHLY INCO	ME:	5220					

	Last Compl	lete Update:	5/28/2024			AREA:	Honolulu	
OJECT NAME: KAH	<mark>IAUIKI VILI</mark>	LAGE				PROJECT TYPE:	Family	
ADDRESS: 2325 N	I. Nimitz Hwy.					PHONE: 808-778	3-2464	
CITY: Honolu	ılu		ZIP:	96819		FAX:		
MANAGER: Institu	ute for Human Se	ervices		APPLY ADD	RESS:		OUT-OF-	
APPLY TO: Fax R	Referrals to 425-5	5168 attention t	o Family Program				APPLIC ACCEF	
APPLY ATTN:								
APPLY PHONE:			F	AX: 808-425-5168		KVApplications@ih	ishawaii.org	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIV	
Studio:								
One Bdrm:	60	775		324				
Two Bdrm:	80	975		540				
Three Bdrm:								
Four Bdrm:								
NT INFO: RENT IS 3 int is deducted automat hats choosing. Regular itilist are not required. A anager will be contacted	tically through the updates to remain Applicant or the o	e bank of ain on the case	UTILITIES INCLU Water, electricity	JDED: , internet, and cable	e	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	.0
E CRITERIA:						TO REMAIN ON W	VAITLIST	
puna (62+ yrs) milies with custodial mi	inor children		WAITLIST	FOR PARKING:		CALL EVERY	(Months):	
			PARKING INFO: 1 parking per hou	usehold	PET INFO:	F F	PETS OK: N	2
AN OWN RESIDENTIA	ASSET LIMITS:				GENERAL	INFO:		
SET LIMIT INFO:			LEASE:			ving in Homeless E		
			6 month		will have p living in su of being h There mus	itional Shelter for h priority for housing. ubstandard housing omeless may also a st be minimum 1 ad	Families who and are at a apply. lult working (r	o are risk
					All adults	table jobs are acce are subject to a Crii	minal Backgro	
% AMI of people in household: 2 3 4 ,400 56,700 62,950 6	5 6	7 78,100	FURNISHED:		check, inc	luding Sexual Offer	nder Data Bas	e
2 3 4 0,400 56,700 62,950 6								

	Last Comp	lete Update:	10/5/2023			AREA:	Kahuku
ROJECT NAME: KAH	IUKU ELDI	ERLY - HA	UOLI HALE			PROJECT TYPE:	Elderly
ADDRESS: 56-154	4 Puuluana Pl.					PHONE: 808-293	3-1416
CITY: Kahuk	xu	STATE: HI	ZIP:	96731		FAX: 293-141	16
J			J.				
MANAGER: Bonn	ie Cambra						
APPLY TO: EAH	Housing, Inc.			56-154 Pur Unit 100 Kahuku, H	awaii 96731		OUT-OF-STATI APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 808-2	293-1416		F	AX:	EMAIL:	eahhousing.org ks-management@e	eahhousing.org
Line Trans			Minimum		MINIMUM	MAXIMUM	
Unit Type:	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:				570			YES
Two Bdrm:	64	0		570		3	
Three Bdrm:							
Four Bdrm:							YES
, ,		1		,	,	,	,
RENT INFO: RENT IS (UTILITIES INCLU			ΤΟΤΑ	L UNITS: 64
Units come with patio and must submit changes to t	their contact info	rmation in	Water, sewer and	l trash		MINIMUM W ESTIMATE	
writing and respond in a t communication from mar						MAXIMUM W	
						ESTIMATE	
AGE CRITERIA: All members of the house	abold must be 62	Voors or				TO REMAIN ON W CALL EVERY	
older at the time of applic		years or		FOR PARKING			PETS OK: YES
			PARKING INFO: Parking included	NO	PET INFO	s under 25 lbs. only	ETS OK. YES
	ASSET LIMITS:	NONE					
AN OWN RESIDENTIA	AL PROPERTY:	NO			GENERAL	. INFO:	
ASSET LIMIT INFO:			LEASE:			spouse dies, undera unit if can afford the	
			1 year; then mon	th-to-month	Section 8, Built 2013 coordinate	/HUD; 9% LIHTC 3; on-site manager, i or, laundry room.	resource
NCOME CRITERIA:			ļ		Catholic C	ation to Shopping a Charities Hawaii	vailable through
Maximum Annual Income	e: 50% AMI or les	SS	FURNISHED:		Applicatio Complete	online or	
person \$45,750 person \$52,250 person \$58,800			Appliances; ceilir water heaters, el microwave, garba granite counterto coverings.	ectric range, age disposal,		agement to mail it om manager's office by email	2
PERSON MAXIMUM M	ONTHLY INCOM	IE:	3813		ţ		
-PERSONS MAXIMUM N	ONTHLY INCO	ME:	4354				

		Last Compl	lete Update:	10/6/2023			AREA:	McCully
OJECT NAME:	KALA	KAUA HO	OMES (HP	HA-hon) - I	NOT ACCEPT		PROJECT TYPE:	Family
ADDRESS:	1545 Kala	akaua Ave.					PHONE: 808-973	-0193
CITY:	Honolulu		STATE: HI	ZIP:	96826		FAX: 973-019)7
MANAGER	R: Ioane Al	h Sam			APPLY ADD	RESS:		
APPLY TO		CEPTING AP	PLICATIONS		1002 North S Honolulu, HI NOT ACCEF		ATIONS	OUT-OF-STAT APPLICATIO ACCEPTED
		oplications office	ce PLICATIONS					NO
APPLY PHONE	: 808-832	-5961			FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio: Bdrm:	127	0		559	1	4	YES
Two	Bdrm:	58	0		711	2	6	YES
Three	Bdrm:	36	0		901	3	8	
Four	Bdrm:							
hange or check t assword is neede second of househole ead of househole	ed to acces	ss their accou	nt.	WAITLIS PARKING INFC	ST FOR PARKING:	PET INFO:	ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY F mals ok, but only o	AIT LIST (Months): 60 (AITLIST (Months): 7 PETS OK: 7
	AS	SET LIMITS:	NONE			the categori	es listed below: der 25 lbs) or cat	
AN OWN RESI				ļ		GENERAL I	NFO:	
SSET LIMIT INF annot own a hou		าน		LEASE: 1 year		homeless ir displaced.	NCES: Domestic V n transitional shelte ed Low Inc Pub He	ers; involuntary
ICOME CRITER	IA:						ons must be 3 yrs a namphetamine or s	
come Eligibility = laximum Annual persons - \$60,90 persons - \$76,10 persons - \$88,30 persons - \$100,4	Income: 1 00; 3 perso 00; 5 perso 00; 7 perso	person - \$53, ons - \$68,500; ons - \$82,200;		FURNISHED: Partly furnished appliances only			NSE IN 2023	
PERSON MAXIN	IUM MON	THLY INCOM	E:	4570		J		
PERSONS MAXI			ME:	5220				

	Last C	omplete Update:	7/18/2023			AREA:	Ala Moana
PROJECT NAME:	KALAKAUA					PROJECT TYPE:	Elderly
ADDRESS:	1628 Kalakaua Av	ve.				PHONE: 808-946	-5936
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX: 949-552	5
MANAGER	: Kainoa Kuamoo,	Resident Manager		APPLY AD P.O. Box 22	2420		OUT-OF-STATE
APPLY TO	: Locations			Honolulu, H	1 96823		APPLICATION ACCEPTED:
APPLY ATTN	: Property Manage	ment Division					YES
APPLY PHONE	: 808-738-3100			FAX: 735-1978		http://www.locations ble-rentals.aspx	srentais.com/afforda
	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm: 80	1065	2xrent	430	1	2	YES
	Bdrm:						
Three I Four I							YES
8 units at \$695; 72 Section 8 certificat gross income requ	te holders need not	meet the min	UTILITIES INC Electric, water,	LUDED:		MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:			Į			ESTIMATE TO REMAIN ON W	· · · ·
All residents must	be 62 or olderat the	e time of		ST FOR PARKING:		CALL EVERY	
application.			PARKING INF		PET INFO	: F	ETS OK: NO
	ASSET LIMI	TS: NONE	¢ lo,monai]		
	DENTIAL PROPER	TY: YES			GENERAL	. INFO:	
ASSET LIMIT INF	0:		LEASE:		Step-in sh Air-Condit	nower only; no bathtu tioned	ıb.
			1 year; then m	onth-to-month	Has CSS opened 20	case manager 2 day 002	/s/wk
	IA.		ļ		Funding: I	LIHTC, RHTF, Secti	on 8
Maximum income 30% of AMI: 1 per			FURNISHED: Partly furnishe appliances onl		Pick up fro	n: I from website om manager's office gement to mail it	
-PERSON MAXIM	IUM MONTHLY INC	COME:	3821		Į		
-PERSONS MAXI	MUM MONTHLY IN	NCOME:	4367				

-	· [_	10/0/2023				2	
	PENS) · ·	
i Kipapa Dr.							
i	STATE: HI	ZIP:	96789		1 1023-12		
her Weddle				DRESS:			
			On-Sile			OUT-OF-STAT APPLICATION ACCEPTED:	
ni Gardens						YES	
623-9811		F	AX: 623-7212	EMAIL:	website: www.eal kg-management@		
Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
96	1226	VES	75.0		5	YES	
31	1374	YES	900	3	7	YES	
						YES	
30% OF INCOME	: NO				тот	AL UNITS: 117	
of income ces not qualify	<u> </u>	Gas, electricity and water, trash and sewer			MINIMUM WAIT LIST ESTIMATE (Months):		
Accepting Appli	cations					E (Months): 30	
be 18 years or o	lder at the				TO REMAIN ON CALL EVER		
		PARKING INFO:		-	O: PETS OK: NO		
		Parking included					
				J GENERAL	. INFO:		
		LEASE:		Funding:	Section 8 and LIH	ГС	
		1 year		NO RESF	PONSE IN 2023		
		1					
		FURNISHED:	major	-			
ersons - \$65,280; 4 persons - \$72,480; 5 persons - 78,300; 6 persons - \$84,120; 7 persons - \$89,880; umbers may vary due to different criteria and lowances			Partly furnishedmajor appliances only. No carpet				
	ANI GARC ANI GARC 1 Kipapa Dr. 1 Kipapa Dr.	i STATE: HI her Weddle hi Gardens 523-9811 Number of UNITS: RENT: 86 1236 31 1374 30% OF INCOME: NO of income oes not qualify Accepting Applications to remain on the weithict be 18 years or older at the ASSET LIMITS: NONE AL PROPERTY: YES	ANI GARDENS 1 Kipapa Dr. ii STATE: H ZIP: ii STATE: H ZIP: her Weddle her Weddle Minimum ii Gardens S23-9811 F S23-9811 RENT: Minimum of UNITS: RENT: Minimum 86 1236 YES 31 1374 YES 30% OF INCOME: NO UTILITIES INCLU Gas, electricity a sewer Sewer accepting Applications Example on the weildigt be 18 years or older at the WAITLIS: AL PROPERTY: YES LEASE: 1 year ersons - \$72,480; 5 persons - ,120; 7 persons - \$89,880; FURNISHED: Partly furnished- applications - ,120; 7 persons - \$89,880; Furnished- applications - ,120; 7 persons - \$89,880;	ANI GARDENS 1 Kipapa Dr. ii STATE: HI ZIP: 96789 her Weddle APPLY AD On-Site ni Gardens S23-9811 FAX: 623-7212 Image: Sign of UNITS: Si	ANI GARDENS 1 Kipapa Dr. ii STATE: HI ZIP: 96789 her Weddle APPLY ADDRESS: On-Site ni Gardens EMAIL: 223-9811 FAX: 623-7212 Number of UNITS: RENT: Minimum INCOME Required: SQ FT: 86 1236 YES 750 31 1374 YES 900 30% OF INCOME: NO UTILITIES INCLUDED: of income oes not qualify Gas, electricity and water, trash and sewer PARKING: PARKING INFO: Accepting Applications Lic remais as the weildet WAITLIST FOR PARKING: PARKING INFO: PET INFO ASSET LIMITS: NONE LEASE: Funding: i 1 year ersons - \$58,020, 3 sons - \$72,480; 5 persons - 120; 7 persons - \$89,880; FURNISHED: ersons - \$58,020, 3 sons - \$72,480; 5 persons - 120; 7 persons - \$89,880; FURNISHED:	AREA AREA PROJECT TYPE PROJECT TYPE PROJECT TYPE PHONE: 808-6 FAX: 623-721 PHONE: 808-6 FAX: 623-721 PHONE: 808-6 FAX: 623-721 PARLI: website: www.ca Kg-management@ People: Peopl	

		Last Compl	lete Update:	10/6/2023			AREA:	Chinatown	
ROJECT NAME:	KAL/	ANIHUIA (HPHA-hon	<mark>) - NOT AC</mark>	CEPTING A	PPLI	PROJECT TYPE:	Elderly	
ADDRESS:	1220 Aa	ala St.					PHONE: 808-586	-9724	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 586-972	8	
MANAGER	t: Sol Se	ntous			APPLY AD 1002 North	School St.		OUT-OF-STAT	
APPLY TO					Honolulu, H NOT ACCE	II 96817 PTING APPLIC	ATIONS	APPLICATIO	
	I: Oahu a	applications office	се					NO	
APPLY PHONE	-				FAX: 832-3461	EMAIL: h	phaishereforyou.or	9	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	60	0		420	1	2	YES	
One	Bdrm:	90	0		492	1	4	YES	
Two	Bdrm:							YES	
Three	Bdrm:	1							
Four	Bdrm:								
e waitlist are to g nange or check t assword is neede <u>SE CRITERIA:</u> ead of household der, or disabled	heir statu ed to acc	us. A username cess their accou	e and int.	WAITLIS	T FOR PARKING:		ESTIMATE (MAXIMUM WA ESTIMATE (TO REMAIN ON W CALL EVERY (AIT LIST (Months): 60	
				PARKING INFO		PET INFO:		ETS OK: YES	
	A	SSET LIMITS:	NONE	Included		Smail pets	under 25 lbs. only		
AN OWN RESI		PROPERTY:	NO			GENERAL I	NFO:		
SSET LIMIT INFO:				1 year victii 1 feld			PREFERENCES:(A) domestic violence victims; homeless in transitional shelter; invol. Displaced. (B) substandard hsing; rent >50% of income. (C) others = indefinite wait. If elder dies, under age 62 spouse may rent unit. Funding: Fed Low Inc Pub Hsing 100%		
COME CRITER						Income Elig	gibility=80% of AMI ons must be 3 yrs a	0	
come Eligibility = faximum Annual persons - \$60,90 persons - \$76,10 persons - \$88,30 persons - \$100,4	Income: 00; 3 per 00; 5 per 00; 7 per	1 person - \$53, sons - \$68,500; sons - \$82,200;		FURNISHED: Partly furnishedmajor			hamphetamine or s	sex offender	
PERSON MAXIN	IUM MOI	NTHLY INCOM	E:	4570		ļ.			
PERSONS MAXI		ONTHLY INCOM	ME:	5220					

	Last Comp	lete Update:	10/6/2023			AREA:	Kalihi	
OJECT NAME: KAL	IHI VALLE	Y HOMES	(HPHA-hon) - NOT AC	CEPT	PROJECT TYPE:	Family	
ADDRESS: 2250 K	alena Dr.					PHONE: 808-83	2-3336	
CITY: Honolu	lu	STATE: HI	ZIP:	96819		FAX: 832-33	85	
	iu ii	••••••		50015				
MANAGER: Julie \	Niggett							
APPLY TO: HPHA NOT /	ACCEPTING AF	PPLICATIONS		Honolulu,	h School St. HI 96817 EPTING APPLIC	APPLICA		
APPLY ATTN: Oahu	applications off	ICATIONS					NO	
APPLY PHONE: 808-8			F	AX: 832-3461	EMAIL: h	phaishereforyou.c	org	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	52	0		494	1	4	YES	
Two Bdrm:	60	0		674	2	6	YES	
Three Bdrm:	123	0		834	3	8	YES	
Four Bdrm:	112	0		1115	4	10	YES	
plicants who are on the waitlist are to go to: ha.myhousing.com to change or check their itus. A username and password is needed to cess their account. E CRITERIA: ad of household must be 18 years or older			WAITLIST FOR PARKING: PARKING INFO: NO PET IN			ESTIMATE (Months): 3 MAXIMUM WAIT LIST ESTIMATE (Months): 6 TO REMAIN ON WAITLIST CALL EVERY (Months): 5 ET INFO: 9ETS OK: YES		
А	SSET LIMITS:	NONE	one space per ur	lit	the categori	es listed below: der 25 lbs) or_ca	one from each of t	
AN OWN RESIDENTIA	L PROPERTY:	NO				NERAL INFO:		
SET LIMIT INFO: Innot own a house on O	Dahu		LEASE:		homeless ir	PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary		
			1 year		displaced. Funding: Fe	ed Low Inc Pub H	sing 100%	
COME CRITERIA:			,			ons must be 3 yrs namphetamine or		
Dome OrthEnd. Dome Eligibility = 80% of AMI eximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; persons - \$100,450			FURNISHED: Partly furnished appliances only,		NO RESPO	ONSE IN 2023		
ERSON MAXIMUM MO	NTHLY INCOM	E:	4570		h			
ERSONS MAXIMUM M	ONTHLY INCO	ME:	5220					

	Last Comp	lete Update:	10/6/2023			AREA:	Hawaii Kai	
OJECT NAME: KAL	<mark>UANUI SE</mark>	NIOR AP	ARTMENTS			PROJECT TYPE:	Elderly	
ADDRESS: 6950 H	Hawaii Kai Dr.					PHONE:		
	ulu	STATE: HI	ZIP:	96825		FAX:		
MANAGER: Mike	Klein, Complian	ce Manager		APPLY AD 394-6688	DRESS:		OUT-OF-STA	
APPLY TO: call fo	or viewing and ap	oplication					APPLICATIC ACCEPTE	
APPLY ATTN:							YES	
APPLY PHONE: 808-3	394-6688		F	AX:	EMAIL:	IAIL: halealiigroup@yahoo.com		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	10	1228		525				
Two Bdrm:	21	1473		600				
Three Bdrm:								
Four Bdrm:							NO	
wer rent units for peopl 1bdrm 3 2bdrm her rent units for peop 1bdrm 18 2bdrm ct 8 accepted			All utilities, except AC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1 AIT LIST	
SE CRITERIA:						TO REMAIN ON W	-	
ne member must be 62	+; spouse can be	e 18+		FOR PARKING		CALL EVERY		
			PARKING INFO: Parking \$40 mon		PET INFO	: F	PETS OK: NO	
,	ASSET LIMITS:	NONE						
AN OWN RESIDENTIA	L PROPERTY:	YES			GENERAL	-		
SET LIMIT INFO:			LEASE: 1 year		and ceilin ventilation have tub, Communi	1/15/2003 all units h g fans in bdrms and h, lever handles on d 2bdrm have shower ty Lounge with TV, a Tay: Credit 100%	living room, cross loors. 1bdrm units with low lip.	
COME CRITERIA:					Funding:	Tax Credit 100% RHTF		
% of AMI: 1 person \$21,650; 2 persons \$24,750 % of AMI: 1 person \$36,050; 2 persons \$41,200			FURNISHED: Partly furnished appliances only,			ONLY PARTIAL RESPONSE IN 2023 Last completed update 10/20/17		
ERSON MAXIMUM MC	ONTHLY INCOM	E:	3004]			
ERSONS MAXIMUM N	IONTHLY INCO	ME:	3433					

		Last Comp	lete Update:	5/28/2024			AREA:	Kakaako	
ROJECT NAME:	KAM	AKEE VIS	ТА				PROJECT TYPE:	Family	
ADDRESS:	1065 Ka	awaiahao St.					PHONE: 808-597	-1725	
CITY:	Honolul	lu	STATE: HI	ZIP:	96814		FAX: 808-597	1002	
MANAGER	: Toshi	Hines			APPLY ADI On-Site Apt			OUT-OF-STAT	
APPLY TO	: Hawai	i Affordable Pro	perties Inc.					APPLICATION ACCEPTED:	
APPLY ATTN	I: Kamal	kee Vista						YES	
APPLY PHONE	: 808-59	94-0121			FAX: 594-0123	EMAIL:	kkamakeevista@ha http://hawaiiaffordal		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
One E	Bdrm:	90	1886	3338	570	1		YES	
Two E	Bdrm:	136	2438	4115	720	2		YES	
Three E	Bdrm:								
Four E	Bdrm:					J		YES	
eposit = 1 month	l's rent			Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
GE CRITERIA:							TO REMAIN ON W		
ead of household	d must b	e 18 years or o	lder	WAITI	IST FOR PARKING:		CALL EVERY		
				PARKING INF	·	PET INFC	r: F	ETS OK: NO	
				\$40/month; \$7 stall	'5 each additional				
		SSET LIMITS:							
AN OWN RESIE		PROPERTY:	ITES			GENERAI	can be converted to	handicap units)	
annot own other	housing	unit in this cou	nty.	LEASE: 1 year		Caregive	Caregivers are allowed with MD letter.		
						Application Ask mana	on: agement to mail it		
ICOME CRITERI				ļ		Send req envelope	uest with self-addres	sed stamped	
o maximum annı	ual incor			FURNISHED:		Pick up fr	Pick up from manager's office Request by email or fax		
lin Income for ma		drm = \$4,350 drm = \$5,600		Partly furnishe appliances on			,		
PERSON MAXIM	IUM MO	NTHLY INCOM	E:	3700		ļ			
PERSONS MAXI		ONTHLY INCO	ME:	4463					

	Last Comp	lete Update:	10/6/2023			AREA	Waipahu	
OJECT NAME: KAN	IALU - HO	OLULU EI	DERLY - N	IOT ACCEP	TING	PROJECT TYPE:	Elderly	
ADDRESS: 94-941	Kauolu Pl.					PHONE: 808-67	5-0099	
CITY: Waipa	าน	STATE: HI	ZIP:	96797		FAX: 675-00	98	
MANAGER: Venus				APPLY AD On-Site Ap			OUT-OF-STA APPLICATIO	
APPLY TO: Hawa	ii Affordable Pro	perties Inc.					ACCEPTED	
APPLY ATTN: Venus	s R. Katano						NO	
APPLY PHONE: 808-6	75-0099		I	F AX: 675-0098		http://hawaiiafforda properties/	ble.com/residentia	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	171	170		443	1	1	YES	
One Bdrm:	50	195		599	2	2	YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:							YES	
95 or 30% of income, w ******Waitlist CLOSED E CRITERIA: ad of household must I e of application, spous	since 8/2/2016*	k*****	WAITLIS PARKING INFO	T FOR PARKING		ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	/AIT LIST (Months): 3	
			Parking included	t t				
AN OWN RESIDENTIA		YES YES			GENERAL	INFO:		
SSET LIMIT INFO: annot own property in same county. Asset mit: 1 person - \$38,600, persons - \$44,100			Month-to-month			Caregivers are allowed with MD letter. No preference for veterans any more opened 1993-Kamalu 1994-Ho'olulu Large garden Meeting/Dining room with kitchen Transportation to Shopping available through		
COME CRITERIA:			r.		Catholic C	harities Hawai'i nly in designated a	-	
uximum Annual Income person - \$34,300 persons - \$39,200	ximum Annual Income: erson - \$34,300			FURNISHED: unit) Partly furnishedmajor			areas (not inside	
ERSON MAXIMUM MC	NTHLY INCOM	E:	2858		1			
ERSONS MAXIMUM M	ONTHLY INCO	ME:	3267					

	Last Comp	lete Update:	10/6/2023			AREA:	Kalihi	
OJECT NAME:	KAMEHAMEH	A HOMES	(HPHA-hon)) - NOT ACO		PROJECT TYPE:	Family	
	1541 Haka Dr.					PHONE: 808-83	2-3153	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 832-31	88	
MANAGER:	: Cynthia Yoshida - Ma	nager		APPLY AD 1002 North	DRESS: School St.	OUT-OF-		
APPLY TO:	HPHA NOT ACCEPTING AF	PPLICATIONS		Honolulu, H NOT ACCE	HI 96817 EPTING APPLIC	APPLICA		
APPLY ATTN:	: Oahu applications off NOT ACCEPTING AF						NO	
APPLY PHONE:	808-832-5961		F	FAX: 832-3461	EMAIL: h	phaishereforyou.c	org	
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER	
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:	
	udio:						YES	
One E		0		540	1	4	YES	
Two B		0		800 980	2	6	YES	
Four B		0						
			ļ	J	ļ	1		
inimum Rent: \$0 for Federal Low Income projects I HPHA applicants who are on the waitlist are to go : hpha.myhousing.com to change or check their atus. A username and password is needed to ccess their account. GE CRITERIA: ead of household must be 18 years or older			WAITLIS PARKING INFO: Included	T FOR PARKING	PET INFO:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 36 /AIT LIST (Months): 60 VAITLIST (Months): PETS OK: YES	
	ASSET LIMITS:	NONE			the categor	ies listed below: nder 25 lbs) or ca		
AN OWN RESID	ENTIAL PROPERTY:				GENERAL			
SSET LIMIT INFO annot own a hous		,	LEASE: 1 year			PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary		
					Funding: F	ed Low Inc Pub H	sing 100%	
COME CRITERI	A:					ons must be 3 yrs hamphetamine or		
ome Eligibility = 80% of AMI aximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; persons - \$100,450			FURNISHED:			DNSE IN 2023		
PERSON MAXIM	UM MONTHLY INCOM	IE:	4570		h			
PERSONS MAXIN	MUM MONTHLY INCO	ME:	5220					

		Last Comp	ete Update:	10/6/2023			AREA:	Kaneohe	
ROJECT NAME:	KANE	E'OHE AP		<mark>FS (HPHA-</mark> v	wind) - NOT /	ACCE	PROJECT TYPE:	Family	
ADDRESS:	45-507 8	& 45-513 Pahia	Rd.				PHONE: 808-233	3-3766	
CITY:	Kaneoh	Э	STATE: HI	ZIP:	96744		FAX: 233-37	69	
	J		ļ	ļ					
MANAGER	: Robert	a Kahele			APPLY AD				
APPLY TO		CCEPTING AP	PLICATIONS		1002 North Honolulu, H NOT ACCE		OUT-OF APPLIC PLICATIONS ACCE		
	I: Oahu a	pplications offi						NO	
APPLY PHONE			FLICATIONS		FAX: 832-3461	EMAIL: h	nphaishereforyou.c	org	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
	Bdrm:	5	0		429	1	4	YES	
	Bdrm:	19	0		600	2	6	YES	
Three	Barm: Bdrm:								
	burni.			ļ	1	J	1		
All HPHA applicar to: hpha.myhousir status. A usernan access their accou AGE CRITERIA: Head of household	ng.com to ne and pa unt.	o change or che assword is need	ck their ded to	WAITLIST FOR PARKING: PARKING INFO:			ESTIMATE (Months): 3 MAXIMUM WAIT LIST ESTIMATE (Months): 6 TO REMAIN ON WAITLIST CALL EVERY (Months): 7 PET INFO: PETS OK: YES		
				Included			imals ok, but only ies listed below:	one from each of	
		SSET LIMITS:				one doa (ui	nder 25 lbs) or cat	<u>t</u>	
AN OWN RESII ASSET LIMIT INF		PROPERTY:	NO			GENERAL		/iolence victims:	
Cannot own a hou	SSET LIMIT INFO: cannot own a house on Oahu			1 year dis			PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary displaced. Funding: Fed Low Inc Pub Hsing 100%		
NCOME CRITER							ons must be 3 yrs hamphetamine or		
Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30	come Eligibility = 80% of AMI laximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; persons - \$100,450				FURNISHED: Partly furnishedmajor appliances only				
-PERSON MAXIN		NTHLY INCOM	E:	4570		J.			
-PERSONS MAXI	мим мс	ONTHLY INCO	ME:	5220					

Last Complete Update	e: 7/20/2023	AREA: Kaneohe			
PROJECT NAME: KANEOHE ELDERLY		PROJECT TYPE: Elderly			
ADDRESS: 45-457 Meli Pl.		PHONE: 808-235-4399			
CITY: Kaneohe STATE:	HI ZIP: 96744	FAX: 235-0033			
MANAGER: Community Manager being hired; Richard Char (rchar@cmiweb.net APPLY TO: Cambridge Management Inc Of	t) 808-859-6514 Leasing Office	ESS: OUT-OF-STATE APPLICATION ACCEPTED:			
Friday, 9:00am - 1:00pm APPLY ATTN:		YES			
APPLY PHONE: 808-235-4399	FAX: 235-0033	EMAIL: kaneohe@cmiweb.net https://www.kaneoheapartments.net/			
Unit Type: Number of UNITS: RENT:	INCOME	MINIMUM MAXIMUM Number of People People: Allowed:			
Studio: One Bdrm: 44		1 3 YES			
Two Bdrm:					
Three Bdrm:					
Four Bdrm:		NO			
AGE CRITERIA:	Water and \$52 mo. utility allowance taken off the rent.	MINIMUM WAIT LIST ESTIMATE (Months): 36 MAXIMUM WAIT LIST ESTIMATE (Months): 36 TO REMAIN ON WAITLIST			
Head of household must be 62 years or older, or disabled. Other family members, roommates, and	WAITLIST FOR PARKING:	CALL EVERY (Months):			
caregivers allowed at any age.		PET INFO: PETS OK: YES			
ASSET LIMITS: NONE		\$300 deposit; one dog/cat/caged animal only; 30 lbs max; breed/species restrictions.			
AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO:		GENERAL INFO:			
	LEASE:	Security enhanced complex; on-site management; community room, on-call Emergency Maintenance; on bus line; convenient to shopping; outdoor sitting area; landscaped garden.			
INCOME CRITERIA:		Funding: Low Income Housing Tax Credit 100% Section 8 100% Application:			
Maximum annual income: 1 person \$40,850 2 persons \$46,650, 3 persons \$52,500	FURNISHED: Partly furnishedmajor appliances only. Wood-style flooring. Ample closet and cabinet space; screen door.	Ask management to mail it Send request with self-addressed stamped envelope NOT RESPONSED TO UPDATE SINCE 2022			
I I-PERSON MAXIMUM MONTHLY INCOME:	3404	1			
2-PERSONS MAXIMUM MONTHLY INCOME:	3887				

	Last Com	plete Update:	10/6/2023			AREA	Lanakila	
PROJECT NAME:	KAPUNA I - N		PTING APPLI	CATIONS		PROJECT TYPE: Elderly PHONE: 808-845-2130		
ADDRESS:	1015 North School St							
CITY:	Honolulu	STATE: H	ZIP:	96817		FAX: 845-66	84	
	: Sherry Prevo			APPLY ADDRESS: 1015 North School St. Honolulu, HI 96817			OUT-OF-STATE APPLICATION	
	: Sage Apartment Cor	nmunities, Inc.		,			ACCEPTED: YES	
APPLY ATTN	:				EMAIL:	kapunaonesage.cc	om	
APPLY PHONE	: 808-845-2130		F	AX: 845-6684				
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm: 162	0		530			YES	
	Bdrm:			000				
Three I	Bdrm:							
Four	Bdrm:						NO	
minimum rent \$25 Annual update bas application. Must in a timely manner	sed on anniversary dat respond to mail from r	e of nanagement	UTILITIES INCLUDED: Electricity and water			TOTAL UNITS: 162 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST		
	lication, Head of house er, or 18+ w/ disability.		WAITLIST	FOR PARKING:		CALL EVERY		
must be 19+. Fan	nily members, roomma d with mgmt approval.		PARKING INFO: Parking included	YES	PET INFO:	ved reasonable ac	PETS OK: YES	
	ASSET LIMITS					uesting pet		
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INF	0:		LEASE:			office must be notified if applicant's gross monthly income goes up or down \$200 or more.		
			1 year, then mon	th-to-month.	Tax Credit Transporta Catholic C	tion to Shopping a harities Hawaiʻi up	vailable through on request	
INCOME CRITER	IA: income is 80% AMI: 1	person -	FURNISHED:		or mail in v	vith form sent to ap	pdate applications	
\$67,700; 2 person	s - \$77,350, 3 persons W INCOME (<30% OF	- \$87,000	Partly furnished appliances only	major	, INO RESP	ONSE IN 2023		
J 1-PERSON MAXIM	IUM MONTHLY INCO	ME:	5642		ļ			

	Last Comp	lete Update:	10/6/2023			AREA:	Waianae		
PROJECT NAME:	KAU'IOKALAN	I (HPHA-le	e) - CLOSE	D		PROJECT TYPE:	Family		
ADDRESS:	85-658 Farrington Hwy	•				PHONE: 808-697	-7171		
	Waianae	STATE: HI	ZIP:	00700		FAX: 697-717	4		
	walanae		2	96792					
MANAGER	: Lui Faleafine			APPLY AD	DRESS:		OUT-OF-STATE		
APPLY TO:	: HPHA			Honolulu, F			APPLICATION ACCEPTED:		
APPLY ATTN:	: Oahu applications offi	се					NO		
APPLY PHONE:	808-832-5960		F	AX: 832-3461	EMAIL:				
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
St One E	udio: Bdrm:								
Two B							YES		
Three B		0		987	3	8	YES		
			ļ	1	J	1	J		
projects PREFERE victims; homeless displaced. NOT ACCEPTING		nce involuntary	Water and allowa WAITLIST PARKING INFO: Parking one stall	FOR PARKING	PET INFC	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY p: F nimals ok, but only c	(Months): 36 AIT LIST (Months): 60 /AITLIST (Months): PETS OK: YES		
	ASSET LIMITS:				the categories one doa (ories listed below: under 25 lbs) or cat			
AN OWN RESID ASSET LIMIT INFO	ENTIAL PROPERTY:	NO	ļ		GENERAL	-	timely manner to		
	SSET LIMIT INFO: Cannot own a house on Oahu			1 year upc con			*Applicants must respond in a timely manner to any correspondence from HPHA. No waitlist updates needed, however, applicants must update any contact information/household composition info, and check waitlist status via hpha.myhousing.com (will need		
INCOME CRITERIA					Usernam	e/password to do so) Fed Low Inc Pub Hs).		
Maximum Annual I 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30	come Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; persons - \$100,450			-major no carpet	All convic	ago, unless it's sex offender			
-PERSON MAXIMI	UM MONTHLY INCOM	E:	4570		ţ				
PERSONS MAXIN	MUM MONTHLY INCO	ME:	5220						

	Last Comp	lete Update:	5/17/2023			AREA:	Kakaako	
ROJECT NAME: KAU	HALE KAI	KAAKO				PROJECT TYPE:	Family	
ADDRESS: 860 Ha	lekauwila St.					PHONE: 808-593	3-9035	
CITY: Honolu	lu	STATE: HI	ZIP:	96813		FAX: 591-02	50	
MANAGER: Laura	Kim		APPLY ADDRESS: On-Site Ste. #100				OUT-OF-STAT	
APPLY TO: Hawai	ii Affordable Pro	perties Inc.					APPLICATION ACCEPTED:	
APPLY ATTN: Kauha	ale Kakaako						YES	
APPLY PHONE: 808-5	93-9035		F	FAX: 591-0250	EMAIL:	kauhalekakaako.co http://hawaiiafforda	om ble.com/residential-	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	116	1832	4350	578	1	4	YES	
Two Bdrm:	152	2167	5600	728	2	5	YES	
Three Bdrm:								
Four Bdrm:				J]		YES	
Rent increases planned fo	172023.		Water, Sewer, G	anaye		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12	
GE CRITERIA:						TO REMAIN ON V		
Head of household must b ime of application.	be 18 years or o	lder at the	WAITLIS	T FOR PARKING:		CALL EVERY		
	SSET LIMITS:		PARKING INFO: 1st stall - \$62.83 \$94.24. Diamono manages lot. (No	d Parking	PET INFO: PETS OK: YES Pets permitted with a \$200 refundable deposit.			
AN OWN RESIDENTIA			\$157 mo.) No gu		GENERAI	L INFO:		
SSET LIMIT INFO:			LEASE:			GENERAL INFO: Amenities: Lanai, AC, renovated & landscaped recreational deck with a basketball/pickleball court, barbecue areas, playground, fitness center and convenience store. On-site Resident Manager/Mgmt Office, and Central Laundry Facility. Application: Ask mgmt to mail it. Pick		
			1 year		court, bar center an Manager/ Facility. A			
NCOME CRITERIA:	1 4 9 9 9 4 4					nanager's office. Or ordableproperties.cc		
Maximum Income cannot depends upon number of Maxiumum for 5-persons -	occupants and s	size of unit.	FURNISHED: Partly furnished- with hood, refrige kitchen sinks, bli fans, phone/cabl bolt lock.	erator, double inds, ceiling	*Along wi applicant well as re	*Along with completing regular waitlist updates applicants must keep all contact info current, a well as respond to communication from housing mgmt in a timely manner.*		
PERSON MAXIMUM MO	NTHLY INCOM	E:	7625					
-PERSONS MAXIMUM M	ONTHLY INCO	ME:	8708					

	Last Comp	lete Update:	10/6/2023			AREA:	Wahiawa	
OJECT NAME: KAU	HALE NA	NI (HPHA-o	cen) - NOT A		G APP	PROJECT TYPE:	Family	
ADDRESS: 310 No	orth Cane St.					PHONE: 808-622	2-6360	
CITY: Wahia	wa	STATE: HI	ZIP:	96786		FAX: 622-6362		
MANAGER: Jimar	y Quinones							
APPLY TO: HPHA	A ACCEPTING AF	PPLICATIONS		1002 North Honolulu, H NOT ACCE	ATIONS	OUT-OF-STA APPLICATIC ACCEPTEL		
APPLY ATTN: Oahu NOT	applications off				EMAIL: h	phaishereforyou.c	NO	
APPLY PHONE: 808-8	32-5961		F	AX: 832-3461				
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:							YES	
One Bdrm:	14	0		564	1	4	YES	
Three Bdrm:	16 20	0		958	2	6 8	YES	
Four Bdrm:				, 				
neless in transitional s placed. OSED FOR APPLICA ⁻ E CRITERIA: ad of household must l	TION SINCE 8/2	/2016				ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	/AIT LIST (Months):	
	,		WAITLIST PARKING INFO:		PET INFO:	F	PETS OK: YES	
AN OWN RESIDENTIA	ASSET LIMITS: L PROPERTY:		Parking included mu the jone			multiple animals ok, but only one from each of the categories listed below: one doa (under 25 lbs) or cat GENERAL INFO:		
SET LIMIT INFO:			LEASE:					
nnot own a house on Oahu					*Applicants must respond to any correspondence from HPHA, in a timely manner. No waitlist updates needed, howeve applicants must update any contact info/household composition info and check			
nnot own a nouse on C	Dahu		1 year		corresponde manner. No applicants r	ence from HPHA, waitlist updates r nust update any c	in a timely needed, however, contact	
COME CRITERIA:			1 year		corresponde manner. No applicants r info/househ waitlist statu need userna	ence from HPHA, waitlist updates r nust update any c old composition ir us via hpha.myho ame/password to	in a timely needed, however, contact nfo and check using.com (will do so).	
COME CRITERIA: ome Eligibility = 80% of aximum Annual Income persons - \$60,900; 3 pe persons - \$76,100; 5 pe persons - \$88,300; 7 pe	f AMI : 1 person - \$53 ersons - \$68,500 ersons - \$82,200	• • • •	-		corresponde manner. No applicants r info/househ waitlist statu need userna Funding: Fe All convictio crystal meth	ence from HPHA, waitlist updates r nust update any c old composition ir us via hpha.myhou	in a timely needed, however, contact nfo and check using.com (will do so). sing 100% ago, unless it's	
COME CRITERIA: ome Eligibility = 80% of aximum Annual Income bersons - \$60,900; 3 pe bersons - \$76,100; 5 pe bersons - \$76,100; 5 pe bersons - \$88,300; 7 pe bersons - \$100,450 ERSON MAXIMUM MC	f AMI : 1 person - \$53 Irsons - \$68,500 Irsons - \$82,200 Irsons - \$94,350		1 year FURNISHED: Partly furnished-		corresponde manner. No applicants r info/househ waitlist statu need userna Funding: Fe All convictio crystal meth	ence from HPHA, waitlist updates r nust update any c old composition ir us via hpha.myhou ame/password to ad Low Inc Pub Hs ons must be 3 yrs namphetamine or	in a timely needed, however, contact nfo and check using.com (will do so). sing 100% ago, unless it's	

	Last Compl	lete Update:	10/6/2023			AREA:	Waimanalo		
ROJECT NAME: KAU	HALE OʻH	ANA (HPH	HA-wind) - N	OT ACCEP	TING	PROJECT TYPE:	Family		
ADDRESS: 41-1260	0 Kalanianaole I	Hwy.				PHONE: 808-23	3-3766		
CITY: Waima	nalo	STATE: HI	ZIP:	96795		FAX: 233-376	69		
MANAGER: Rober	ta Kahele			APPLY AD	DRESS:				
APPLY TO: HPHA NOT A		PLICATIONS	1002 North School St. Honolulu, HI 96817 NOT ACCEPTING AP			APP			
APPLY ATTN: Oahu NOT A	applications offic						NO		
APPLY PHONE: 808-83	32-5961		F	AX: 832-3461	EMAIL:	: hphaishereforyou.c	rg		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
Studio:									
One Bdrm:									
Three Bdrm:	25	0		1003	3	8	YES		
Four Bdrm:									
Minimum Rent: \$0 for Fed PREFERENCES: Domest homeless in transitional sh displaced.	ic Violence victi nelters; involunta	ms; ary	Water and allowa and gas	nce for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36		
AGE CRITERIA:						TO REMAIN ON V	-		
Head of household must b	e 18 years or ol	der		FOR PARKING:		CALL EVERY	. [e		
			PARKING INFO:	NO	PET INFC): I Animals ok, but only (PETS OK: YES		
А	SSET LIMITS:	NONE			the categ	ories listed below: under 25 lbs) or cat			
AN OWN RESIDENTIAL		NO			GENERAI	L INFO:			
ASSET LIMIT INFO: Cannot own a house on O				LEASE: 1 year 1 year 1 year			*Applicants must respond to any correspondence from HPHA, in a timely manner. No waitlist updates needed, however, applicants must update any contact info/household composition info and check		
NCOME CRITERIA:					need use	atus via hpha.myho rname/password to Fed Low Inc Pub Hs	do so).		
Maximum Annual Income: 2 persons - \$60,900; 3 per 4 persons - \$76,100; 5 per	come Eligibility = 80% of AMI faximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350;			major no carpet	All convic crystal m	ethamphetamine or ONSE IN 2023	ago, unless it's		
-PERSON MAXIMUM MO	NTHLY INCOM	E:	4570		Į				
PERSONS MAXIMUM M	ONTHLY INCOM	ME:	5220						

		lete Update:	5/16/2023			AREA:	Wahiawa	
		JWAI APA	RTMENTS			PROJECT TYPE:	· ·	
ADDRESS: 730 W	'ilikina Dr.					PHONE: 808-888		
CITY: Wahiav	wa	STATE: HI	ZIP:	96786		FAX: 888-532	9	
MANAGER: Kristir	na Garza, Manag	ger		APPLY AD On-Site	DRESS:		OUT-OF-ST	
APPLY TO:							APPLICATIO ACCEPTE	
APPLY ATTN: Kawa	hi Maluwai Apar	tments					YES	
APPLY PHONE: 808-8	88-5287		F	AX: 888-5329	EMAIL:	kawahi@cmiweb.ne www.KawahiMaluwa		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio: One Bdrm:	79	0	NO			3	YES	
Two Bdrm:	39	0	NO		2	5	YES	
Three Bdrm:								
Four Bdrm:								
naged by Cambridge M wn as Wilikina Apartm E CRITERIA:	lents					ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY	AIT LIST (Months):	
ad of household must b e of application.	be 18 years or o	lder at the		FOR PARKING:			· · [
			PARKING INFO: Parking included Tenant must hav	, 149 stalls.		PET INFO: PETS OK: NC Only service animals with doctor letter		
A	SSET LIMITS:	YES	are assigned. Gu available.		J			
	L PROPERTY:	YES			-	GENERAL INFO:		
SET LIMIT INFO: operty is counted when determining income gibility. 401K - current interest rate (determined formula) counted toward income .			One-year then month-to-month an thereafter		applicants and respo mgnt in a Funding:	*Along with completing regular waitlist update applicants must keep all contact info current, and respond to communication from housing mgnt in a timely manner.* Funding: Section 8 100% + LIHTC 9 handicapped accessible units and also units		
OME CRITERIA:					at ground	level. 2 Elevators, C nd, secured key-card	community Roon	
aximum Monthly Income: 5 persons - \$6510.00		FURNISHED: Partly furnished v appliances & mic carpet.		maintena Laundry F Transport	nce, On-site manage Facilities. Newly ren ration to shopping av Charities Hawai'i. Cu	ement and novated (2012) ailable through		
			J		<u> </u>			
ERSON MAXIMUM MC	NTHLY INCOM	E:	4220					

Last Complete Update:	10/6/2023			AREA	Moiliili
ROJECT NAME: KEAUHOU SHELTER				PROJECT TYPE	Emergency/Transi
ADDRESS: 1020 Isenberg St.				PHONE: 808-53	7-8330
CITY: Honolulu STATE:	HI ZIP: 96826			FAX:	
MANAGER: Jordan Torres, Housing Navigator APPLY TO: Intake hours - Monday - Friday - 7		APPLY ADDRESS: Walk-in, on site 0am - 4:30pm			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:					
APPLY PHONE: 808-537-8330	F/	AX:		https://waikikihc.or shelter/	rg/locations/keauhou-
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 75					
Two Bdrm:					
Three Bdrm:					
Four Bdrm:		J	J	1	
RENT INFO: RENT IS 30% OF INCOME: 30% of income	UTILITIES INCLUI Yes	DED:	_	TOT MINIMUM V ESTIMATE	
				MAXIMUM V ESTIMATE	VAIT LIST (Months):
AGE CRITERIA:	-				
18 years or older, adults only, no family		FOR PARKING	:	CALL EVERY	
	PARKING INFO:		PET INFO:		PETS OK:
	No Fee		ADA only,	8 animals max for	project
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES	-		GENERAL		
ASSET LIMIT INFO:					hrooms, showers,
	LEASE: Program Fee		kitchen an	d laundry facilities	
			assistance	nclude housing pla e, job training, help s and mail service	obtaining
INCOME CRITERIA:	-				
	FURNISHED:		-		
	No				
	J		ļ		

	Last Comp	lete Update:	10/24/2023			AREA:	Moiliili
OJECT NAME:	KEAUHOU SH	ELTER				PROJECT TYPE:	Emergency/Trans
ADDRESS: 1	020 Isenberg Street					PHONE: 808-537	-8330
	Honolulu	STATE: HI	ZIP:	96826		FAX:	
	on-site, 7:30am - 4:30 pre-applicaton	pm; if space av	ailable, to complete	annointme	ailable, staff will nt to complete ac		OUT-OF-STAT APPLICATIO ACCEPTED
APPLY ATTN:					EMAIL: h	ttps://waikikihc.org	/locations-shelter/
APPLY PHONE:	808-537-8330		F	AX:			
Unit T	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bo	Idio:	0					
Two Be		0					
Three Bo		0		<u> </u>			
Four B		0					
1		Ū		,	,	,]
useless or at risk th shared bathroo d laundry spaces GE CRITERIA:	uples, age 18 and olde	ngement ed kitchen		FOR PARKING		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	(Months):
			PARKING INFO:		PET INFO:	F	ETS OK:
	ASSET LIMITS: ENTIAL PROPERTY:				GENERAL I		
SET LIMIT INFO	:		LEASE:		housing pla help obtaini services. Housing Fir	shelter for couples cement assistance ng ID, social secur st model is used, v enroll clients straig	e; job training; rity card, etc.; mai which allows
COME CRITERIA	.:		FURNISHED:			hem once they are	
ERSON MAXIMU	IM MONTHLY INCOM	E:	0		ļ		
ERSONS MAXIM	IUM MONTHLY INCO	ME:	0				

	Last Compl	lete Update:	10/6/2023			AREA:	Chinatown	
ROJECT NAME: KEK	AULIKE C		PROJECT TYPE:	Family				
ADDRESS: 1016 M	launakea St.					PHONE: 808-545	5-2993	
CITY: Honolu	lu	STATE: HI	ZIP:	96817		FAX: 545-365	54	
J		I	ļ					
MANAGER: Eric W		-		APPLY AD	DRESS:		OUT-OF-STATI APPLICATION	
APPLY TO: Kekau	like Courtyards	Corp.					ACCEPTED:	
APPLY ATTN:							NO	
APPLY PHONE: 808-5	45-2993		F	AX: 545-3654		http://www.mutual- housing.org/kekauli	ke-courtyards/	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	12	793	2x rent	300	1	2	YES	
One Bdrm:	63	995	2x rent	500	1	4	YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:							YES	
http://www.mutual-housing AGE CRITERIA: Head of household must b						ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	AIT LIST (Months): 12	
ime of application; spous	e/partner, roomn	nates,	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:	F	PETS OK: YES	
		(\$40/month	1.10		Small birds (2 max) and fish only.		
Ą	SSET LIMITS:	NONE			J			
	L PROPERTY:	NO	ļ		GENERAL			
SSET LIMIT INFO:			LEASE: 1 year; then mon	th-to-month	must keep			
NCOME CRITERIA:					courtyards	s, secure building.	,, _	
	45,750 for 1 person, \$52,250 for 2 persons, 58,800 for 3 persons, \$65,300 for 4 persons.			-major Carpet	http://www courtyards open).	mutual-housing.org / (only during times ONSE IN 2023		
PERSON MAXIMUM MO	NTHLY INCOM	E:	3813		ļ			
PERSONS MAXIMUM M	ONTHLY INCOM	ME:	4029					

Oahu Housing Guide

	UILANI CO	OURTS				PROJECT TYPE:	Family	
ADDRESS: 91-1083	3 Kekuilani Lp.					PHONE: 808-67	4-0405	
CITY: Kapolei		STATE: HI	ZIP:	96707		FAX: 674-04	26	
MANAGER: Nua V Site M	aovasa anager: Kristine	e Scott		APPLY AD	DRESS:		OUT-OF-STA	
APPLY TO: Hawai	i Affordable Pro	perties Inc.					APPLICATIO ACCEPTED	
APPLY ATTN: Kekuil	ani Courts LLC						YES	
APPLY PHONE: 808-67	74-0405		F	FAX: 674-0426	EMAIL:	kekuilanicourts@g http://hawaiiafforda		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:								
Two Bdrm:	80	2000	3600	790	1		YES	
Three Bdrm:								
Four Bdrm:							YES	
ome requirement. Ist have verifiable reside	ential history.					MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
E CRITERIA:			h.			TO REMAIN ON V	· · /	
ad of household must b	e 18 years or o	Iderat the	WAITUS	T FOR PARKING:		CALL EVERY		
ne of application.			PARKING INFO:		PET INFO	:	PETS OK: NO	
A	SSET LIMITS:	YES	1-Parking include stall - \$15/mo. C available during	Guest parking				
AN OWN RESIDENTIAL	PROPERTY:	NO			GENERAL INFO: Along with completing regular 6 mo. updates, applicants must keep all contact info current and respond to communication from housing mgmt.in a timely manner.*			
SET LIMIT INFO: operty is counted when o gibility.	determining inc	ome	LEASE: 1 year					
COME CRITERIA:						Project has resident manager, mgmt. office, central laundry facility, recreation hall, vending		
ICOME CRITERIA:			FURNISHED: Partly furnished- appliances; gas small patio with s	range; disposal,	wash area with acce	barbecue area, visi a, membership in K ss to the rec facility stops across street	apolei Association and swimming	
					Applicatio	n:		
ERSON MAXIMUM MO	NTHLY INCOM	E:	6100					
ERSONS MAXIMUM M	ONTHLY INCO	ME:	6967					

	Last Compl	ete Update:	10/6/2023			AREA:	Kapolei	
ROJECT NAME:	KEKUILANI GA	RDENS			I	PROJECT TYPE:	Family	
ADDRESS:	91-1045 Kekuilani Lp.					PHONE: 808-674	4-6647	
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 674-417	70	
	R: Mark Development, In D: Kekuilani Gardens	с.		APPLY AD 91-1045 Ke Hawaii 967	ekuilani Lp., Kapo	blei,	OUT-OF-STAT APPLICATION ACCEPTED:	
	N:						YES	
	E: 808-735-9099 ext 1			FAX: 674-4170		ttp://www.mdihaw ens	aii.com/kekuilanigar	
Uni	it Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Studio: Bdrm:							
Two	Bdrm: 55	0		790	2	5	YES	
	Bdrm: Bdrm:						YES	
Priority given to v AMI). Security Do Monthly Allowable Market Note Rate AGE CRITERIA:	e Rent \$925	0.30%	UTILITIES INCL Water	LUDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON V CALL EVERY	(Months): 60 /AIT LIST (Months): 72 /AITLIST	
			PARKING INFO): NO	PET INFO:	F	PETS OK: NO	
ASSET LIMIT INF	ASSET LIMITS: YES AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO:		Parking include	d	GENERAL II	Must have M.D. letter GENERAL INFO: *Waitlist updates not required; Applicants must		
roperty is counted when determining income ligibility. NCOME CRITERIA:			1 year		to communi a timely ma Funding: R	keep all contact info current, as well as respond to communication from housing management in a timely manner.* Funding: RHTF Mark Development Inc.		
			On- App					
	I Income (for Placement):		FURNISHED: Partly furnishedmajor appliances only pick t			Application: online mdihawaii.com ask management to mail it pick up from manager's office NO RESPONSE IN 2023		

Oahu Housing Guide

		Last Comp	lete Update:	8/15/2023			AREA:	Waianae	
PROJECT NAME:	KEOL		IALU				PROJECT TYPE:	Elderly	
ADDRESS:	85-259 F	Plantation Rd.					PHONE: 808-524	-2731	
CITY:	Waianae	e	STATE: HI	11 ZIP : 96792			FAX : 545-5214		
MANAGER	: Sunnie	Lee, COS. Ja	ay Okada, Off-S	ite Manager		tania St., Suite	C101	OUT-OF-STATE	
APPLY TO	: Urban I	Real Estate Co).		Honolulu, I	HI 96813		APPLICATION ACCEPTED:	
APPLY ATTN	I: Housin	g Managemen	t Department					YES	
APPLY PHONE	: 524-27	31 x 3609		F/	AX: 545-5214	EMAIL:			
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:							YES	
	Bdrm: Bdrm:	35	0			1	2	TES	
Three B									
	Bdrm:								
Market \$1,100.00				Electricity and wat	ter		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36	
AGE CRITERIA: Head of Househol	d 62+ or	disabled: spou	se/civil				TO REMAIN ON W CALL EVERY		
union partner 18+; household must be	all other	members of th		WAITLIST PARKING INFO:	FOR PARKING	PET INFO		ETS OK: YES	
				Parking included	,	Subject to	Subject to Management Approval		
AN OWN RESID		SSET LIMITS: PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INF	0:			LEASE:		Waitlist a	Waitlist as of 8/15/23: 3-5 years		
				1 year; then mont	h-to-month		Section 8 100% ger residing on site.		
INCOME CRITERI	IA:			r		SQFT of	units not available fro	om manager.	
50% AMI: 1 perso	50% AMI: 1 person \$40,850; 2 persons \$46,650		46,650	FURNISHED: Partly furnishedrappliances only, o		Application Send required envelope	n: uest with self-addres	sed stamped	
-PERSON MAXIM	IUM MON	NTHLY INCOM	E:	3404		J			
-PERSONS MAXI	мим мс	ONTHLY INCO	ME:	3888					

5/29/2024

Printed:

	Last Compl	lete Update:	6/13/2023			AREA	Vineyard	
ROJECT NAME: KEC	OLA HOON	ANEA				PROJECT TYPE	Elderly	
ADDRESS: 1465	Aala St.					PHONE: 808-53	3-4582	
CITY: Honol	ulu		ZIP:	96817		FAX:		
	cialist; Sterling Ro	sa - On-site M	-Ann Reels - Housin gr.	0	ani Blvd. Ste. 70	0	OUT-OF-STAT APPLICATION	
APPLY ATTN: Hous	Ũ						ACCEPTED: YES	
APPLY PHONE: 808-	593-9100		F	AX: 447-5169	EMAIL:			
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	175	862	2.5x Rent	500	1	2	YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:								
by 30% of income and th apply. Rest of units have Preference given to vete requirement \$1832.50. AGE CRITERIA: Head of household must disabled. All other memi	e rent range of \$7 rans. Minimum in be 62 years or ol bers of household	33 - \$862. come der, or f must be	-	FOR PARKING:		MINIMUM V ESTIMATE MAXIMUM V ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 9 VAIT LIST (Months): 60 VAITLIST (Months): 6	
62+ or disabled. Caregiv	vers over 18 yrs o	ld allowed.	PARKING INFO: 50 stalls; no parki	YES		PET INFO: PETS OK: YES Subject to property manager's approval, 2 cats		
	ASSET LIMITS:	NONE	avg. 2-3 years; lir parking available.	nited guest	or dogs pos	ssible; \$100 pet de	eposit	
AN OWN RESIDENTI ASSET LIMIT INFO:	AL PROPERTY:	YES			-	GENERAL INFO: Veteran preference.		
			LEASE: 1 year; then mont	h to month	Application Send reque envelope	: Ask managemen est with self-addre m manager's offic	ssed stamped	
NCOME CRITERIA:					Ĵ			
All income limits are usu HUD	ally published anr	nually by	FURNISHED: major appliances	only				
-PERSON MAXIMUM M	ONTHLY INCOM	E:	5642		J			
-PERSONS MAXIMUM	MONTHLY INCOM	ME:	6446					

		Last Comp	lete Update:	6/14/2023			AREA	Makiki	
OJECT NAME:	KEW	ALO APA	RTMENTS	;			PROJECT TYPE:	Family	
ADDRESS:	1407 K	ewalo St.					PHONE: 808-53	1-3233	
CITY:	Honolul	u	STATE: HI	ZIP:	96822		FAX: 529-05	516	
MANAGER	: Kelli L	opez			APPLY AD		through	OUT-OF-STA	
APPLY TO	: Kewal	o Apartments			On-site management office, through OUT email or at: www.mdihawaii.com APF AC				
APPLY ATTN	:							YES	
APPLY PHONE	: 808-53	31-3233		F	FAX: 529-0516	v	ellil@mdihawaii.c www.mdihawaii.co	m (online applicatio	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
	Bdrm:							YES	
Two I	Bdrm:	37	0	NO	610	2	5	YES	
I	Bdrm:							YES	
oject-based Sec I other units are				Gas, water, and	electricity		MINIMUM W ESTIMATE MAXIMUM W	(Months): 4	
GE CRITERIA:				je			ESTIMATE TO REMAIN ON V		
ead of household		e 18 years or o	lder at the	WAITLIS	T FOR PARKING:		CALL EVERY	-	
	-			PARKING INFO:	1.10	PET INFO:		PETS OK: NO	
		SSET LIMITS:		Assigned parking with one vehicles options are limite available.	; other parking	ļ			
AN OWN RESIE		PROPERTY:	YES				ENERAL INFO: Applicants must keep contact info current, as		
				LEASE: 1 year; then mor	nth-to-month	well as resp manageme 2-5 people	oond to communic ent in a timely man	cation from nner.*	
COME CRITERI	IA:			μ					
ust qualify for LII d/or Section 8 li			y HHFDC	FURNISHED:	major	Application	: v.mdihawaii.com		
				Partly furnished- appliances only.			m manager's offic	e	
PERSON MAXIM	IUM MO	NTHLY INCOM	E:	ļ		<u> </u>			

	Last Comp	lete Update:	10/6/2023			AREA	Kaneohe	
PROJECT NAME: KILC	HANA AP	ARTMEN	ITS - NOT AC	CEPTING /	APPLI	PROJECT TYPE	Family	
ADDRESS: 45-265	William Henry F	Rd.					PHONE: 808-235-1844	
CITY: Kaneol	ne	STATE: H	II ZIP: 96744			FAX: 234-70	58	
J		ļ	J					
MANAGER: Terrily	n Ahakuelo-Kah	nanu		APPLY AD				
APPLY TO: Qualp	ac Management	Corporation		On-Site Ste ******CLOS APPLICAT	SED FOR		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN: Kiloha	ana Apartments						YES	
APPLY PHONE: 808-2	35-1844		F	4X: 234-7058	EMAIL:			
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	17	485		479	1	4	YES	
Two Bdrm:	90	610		634	2	6	YES	
Three Bdrm:	42	760		821	4	8	YES	
Four Bdrm:					J]		
RENT INFO: RENT IS 3			UTILITIES INCLU Gas, electricity an				(Months): 120	
AGE CRITERIA:						TO REMAIN ON V		
Head of household must b	be 18 years or ol	der	WAITLIST	FOR PARKING:	:	CALL EVERY	(Months): 6	
			PARKING INFO: Parking included		PET INFO):	PETS OK: NO	
AN OWN RESIDENTIA	SSET LIMITS:	NONE			GENERAL	INFO:		
ASSET LIMIT INFO:	-		LEASE:			Section 221(d) 100	%	
			Month-to-month			PONSE IN 2023. LA OCCURRED ON 1		
INCOME CRITERIA:			r					
Maximum Annual Income 2 persons - \$73,000; 3 pe 4 persons - \$91,200; 5 pe 6 persons - \$108,800; 7 p persons - \$120,400	rsons - \$82,100; rsons - \$98,500;		FURNISHED: Partly furnished appliances only n					
-PERSON MAXIMUM MC	NTHLY INCOM	E:	5320		Į			
2-PERSONS MAXIMUM M	ONTHLY INCO	ME:	6083					

Last Complete Upd	ate: 7/18/2023			AREA:	Makiki
OJECT NAME: KINAU VISTA				PROJECT TYPE:	Elderly
ADDRESS: 1150 Kinau St.				PHONE: 808-521	
CITY: Honolulu STAT	E: HI ZIP:	96814		FAX: 521-689	97
MANAGER: Paul Hobson		APPLY AD P.O. Box 22			OUT-OF-STA1
APPLY TO: Locations LLC		Honolulu, H	1 96823		APPLICATIO ACCEPTED
APPLY ATTN: Property Management Division	1				YES
APPLY PHONE: 808-738-3100		FAX: 735-1978	EMAIL:	http://www.locations ble-rentals.aspx	
Unit Type: Number of UNITS: REI	NT: Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:					
One Bdrm: 62 13	35 2xrent	430			
Two Bdrm:					
Three Bdrm:					
Four Bdrm:			J	<u> </u>	YES
units (for 30 % AMI seniors) - \$630 4 units (for 50% AMI seniors) - \$1,050 units (for 60% AMI seniors) - \$1,335 action 8 certificate holders need not meet the min loss income requirement.	Electric, wate	,		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
GE CRITERIA:				TO REMAIN ON W	
l residents must be 55 or older.	WAITL	IST FOR PARKING:		CALL EVERY	
oplicants can apply without verifiable residential story.	PARKING INF		PET INFO	: F	PETS OK: NO
ASSET LIMITS: NONE		andicap stalls; \$40 g; guest parking	Pets not a	llowed.	
AN OWN RESIDENTIAL PROPERTY: YES			GENERAL	INFO:	
SET LIMIT INFO: I income from assets is counted to determine igibility.	LEASE:		Has socia Communi with BBQ Applicatio	/05. Funding: LIHT(I worker on site for s ty room w/ full kitcho area, victory garder n: Online; Ask mana lest with self addres	services (PT). en & TV; courtyard n. agement to mail it;
COME CRITERIA:				Pick up from mana	
0% of AMI: 1 person \$27,450; 2 persons \$31,350 0% of AMI: 1 person \$45,750; 2 persons \$52,250 0% of AMI: 1 person \$54,900; 2 persons \$62,700	Partly furnish	edmajor	*Waitlist u keep all c	pdates not required ontact info current, a nication from housi	as well as respond
ERSON MAXIMUM MONTHLY INCOME:	4575		Į		
PERSONS MAXIMUM MONTHLY INCOME:	5225				

	Last Comp	lete Update:	10/6/2023			AREA	Kaneohe
OJECT NAME: KOʻO	OLAU VILL	. <mark>AGE (HP</mark> I	- (<mark>HA-wind</mark>	NOT ACCEP	TING	PROJECT TYPE:	Family
ADDRESS: 45-102	7 Kamau Pl.					PHONE: 808-23	3-3766
CITY: Kaneoł	ne	STATE: HI	ZIP:	96744		FAX: 233-37	69
ļ		ļ	I				
MANAGER: Rober	ta Kahele			APPLY AD			
APPLY TO: HPHA NOT A		PLICATIONS		1002 North Honolulu, H NOT ACCE		ATIONS	OUT-OF-STA APPLICATIO ACCEPTED
APPLY ATTN: Oahu NOT A	applications offi						NO
APPLY PHONE: 808-8				FAX: 832-3461	EMAIL: h	phaishereforyou.c	org
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	8	0		526	1	4	YES
Two Bdrm:	24	0		662 915	2	6	YES
Three Bdrm:	36	0		996	4	10	
Four Bdrm:	12	0					YES
REFERENCES: Domest meless in transitional sh placed. ECRITERIA: ad of household must b		ary		ST FOR PARKING:		ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	/AIT LIST (Months): 6 VAITLIST (Months):
			PARKING INFO		PET INFO:		PETS OK: YES
А	SSET LIMITS:	NONE			the categor	ies listed below: ider 25 lbs) or ca	
AN OWN RESIDENTIA	L PROPERTY:	NO			GENERAL I		
SET LIMIT INFO: Innot own a house on O	ahu		LEASE:		correspond	must respond to ence from HPHA,	, in a timely
			1 year		applicants r info/househ waitlist stat	must update any c old composition in us via hpha.myho	nfo and check using.com (will
COME CRITERIA: ome Eligibility = 80% of	AMI		FURNISHED:		Funding: Fe	ame/password to ed Low Inc Pub H	sing 100%
ximum Annual Income: ersons - \$60,900; 3 pe ersons - \$76,100; 5 pe ersons - \$88,300; 7 pe ersons - \$100,450	1 person - \$53, rsons - \$68,500; rsons - \$82,200;		Partly furnished appliances only		crystal met	ons must be 3 yrs hamphetamine or DNSE IN 2023	
ERSON MAXIMUM MO	NTHLY INCOM	E:	4570		Į.		
ERSONS MAXIMUM M	ONTHLY INCO	ME:	5220				

		Last Compl	lete Update:	1/23/2024			AREA:	Downtown
ROJECT NAME:	KOK	UA HALE					PROJECT TYPE:	Elderly
ADDRESS:	, 1192 Al	lakea Street					PHONE: 808-809)-7600
CITY:	Honolul	lu	STATE: H	I ZIP:	96813		FAX: 833-893	3-0226
		Sotelo, Commu	, ,	iveAtKokuaHale.com	Honolulu H	DRESS: a Street #630 lawaii 96813		OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN	comple	ete the one onlir		stance if unable to	4X: 833-693-022		liveatkokuahale.cor kokuahale@tmo.cc	
				Minimum		MINIMUM	MAXIMUM	
Unit	t Type:	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
S	itudio:	222	1310		258 - 275			
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
Lower rent - 12 un 60% AMI units are person application he one online. \$5 unless being waiv	e open fo n assista 600 depo:	or application. So nce if unable to sit and \$19 appl	chedule in- complete lication fee	Water, sewer, tras	sh		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
GE CRITERIA:	usebold r	must bo ago 55	oroldor				TO REMAIN ON W CALL EVERY	-
		inusi be age 55	or older.	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO		PETS OK: YES
		SSET LIMITS:		Limited parking o First Served (FCF	n a First Come	1 pet (cat	or dog) per unit, 30 f \$350 due at move	lbs. or less, one-
AN OWN RESI						GENERAL	. INFO:	
SSET LIMIT INF				LEASE:		20 story b Beretania	uilding on corner of	Alakea St. and
				6 months than mo	onth-to-month	Trash sho surveillan City or Sta Applicatio	oot, roll-in showers, l ce, two community r ate Section 8 welcor n fee of \$19 is waive	rooms, ne. ed (special, end
NCOME CRITER 30%AMI units - M 527,510 (1 person 50%AMI units - M 555,020 (1 person	aximum n) \$31,44 aximum	10 (2 person) annual gross in		FURNISHED: Both furnished an options. VCT floo			e determined) and re O. Box is not accep	
PERSON MAXIN	IUM MO	NTHLY INCOM	E:	4585		Į.		
PERSONS MAXI		ONTHLY INCOM	ME:	5240				

	-	ete Update:	5/16/2023				Ewa Beach
	O'OLOA'ULA		& II - waitlist	closed		PROJECT TYPE:	· ·
ADDRESS: 91	1-1159 Keahumoa Pk	wy.				PHONE: 808-550	
	wa Beach	STATE: HI	ZIP:	96706		FAX: 356-333	30
MANAGER: L	_aurie Burgess - Prop	erty Manager					
APPLY TO: (CLOSED for application	on		Ewa Beach	ahumoa Pkwy, , HI 96706	#801	
APPLY ATTN:							YES
APPLY PHONE: 8	808-550-3800		F	AX: 356-3330	EMAIL: W	ww.mutual-housin	ig.org
Unit Ty	/pe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stud	dio:						
One Bd	rm: 54	1095	>2x rent	569	1	4	
Two Bd	rm: 169	1275	>2x rent	765	2	6	
Three Bd	rm: 46	1665	>2x rent	1143	3	8	
Four Bd	rm: 38	1855	>2x rent	1462	4	10	YES
- \$1,335; 4-bd (5)	er rent above) 1-bd (3		WAITUST			ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	AIT LIST (Months):
			PARKING INFO:	FOR PARKING:	PET INFO:	P	PETS OK: NO
	ASSET LIMITS:	YES	1 assigned stall is one bedroom unit included for all ot	s included per t ; two stalls	Pets not all	owed.	L
AN OWN RESIDE	NTIAL PROPERTY:		Guest parking av	ailable.	GENERAL I	NFO:	
SET LIMIT INFO:			LEASE: 1 year		as well as r housing mg Participatin	must keep all conta espond to commur jmt. in a timely ma g in City's Ready to ula Mae Multi Fam onds	nication from nner.* o Rent program.
COME CRITERIA:					Landscape	d grounds with play	y areas, tot lot, ns. Coin operated
	be greater than two tin al income for 5-persor	าร -	FURNISHED: ceiling fans, ener appliances, carpe		laundry roo community Applicants	m, resident service room, on-site mgn must have satisfac	es office and nt office.
oss income must l nt. Maximum annu	- \$90,900; 7-person - \$	997,720, 6-	vinyl floors, marb cherry wood vene	le counter tops,	pass crimin landlord ref	al background che erences.	
oss income must l nt. Maximum annu 4,660; 6-persons - rrson - \$103,440	• \$90,900; 7-person - \$ M MONTHLY INCOME		vinyl floors, marb	le counter tops,			

	I	Last Comp	lete Update:	10/6/2023			AREA:	Kalihi
DJECT NAME:	KUHIO	HOMES	<mark>6 (HPHA-</mark> h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahonui St.						PHONE: 808-832	2-6075
CITY:	Honolulu		STATE: HI	ZIP:	96819		FAX: 832-343	38
MANAGER:	: Nua Vaova	asa			APPLY AD 1002 North			OUT-OF-STA
APPLY TO:		EPTING AP	PLICATIONS		Honolulu, H		ATIONS	APPLICATIC ACCEPTED
APPLY ATTN:			ce PLICATIONS			EMAII • b	phaishereforyou.c	NO
APPLY PHONE:	808-832-5	961			FAX: 832-3461	EWAL. I	phaishereforyou.u	ig
Unit		umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St One B	udio: Bdrm:	20	0		490	1	4	YES
Two B	Bdrm:	32	0		688	2	6	YES
Three B	Bdrm:	37	0		877	3	8	YES
Four B	Bdrm:	37	0		1042	4	10	YES
himum Rent: \$0 EFERENCES: I neless in transit placed. E CRITERIA: ad of household	Domestic Vi iional shelte	olence victi rs; involunta	ms; ary			Т	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	(Months):
					ST FOR PARKING:	PET INFO:	F	PETS OK: YES
AN OWN RESID				Included		the categori	mals ok, but only o es listed below: der 25 lbs) or_cat	
SET LIMIT INFO				LEASE:		*Applicants	must respond to a	
annot own a house on Oahu				1 year		manner. No applicants r info/househ	ence from HPHA, waitlist updates r nust update any c old composition ir us via hpha.myhou	needed, however, ontact ifo and check
							ame/password to ed Low Inc Pub Hs	
ome Eligibility = 80% of AMI aximum Annual Income: 1 person - \$53,250; persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; persons - \$100,450			- - -	FURNISHED: Partly furnished appliances only		crystal meth	ons must be 3 yrs namphetamine or INSE IN 2023	
				,		J		
ERSON MAXIMI	UM MONTH	ILY INCOM	E:	4570				

		Last Comp	lete Update:	6/13/2023			AREA:	Liliha
ROJECT NAME:	KUK	UI GARDE	INS				PROJECT TYPE:	Family
ADDRESS: 1	103 Li	liha St.					PHONE: 808-532	-0033
	lonolul	lu	STATE: HI	ZIP:	96817		FAX: 762-233	3
MANAGER:	Sandie	e Ishimie, Prope	erty Manager		APPLY AD	DRESS: St., Ste. 102		OUT-OF-STAT
APPLY TO:	EAH H	lousing			Honolulu, F			APPLICATION ACCEPTED
APPLY ATTN:	Kukui	Gardens						YES
APPLY PHONE:	808-53	32-0033			FAX: 762-2333	EMAIL:	www.eahhousing.or	g
Unit T	ype:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stu	dio:							
One Bo	drm:	115	1239	3110		1	2	YES
Two Bo	drm:	106	1472	3695		2	5	YES
Three Bo	drm:	122	1685	4235		3	7	YES
Four Bo	drm:	46	1864	4687		4	9	YES
ENT INFO: REN eposit plus first mo Jpdates not require odating contact info espond to commun	onth re ed to re o), how ication	nt emain on waitlis vever, applicant ı from housing	st (unless	UTILITIES INC Water & Sewe	-		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA: ead of household r	must b	e 18 vears or o	lder				TO REMAIN ON W CALL EVERY	-
				WAITLI PARKING INF	IST FOR PARKING: O: YES	PET INFO	. F	ETS OK: NO
	A	SSET LIMITS:	NONE		d, guest parking		· · ·	
AN OWN RESIDE	INTIAL	PROPERTY:	NO			GENERAL	INFO:	
SSET LIMIT INFO:				LEASE:		Funding:	LIHTC	
				First year: Fixe Month-to-Mont	ed 12-month lease. th thereafter.	Accepting	applications for ALI	_ bedroom sizes.
COME CRITERIA	:							
				FURNISHED: Partly furnishe appliances onl				
PERSON MAXIMU	M MO	NTHLY INCOM	E:	4085		<u> </u>		
PERSONS MAXIM		ONTHLY INCO	ME:	4665				

OJECT NAME: KUKUI TOWER - CLOS					1005	
				PHONE: 808-537		
CITY: Honolulu STATE: H	I ZIP:	96817		FAX: 537-968	52	
MANAGER: Martha Malloe, Property Manager Celeste Russell, Assistant Resident	Manager	APPLY AD On-Site	DRESS:		OUT-OF-STAT	
APPLY TO: Ms. Connie Chan, Leasing Agent		On-Sile			APPLICATIO ACCEPTED	
APPLY ATTN:					YES	
APPLY PHONE: 808-537-4935	F	AX: 537-9682	EMAIL:	KT-Management@	eahhousing.org	
Unit Type: Number of UNITS: RENT: Studio:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One Bdrm: 126 778	1695	560	1	3	YES	
Two Bdrm: 254 846	1843	742	2	5	YES	
Three Bdrm: Four Bdrm:						
alculated by using 30% of the household's adjusted come, the minimum and maximum rents are \$678 - 778 for 1 bdrm; \$737 - \$846 2 bdrm. 30% of come cannot be at or above the maximum rent.	Water, sewer, ga	S		MINIMUM W ESTIMATE MAXIMUM W	(Months): 22	
	Į			ESTIMATE		
GE CRITERIA: ead of household must be 18 years or older	WAITUST	FOR PARKING:		TO REMAIN ON W CALL EVERY		
	PARKING INFO:	YES	PET INFO	: F	PETS OK: NO	
ASSET LIMITS: NONE	Parking 1st stall stalls range from \$175/month, dep	\$105 to	reasonabl	e accommodations t	for disability	
AN OWN RESIDENTIAL PROPERTY: YES	availability.		GENERAL	INFO:		
SSET LIMIT INFO:	LEASE:			pdates must be con ach year, via submis		
	1 year; then mon	th-to-month	"update ca Funding:S Complete	ard".* Section 8, Section 23	36	
COME CRITERIA:			active on	waitlist.		
	FURNISHED: Swi com Partly furnishedmajor 24 I appliances only car		communit	Swimming pool, playground, basketball court, community room, picnic/bbq area on site. 24 hour trained personnel patrol.& closed circu cameras. NO RESPONSE IN 2023.		

		Last Comp	lete Update:	5/11/2023			AREA:	Makiki
PROJECT NAME:	KUL/	ANA HALE	Ξ				PROJECT TYPE:	Elderly
ADDRESS:	, 1551 Sc	outh Beretania	St.				PHONE: 808-983	-1551
CITY:	Honolul	u		ZIP:	96826		FAX: 983-155	3
		Young (Genera	ıl Mgr.)		APPLY ADI On-Site 4th Floor, M	DRESS:	fice	OUT-OF-STATE APPLICATION
APPLY TO		a Hale LLP				Ū		ACCEPTED: YES
APPLY ATTN		33-1551			FAX: 983-1553		leslie@hawaiiafford https://www.low-inc	
					-		housing com	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	122	1295		400	1	2	YES
One	Bdrm:	42	1495		520	1	3	YES
Two I	Bdrm:	11	1855		594	2	4	YES
Three I	Bdrm:							
Four I	Bdrm:						ļ	YES
Based on 80% AN	11.						MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:							TO REMAIN ON W	
All residents must	be 55 or	older			IST FOR PARKING:		CALL EVERY	· · /
				PARKING INF		PET INFO:	F ets Allowed	PETS OK: NO
Į.	A	SSET LIMITS:	NONE		ilable; parking is			
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO Income from Asse income. Assets ov	ts counte			LEASE: 6 months (Initi	al lease term)	keep conta communic manner.* Funding:	pdates not required act info current, as v ation from manage LIHTC s are allowed with M	well as respond to ment in a timely
INCOME CRITERI	A:					work outsi		
1 person - \$73,200 annually; 2 person - \$83,600 annually.			Partly furnishedmajor appliances only. Carpet, blinds, hou		building ec Application housing.co	pupped with fire spr n: Online: low-incon om or ask managen from manager's off	rinklers. ne-senior- nent to mail it	
I-PERSON MAXIM	IOM MU	NTHLY INCOM	E:	6100		ļ.		
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	6967				

JECT NAME:	· · · · · · · · · · · · · · · · · · ·						PROJECT TYPE:	
ADDRESS:	46-229 I	Kahuhipa St.					PHONE: 808-247	
CITY:	Kaneoh	9	STATE: HI	ZIP:	96744		FAX: 247-060	2
MANAGER	: Farod	Jackson			APPLY AD On-Site Ur			OUT-OF-ST
APPLY TO	: Hawaii	an Properties			On-Sile Of	III A 104		APPLICATIO ACCEPTE
APPLY ATTN	I: Kulana	Nani						YES
APPLY PHONE	: 808-24	7-0602		F	AX: 247-0602	EMAIL:	rm@kulananai.com	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm: Bdrm:	40	1575		745	2	5	YES
Three E		80	1765		862	3	7	YES
Four E	Bdrm:	40	1810		980	4	9	YES
NT INFO: REI it List for 2 bed it List for 3 bed it List for 4 bed E CRITERIA: ad of household	Irooms is Irooms is Irooms is d must be	6 months - 12 3 months - 6 6 months - 12 e 18 years or o	months months 2 months Ider.	UTILITIES INCLU Electricity, water a			MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY	(Months):
olicants can app ory. imum composi				PARKING INFO:	YES	PET INFO		ETS OK: NO
		SSET LIMITS:		\$50 per month; w stall is 4 - 5 years			stive animals	
		PROPERTY:	YES			GENERAL		
Set limit info	0.			LEASE: 1 year		well as rea managem Office Ho Monday th	ts must keep contac spond to communica ient in a timely manr urs: 8am - 4pm hru Friday Il courts, picnic/bbq a	ation from ner.*
						10 handic	ap units	
PERSONS MAXIMUM MONTHLY INCOME: 510.00		FURNISHED: For Partly furnishedmajor env		Send request sentences sen	For Application: Send request with self-addressed stamped envelope; pick up from manager's office or ca office to request application to be emailed.			

OJECT NAME: KUI ADDRESS: 41-20 CITY: Waim		IALE MAL					
	9 Ilauhole St.			RUPUNA		PROJECT TYPE:	Elderly
CITY: Waim						PHONE: 808-426	
	analo	STATE: HI	ZIP:	96795		FAX: 426-140	1
MANAGER: Nohe	·			APPLY AD 41-209 Ilau Waimanalo	hole St. #87		OUT-OF-STAT
APPLY TO: Loca							ACCEPTED YES
APPLY ATTN: Prop APPLY PHONE: 808-		t Division	F	FAX: 738-8981		locationsrentals.cor rentals.aspx	n/affordable-
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	85	1000	2xrent	528	1	2-3	YES
Two Bdrm:							
Three Bdrm:							
Four Bdrm:							YES
↓ @ 80%AMI. Rent am 300, \$825, \$960, and \$ ave 50% Native Hawaii ⊣HL list.	1000 per month.	HOH must	\$144/mo for elec	stricity.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 2
GE CRITERIA:						TO REMAIN ON W	
I residents must be 55	or older;		WAITLIS	T FOR PARKING:		CALL EVERY	(Months):
			PARKING INFO:	NO	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:	NONE	Parking included tenant stalls, inc handicap access	luding 9			
AN OWN RESIDENTI	AL PROPERTY:	NO	accessible.		GENERAL	INFO:	
SET LIMIT INFO:	arcontago of rocio	Inntial	LEASE:			n of 50% Hawaiian l processing. Applica	
operties.	siochage of resic		1 year; then mor	nth-to-month	confirmation Homelands *Communi	on letter fromf Dept.	of Hawaiian a plots; laundry
COME CRITERIA:					resident m	anager.*No waitlist	updates needed,
aximum income: 1 person 2 people 1 person 2 people 1% 27,450 31,350 80% 73,200 83,600 45,750 52,250 100% 91,500 104,500 54,900 62,700			FURNISHED: Partly furnished- appliances only. floors, curtains.		updated ar timely mar holders ne requiremen application	applicants must kee nd respond to corre nner.Section 8 acce ed not meet the min nt. *Confirmation lef n is received .IHTC, Section 8, D	spondence in a pted; voucher n. income tter mailed once
ERSON MAXIMUM M	ONTHLY INCOM	E:	7625		J		

		Last Comp	lete Update:	11/8/2023			AREA:	Makiki
ROJECT NAME:	KUL/	AOKAHU/	A EMERG	ENCY SHELT	ER		PROJECT TYPE:	Emergency/Trans
ADDRESS:	1311 W	ard Ave.					PHONE: 808-599	-5759
CITY:	Honolul	u	STATE: H	I ZIP: 96814			FAX: 545-862	3
MANAGER APPLY TO		ty Manager - G walk in	eorge McMorri	s	APPLY AD 1311 Ward			OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 808-59	99-5759		F	AX:	EMAIL:	https://dynamicheal	ingcenter.org/
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	24			255	1	2	YES
One I	Bdrm:	5			410	1	2	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:				ļ			NO
RENT INFO: REI Rent is 30% of inc Housing is tempor couples with the g Residents must be the program. Dep	ome up t arly for u oal of fin e followin	to the maximur insheltered ind ding permanen ig service plan	n of \$250. ividuals or it housing.	UTILITIES INCLU Electricity and war			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): AIT LIST (Months):
GE CRITERIA:	d must be	e 60 vears or o	lder:				TO REMAIN ON W CALL EVERY	
spouse/partner mu allowed.				WAITLIST PARKING INFO:	FOR PARKING:	PET INFC)· P	ETS OK: YES
					JNO		nimal - Doctor Verifi	Ľ
AN OWN RESIE	DENTIAL	SSET LIMITS: . PROPERTY:				GENERAL		
SSET LIMIT INF	0:			LEASE:		unshelter	s must be actively he ed and capable of in	dependent living.
				Shelter agreemen accept offer for pe housing.		couples h participat	it is kept for a unit. In have own unit. Reside e in a social service f permanent housing	ents must plan and accept
NCOME CRITERI	IA:			FURNISHED:			Homeless Stipend	
				Partly furnishedr refrigerator, stove and bed.				
PERSON MAXIM			IE-					

	Last Comple	te Update:	6/13/2023			AREA:	Waianae
PROJECT NAME: KULI	<mark>A I KA NU</mark>	<mark>J (Kahiko</mark>	lu Ohana Ha	ale O'Wai'a	inae)	PROJECT TYPE:	Family
ADDRESS: 85-296	Ala Hema St.					PHONE: 808-697	7-7300 808-75
CITY: Waiana	e	STATE: HI	ZIP:	96792		FAX: 697-730	2
,		ļ	,				
MANAGER: Leslie (New n	Young, Site Mana nanagement pen				Akau St., Unit	712	OUT-OF-STATE
APPLY TO: Kulia I	Ka Nuu			Waianae, H	11 96792		APPLICATION ACCEPTED:
APPLY ATTN:							
APPLY PHONE: 808-69	97-7300		F/	AX:	EMAIL:	www.hawaiiaffordat	Die.com
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:	24	944					
Two Bdrm:	46	1418					
Three Bdrm:							YES
RENT INFO: RENT IS 30 24 Studios @ \$551 - \$944; 46 Two Bedrooms @ \$126 units); based on 60% of inc	; based on 30% c 60 (24 units) - \$14	of income.	UTILITIES INCLU Electric, water, an			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6 AIT LIST (Months): 12
AGE CRITERIA: Head of household must be Applicants must have verifi			WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	TO REMAIN ON W CALL EVERY	-
A: AN OWN RESIDENTIAL	SSET LIMITS:		All paperwork (ca safety check, and must be up to dat parking available.	r registration, l insurance) e. Guest	GENERAL	. INFO:	
ASSET LIMIT INFO:			LEASE:		O'Waiana Requires: 1. 6 mon 2. 6 mon	ths of pay stubs ths bank statements	
INCOME CRITERIA: 30% - 60% of Honolulu Me	dian Income		FURNISHED:		5. State I. Applicatio Ask mana Send requ envelope	Security Card D. or Driver's Licens	sed stamped

1-PERSON MAXIMUM MONTHLY INCOME:

Last Complete Update:	10/13/2023			AREA	Barber's Point
PROJECT NAME: KUMUHONUA (Building	y 36)			PROJECT TYPE	Transitional
ADDRESS: 91-1096 Yorktown St.				PHONE: 808-68	2-5494
CITY: Kapolei STATE: H	I ZIP:	96707		FAX: 682-54	95
MANAGER: Davilyn J. N. Chang, Program Mana Carla Kahala, Assistant Program Ma APPLY TO: HCAP		APPLY AE P.O. Box 7 Kapolei, H	5547		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:					NO
APPLY PHONE: By CES	FA	X : By CES	EMAIL:	Website: www.hcapweb.org/	
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 65 0 One Bdrm:		340	1	3	
Two Bdrm:					
Three Bdrm: Four Bdrm:					
RENT INFO: RENT IS 30% OF INCOME: YES Charges a "Program Fee", not "Rent" TB clearance required. *No waitlist; Entry coordinated via CES 59 units available for public use; 6 units resvd for	UTILITIES INCLUE All Utilities	DED:		TOT/ MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA: Adults ONLY (>18yrs); *Maximum 3 ppl per unit	WAITLIST		:	TO REMAIN ON V CALL EVERY	VAITLIST (Months):
	PARKING INFO: Parking included	NO	PET INFO	:	PETS OK: NO
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:			GENERAL	. INFO:	
ASSET LIMIT INFO:	LEASE: 120 Days		use. Res meals. Program	2/09 rooms and two kitc idents are responsi provides case mana nd workshops relate	ble for their own agement, ongoing
INCOME CRITERIA: No minimum income requirement, as fee is calculated by 30% of gross income; maximum incomes not provided on last update (2021).	FURNISHED: Small refrigerator, bathroom, microwa		goals of p independe Applicatio Coordinat	ermanent housing	and financial referral through

1-PERSON MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	10/17/2023			AREA	. Moiliili	
PROJECT NAME:	KUM	UWAI AP		S			PROJECT TYPE: Elderly		
ADDRESS:	1902 Yo	oung St.					PHONE: 808-76	§2-0902	
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX:		
MANAGER		a Espiritu ng Solutions, In			APPLY AD	DRESS:		OUT-OF-STATE APPLICATION	
AFFLITO	- HOUSII	ig Solutions, in	с.					ACCEPTED: NO	
APPLY ATTN	I: Marett	a Espiritu							
APPLY PHONE	: 808-76	62-0902		F	FAX:	EMAIL:	Website: https://w Email: Maretta@h	ww.hsiservices.net/ siservices.net	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	29	900			1	2		
	Bdrm:		0						
	Bdrm:		0						
Three			0						
Four	Bdrm:		0						
RENT INFO: RE Security Deposit: S Section 8 and other AGE CRITERIA: All applicants mus	\$900 er housir	ng vouchers acc		UTILITIES INCLI	led.		MINIMUM V ESTIMATE MAXIMUM V	E (Months): 1 VAIT LIST E (Months): 6 WAITLIST	
				WAITLIS PARKING INFO:	T FOR PARKING:	PET INFO	:	PETS OK:	
	A	SSET LIMITS:		Parking included waitlist for parkir				ľ	
AN OWN RESI		PROPERTY:	NO			GENERAL		ain mot 00 aturdian	
				LEASE: FURNISHED:		for homel Features Amenities facilities, located ne	ne permanent hou ess persons at leas include kitchens ar s include resident p and common area ear a bus stop. PONSE IN 2023	st 62 years old. nd private baths.	
1-PERSON MAXIN 2-PERSONS MAXI				3675					

nia		
mily		
'5		
'5		
OUT-OF-STA		
APPLICATIO		
iousing.org		
AREGIVER		
Allowed:		
YES		
_IST hths): _IST hths):		
LIST hths):		
OK: YES		
cinto.		
ENERAL INFO: Waitlist updates not required; Applicants mus eep all contact info current, as well as respon		
ell as respon anagement i		
st meet the		
finition of or income.		
m with		
school		
On Site Manager and U.S. Post Office; Kunia Farmers Market; Community room with kitchan; Gym with Indoor basketballl/volleyball court Kids play structure; Head Start preschool program. LAST UPDATE IN 2021.		

	Last Compl	lete Update:	10/18/2023			AREA:	Waialua	
JECT NAME: KUP		E O'WAIA	<mark>ALUA (HPHA-</mark>	cen) - NO		PROJECT TYPE:	Elderly	
ADDRESS: 67-088	Goodale Ave.					PHONE: 808-637		
CITY: Waialu	а	STATE: HI	ZIP:	96791		FAX : 622-636	2	
MANAGER: Jimar	y Quinones			APPLY AD	DDRESS:	dal	OUT-OF-ST/	
APPLY TO: HPHA NOT /	ACCEPTING AP	PLICATIONS		PO Box 17	7907 Honolulu, EPTING APPLI	НЇ 96817	APPLICATI	
APPLY ATTN: NOT	ACCEPTING AP	PLICATIONS					NO	
PPLY PHONE: 808-8	32-5961		F	AX: 832-3461	EMAIL:	hphaishereforyou.or	rg	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	24	0		390	1		YES	
One Bdrm:	16	0		520	1		YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:								
mum Rent: \$0 for Fed licants must respond HPHA, in a timely ma	to any correspo		Water and electric	, in the second s		MINIMUM WA	(Months):	
CRITERIA:			je			ESTIMATE		
d of household must b			WAITLIST	FOR PARKING		CALL EVERY	-	
oled. If elder dies, und	ter age 62 spous	se may rent.	PARKING INFO:		PET INFO		PETS OK: YES	
			Parking included		Small pets	Small pets under 25 lbs. only		
A I OWN RESIDENTIA	SSET LIMITS:				GENERAL	INFO:		
ET LIMIT INFO:			LEASE:		PREFER	PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary		
not own a house on C	ahu		1 year		displaced however, info/house	applicants must updates applicants must upd abold composition in atus via hpha.myhou	s needed, late any contact fo and check	
OME CRITERIA:					need user	mame/password to d	do so).	
AMI: 1 person \$53,29 ons \$68,500; 4 person		30,900; 3	FURNISHED: Partly furnished appliances only n		All convic methamp permaner	unit. Funding: Fed Low Inc Pub Hsing 1009 All convictions must be 3 yrs ago; crystal methamphetamine or sex offender are permanently barred. NO RESPONSE IN 2023		
RSON MAXIMUM MO		E:	4570					
RSONS MAXIMUM M		ME:	5220					

	Last Compl	lete Update:	10/18/2023			AREA:	Wahiawa	
OJECT NAME: LA'I	<mark>OLA ELDE</mark>	<mark>RLY - NO</mark>	T ACCEPTIN			PROJECT TYPE:	Elderly	
ADDRESS: 1 Iho Ih	no PI.					PHONE: 808-62	2-6350	
CITY: Wahiav	wa		ZIP:	96786		FAX: 622-63	51	
MANAGER: Jay D Lyn - ,	omanguera, Res Admin (675-009			APPLY ADDRESS: 1002 North School Street Honolulu, Hawaii 96817			OUT-OF-STA	
APPLY TO: Hawa	ii Public Housing	g Authority		riorioidid, i	lawali 90017			
APPLY ATTN: Lyn							NO	
APPLY PHONE: 808-8	32-5961		F	FAX: 622-6351		mu42laiola@gmail http://hawaiiafforda	.com able.com/residentia	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	60	170	YES	384	1	2	YES	
One Bdrm:	48	195	YES	506	2	2	YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:							YES	
udio; \$195 for 1 bdrm.	2016*****					MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):		
GE CRITERIA:			P.			TO REMAIN ON V	· /	
ead of Household must l				T FOR PARKING:		CALL EVERY		
ouse must be 55+. Car embers of the household		ier	PARKING INFO:		PET INFO:	I	PETS OK: NO	
plicants must have veri	fiable residential	history.	Parking included	d (limited)	Doctor's no	Doctor's note required		
۵	SSET LIMITS:	YES			J			
AN OWN RESIDENTIA SET LIMIT INFO:	L PROPERTY:	YES				GENERAL INFO: *Applicants must keep contact info updated, as well as respond to communication from management in a timely manner.*		
annot own property in sa mit: 1person - \$38,600;		Asset 100	LEASE: 1 year		well as res			
					Opened 19 Funding: S	State Low Income 1	00%	
COME CRITERIA: aximum Annual Income: persons - \$39,200	: 1-person \$34,3	300				IO RESPONSE IN 2023		
PERSON MAXIMUM MO	NTHLY INCOM	E:	2858		ļ			
PERSONS MAXIMUM M	ONTHLY INCOM	ME:	3267					

	Last Compl	ete Update:	5/17/2023			AREA: Lanakila		
ROJECT NAME:	ANAKILA GA	RDENS				PROJECT TYPE	Family	
ADDRESS: 83	33 North School St.					PHONE: 808-94	19-4111	
	onolulu	STATE: HI	ZIP:	96817		FAX: 949-72	211	
MANAGER: S	Shane Lyman, Reside	nt Manager		APPLY AD	DRESS: Pl., Ste. 103		OUT-OF-STAT	
APPLY TO: E	3ob Tanaka Inc.		Honolulu, HI 96826				APPLICATION ACCEPTED:	
APPLY ATTN: E	Ext. 36						YES	
APPLY PHONE: 8	808-949-4111		F	AX: 949-7211	EMAIL:			
Unit Ty	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One Bd		4000					YES	
Two Bdi		1029	2.5xrent				YES	
Three Bd		1154	2.5xrent 2.5xrent				YES	
		1276						
Four Bd	rm.			ļ	J	ļ	NO	
City Section 8 vouche	IS 30% OF INCOME ers accepted.		UTILITIES INCLU			MINIMUM \ ESTIMATI MAXIMUM \	E (Months): 12	
AGE CRITERIA:						TO REMAIN ON	· · · ·	
	nust be 18 years or ol	der	WAITLIST	FOR PARKING:		CALL EVER	-	
			PARKING INFO:	NO	PET INFO):	PETS OK: NO	
	ASSET LIMITS:	NONE	Parking included parking available					
	NTIAL PROPERTY:	YES			GENERAL	_ INFO:		
ASSET LIMIT INFO:	cannot make applicar	nts go over	LEASE:		Accepts S	ts Sect 8 Vouchers		
income limit			1 year; then month-to-month		applicants well as re	s must keep all cor	lar waitlist updates, ntact info current, as cation from housing nner.*	
NCOME CRITERIA:						······, ·····		
Min. income required below income limit.	l. Must make 2.5x rer	nt and be	FURNISHED: Partly furnished appliances only	major				
-PERSON MAXIMUN	M MONTHLY INCOM	E:	4696		J			
-PERSONS MAXIMU	JM MONTHLY INCOM	ИE:	5367					

		Last Comp	lete Update:	5/9/2023			AREA	Kailua	
PROJECT NAME:	LANI	HULI					PROJECT TYPE	Elderly	
ADDRESS:	25 Aulik	ke St.					PHONE: 808-26	3-0268	
CITY:	Kailua		STATE: HI	ZIP:	96734		FAX:		
MANAGEF	R: Dale C	ripps, Residen	t Manager	APPLY ADDRESS: 1055 Kalo Pl. Ste 103			OUT-OF-STA		
APPLY TO	D: Bob Ta	anaka Inc.			Honolulu, H	11 96826		APPLICATION ACCEPTED:	
APPLY ATTN	N: Ext. 24	1						YES	
	E: 808-94	19-4111		F	AX: 949-7211	EMAIL:			
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	Studio:	50	726	2.5xRent	413/443	1	2	YES	
One	Bdrm:	32	864	2.5xRent	456/499	1	2	YES	
Тwo	Bdrm:								
Three	Bdrm:								
Four	Bdrm:				ļ	J	ļ	NO	
RENT INFO: RE Accepts section 8			E: NO	UTILITIES INCLU Water	DED:		MINIMUM V ESTIMATE MAXIMUM V	E (Months): 12	
				k				E (Months): 24	
AGE CRITERIA: Head of househol	ld must b	e 62 years or o	lder, or				TO REMAIN ON CALL EVER		
disabled. Under a not without HOH.	age 62 sp	oouse is accept	able, but	PARKING INFO:	FOR PARKING	PET INFC):	PETS OK: YES	
	А	SSET LIMITS:	NONE	\$25/month; guest available.	t parking not	for medic	for medical/assistance only		
AN OWN RESI						GENERAL	L INFO:		
ASSET LIMIT INF		t put porcon ov		LEASE:			givers are allowed with MD letter; can work de home. Participating in the City		
limits.		i put person ov	er income	1 year			Rental Assistance I		
INCOME CRITER	RIA:								
Minimum Income	Required	d. Must make 2	2.5 x the rent	FURNISHED: Partly furnished appliances only. I					
I-PERSON MAXIN		NTHLY INCOM	E:	4696		<u> </u>			
2-PERSONS MAX		ONTHLY INCO	ME:	5367					

JECT NAME: LOL	IANA					PROJECT TYPE:	Family	
ADDRESS: 565 Qu	inn Ln.					PHONE: 808-522	2-0541	
CITY: Honolu	lu	STATE: HI	ZIP:	96813		FAX: 522-053	39	
MANAGER: Pam	Sakai, General N	lanager		APPLY AD	DRESS:		OUT-OF-STA	
APPLY TO: Housi	ng Solutions, Ind	с.					APPLICATIO	
APPLY ATTN:								
PPLY PHONE: 808-5	22-0541		F	AX:	EMAIL:	pams@hsiservices	.net	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	43	1000		319	1	4		
One Bdrm:								
Two Bdrm:								
Three Bdrm:								
Four Bdrm:				ļ			NO	
00/month			Electricity, water,			MINIMUM W ESTIMATE MAXIMUM W	(Months):	
E CRITERIA:			je			ESTIMATE TO REMAIN ON W	is a second s	
Ilt 18+ with at least 1	ninor child (unde	er 18)		FOR PARKING		CALL EVERY	-	
			PARKING INFO:	NO	PET INFO	: F	PETS OK: NO	
			\$50/ month; no g	uest parking				
	SSET LIMITS:					1150		
N OWN RESIDENTIA SET LIMIT INFO:	L PROPERTY:	NO			GENERAL	. INFO:	s families with	
			LEASE: Month-to-month		Under 50°	be a registered sex		
OME CRITERIA:			r		Applicatio			
ust be less than 50%AMI			FURNISHED: unfurnished, maj only. No carpet	or appliances		Ask management to email it, pams@hsiservices.net		

	Last Comp	lete Update:	10/19/2023			AREA:	Waianae		
PROJECT NAME:	MA'ILI I (HPHA	<mark>-lee) - NO</mark>	T ACCEPT	ING APPICA	TION	PROJECT TYPE:	Family		
ADDRESS:	87-172 Mailona St.					PHONE: 808-697	· -7171		
CITY:) Waianae	STATE: HI	ZIP:	96792		FAX: 697-717	′ 4		
•	Walanac	••••••		30132					
MANAGER	: Mandy Miyamoto			APPLY AD					
APPLY TO	: HPHA NOT ACCEPTING AF	PLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:		
APPLY ATTN	: Oahu applications offi NOT ACCEPTING AP						NO		
APPLY PHONE: 808-832-5961				FAX: 832-3461	EMAIL: I	nphaishereforyou.o	rg		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
One E	tudio: Bdrm:						YES		
Two E	Bdrm: 7 Bdrm: 13	0		912	2	6 8	YES		
Four E	Bdrm:								
PREFERENCES: homeless in transi displaced. AGE CRITERIA:	d must be 18 years or ol	ms; ary		wance for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 36 AIT LIST (Months): 60 /AITLIST (Months):		
			PARKING INFO	D:	PET INFO:		PETS OK: YES		
AN OWN RESIE	ASSET LIMITS: DENTIAL PROPERTY:		Included		the categorione doa (u	multiple animals ok, but only one from each of the categories listed below: one dog (under 25 lbs) or cat GENERAL INFO:			
ASSET LIMIT INFO		-	LEASE:			*Applicants must respond to any			
Cannot own a nou	Cannot own a house on Oahu				manner. N applicants info/housel waitlist stat	respondence from HPHA, in a timely nner. No waitlist updates needed, however, plicants must update any contact b/household composition info and check itlist status via hpha.myhousing.com (will			
					need userr Funding: F	name/password to ed Low Inc Pub Hs	do so). ing 100%		
ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450			FURNISHED: Partly furnisher appliances only		methamph barred.	Convictions must be 3 yrs ago; crystal methamphetamine or sex offender permanent			
I-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		μ				
2-PERSONS MAXII	MUM MONTHLY INCO	ME:	5220						

	Last Comp	lete Update:	10/19/2023			AREA:	Waianae		
PROJECT NAME: M	A'ILI II (HPH/	<mark>A-lee) - NO</mark>	T ACCEPTII	NG APPLIC		PROJECT TYPE:	Family		
ADDRESS: 87-	-165 Keliikipi St.					PHONE: 808-69	<u>۳</u> 7-7171		
						FAX: 697-71	74		
CITY: Wa	aianae	STATE: HI	ZIP:	96792		,			
MANAGER: M	landy Miyamoto PHA			APPLY AD 1002 North Honolulu, H	School St. Il 96817	CATIONS	OUT-OF-STATE		
	OT ACCEPTING AF	PLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED: NO		
	ahu applications offi OT ACCEPTING AF				EMAIL -	hphaishereforyou.c			
APPLY PHONE: 80	08-832-5961		F	AX: 832-3461		nphalonererery ou.c			
Unit Typ	pe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
Studi One Bdr									
Two Bdr		0		912	2	6	YES		
Three Bdr	m:								
Four Bdr	m: 12	0		1394	4	10	YES		
homeless in transition displaced. *********CLOSED 8/2/ AGE CRITERIA:	********^I ^ED 0/0/016*****			FOR PARKING:	PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 36 /AIT LIST (Months): 60 VAITLIST (Months): 9 PETS OK: YES		
	ASSET LIMITS:	NONE				categories listed below: e dog (under 25 lbs) or cat			
	ITIAL PROPERTY:	NO			GENERAL	-			
	SSET LIMIT INFO: annot own a house on Oahu			1 year magin			*Applicants must respond to any correspondence from HPHA, in a timely manner. No waitlist updates needed, however, applicants must update any contact info/household composition info and check waitlist status via hpha.myhousing.com (will		
INCOME CRITERIA: ncome Eligibility = 80°	% of AMI		FURNISHED:		need user Fed Low I	name/password to nc Pub Hsing 100%	do so). Funding:		
Maximum Annual Incc 2 persons - \$60,900; 3 4 persons - \$76,100; 4 6 persons - \$88,300; 3 8 persons - \$100,450	ome: 1 person - \$53, 3 persons - \$68,500 5 persons - \$82,200 7 persons - \$94,350		Partly furnished appliances only	major	Convictions must be 3 yrs ago; however, distributing crystal methamphetamine and registered sex offender are permanently barr				
-PERSON MAXIMUM	I MONTHLY INCOM	E:	4570		87 1				
2-PERSONS MAXIMU	M MONTHLY INCO	ME:	5220						

	Last Comp	lete Update:	2/22/2022			AREA:	Aiea
PROJECT NAME: MAK	ALAPA M	ANOR (Co	o-op Fee)			PROJECT TYPE:	Family
ADDRESS: 99-120	Kohomua St.					PHONE: 808-487	-7114
CITY: Aiea			ZIP:	96701		FAX:	
MANAGER: Tracy	Hefferon, mana	ger		APPLY AD 3165 Waia	DRESS: lae Ave. #200, H	lonolulu,	OUT-OF-STATE
APPLY TO: Mark	Development Ind	с.		Hi. 96816			APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 808-7	35-9099		F	AX: 781-295-342		ttps://mdihawaii.co racyh@mdihawaii.c	om/makalapamanor com
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	18	0			1	2	YES
Two Bdrm:	29	0			2	4	YES
Three Bdrm:	29	0			4	6	YES
Four Bdrm:	34	0			6	8	YES
5 - Five-bdrm units (8 min Down Payment based on year. 1 bdrm = \$17,893; 3 (6/08) = \$27,105; 4 bdrm Recording, Transfer, and \$195 00 AGE CRITERIA:	size of unit and 2 bdrm = \$21,36 = \$31,977 Addtl	time of the 5; 3 bdrm Fees:	Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6 AIT LIST (Months): 24
Head of household must b	be 18 years or ol	lder				CALL EVERY	
			PARKING INFO: Parking included		PET INFO:	F	PETS OK: YES
P	ASSET LIMITS:	NONE					
AN OWN RESIDENTIA ASSET LIMIT INFO:					GENERAL I	NFO: accessible units	
			LEASE: Call for info		1 2-bdrm 3 3-bdrm 2 4-bdrm 1 5-bdrm Community		
INCOME CRITERIA:					Washer/Dr	ver hookups in unit units Section 8; r	
Maximum annual income: 1 person - \$53,700, 2 persons - \$61,350, 3 persons - \$69,000, 4 persons - \$76,650, 5 persons - \$82,800, 6 persons - \$88,950, 7 persons - \$95,050 8 persons - \$101,200			FURNISHED: Sec Partly furnishedmajor appliances only, some units NO have carpet LAS		Section 236	6/Co-op DNSE IN 2021. IPLETED UPDATE	E OCCURRED ON
-PERSON MAXIMUM MC	ONTHLY INCOM	E:	4475		k		
P-PERSONS MAXIMUM M	IONTHLY INCO	ME:	5112				

	Last Compl	ete Update:	1/24/2022			AREA:	Nuuanu	
ROJECT NAME:	MAKAMAE (HF	HA-hon)	- NOT ACCE	EPTING APP	PLICA	PROJECT TYPE:	Elderly	
ADDRESS: 2	21 South Kuakini St.					PHONE: 808-586	-9724	
	lonolulu	STATE: HI	ZIP:	96813		FAX: 586-972	8	
MANAGER:	Sol Sentons							
APPLY TO:	HPHA NOT ACCEPTING AP	PLICATIONS		Honolulu, H	School St. H 96817 EPTING APPLI	CATIONS	OUT-OF-STAT APPLICATION ACCEPTED:	
	Oahu applications offic NOT ACCEPTING AP						NO	
APPLY PHONE:	808-832-5961		F	FAX: 832-3461	EMAIL:	hphaishereforyou.oi	ġ	
Unit T	ype: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Stu	idio: 108	0		384	1	2	YES	
One Bo	drm: 16	0		500	1	4	YES	
Two Bo	drm:							
Three Bo								
Four Bo			ļ	1	ļ	J]	
AGE CRITERIA: Head of household of older, or disabled	2/2016****** or spouse must be 62	years or	PARKING INFO:	T FOR PARKING:	PET INFO:		(Months): 24 AIT LIST (Months): 60 AITLIST	
			Included		Small pets	under 25 lbs. only		
	ASSET LIMITS: ENTIAL PROPERTY:							
ASSET LIMIT INFO	:		LEASE: PREFI			IERAL INFO: EFERENCES: Domestic Violence victims; neless in transitional shelters; involuntary placed.		
						s must respond to a dence from HPHA, i		
NCOME CRITERIA	.:				manner. N	lo waitlist updates n	eeded, however,	
Acome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450			Partly furnishedmajor appliances only, no carpet If eld			applicants must update any contact info/household composition info and chea waitlist status via hpha.myhousing.com (need username/password to do so). If elder dies, under age 62 spouse may re unit. Funding: Fed Low Inc Pub Hsing 10		
PERSON MAXIMU	IM MONTHLY INCOM	Ξ:	4570		μ			
-PERSONS MAXIM	IUM MONTHLY INCOM	ΛE:	5220					

A HALE pa Dr. amos ale Cooperativ	STATE: HI	ZIP:		F	PROJECT TYPE: PHONE: 808-62 FAX: 623-39	3-3920	
amos	J	ZIP:	APPLY AD				
amos	J	ZIP:	APPLY AD	DRESS:	FAX: 623-39	20	
	/e			DRESS:			
ale Cooperativ	/e		APPLY ADDRESS: 95-141 Kipapa Drive			OUT-OF-ST/	
			00 111 14			APPLICATIO ACCEPTE	
						YES	
920		F	AX:	EMAIL:			
umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
30	696	NO	705	2	5	YES	
69	771					NO	
naximum.					ESTIMATE MAXIMUM W	(Months):	
		je.		Т	O REMAIN ON V	WAITLIST	
		WAITLIST	-		CALL EVERY (Months):		
			,		PET INFO: PETS OK: NO		
	ES	stall @ \$30/mo.	,		Only assistive animals with medical verification GENERAL INFO:		
OPERTY: Y	ES						
rmining incom	e				manager's offic	e.	
igibility.					*Note, waitlist status inquiry must be in writing, every 6 months.		
		٢					
COME CRITERIA: aximum Annual Income: 2 persons: \$45,650; persons: \$51,350; 4 persons: \$57,050; persons: \$61,600; 6 persons: \$66,200; persons: \$70,750; 8 persons: 75,300;			FURNISHED: Partly furnishedmajor appliances only.		must keep contact info updated.* *Applicants must respond to any correspondence from management, in a timely manner.*		
	69 27 DF INCOME: aximum. naximum. aximum. B years or olde erifiable reside erifiable reside ET LIMITS: Y ROPERTY: Y ermining incom ersons: \$45,66 s: \$57,050;	69 771 27 857 DF INCOME: YES aximum. aximum. aximum. aximum. aximum. aximum. B years or older. erifiable residential ET LIMITS: YES ROPERTY: YES errmining income ersons: \$45,650; s: \$57,050;	30 696 NO 69 771 NO 27 857 NO 27 857 NO DF INCOME: YES UTILITIES INCLL aximum. water Water aximum. water Water aximum. Water PARKING INFO: Parking included stall @ \$30/mo. Stall @ \$30/mo. ET LIMITS: YES LEASE: ermining income LEASE: Month-to-month erssons: \$45,650; FURNISHED: s: \$57,050; Partly furnished	30 696 NO 705 69 771 NO 843/882 27 857 NO 1050 DF INCOME: YES UTILITIES INCLUDED: aximum. maximum. Water aximum. Water Water B years or older. Water PARKING INFO: YES PARKING INFO: YES Parking included; waitlist for 2nd stall @ \$30/mo. ET LIMITS: YES LEASE: prmining income LEASE: ersons: \$45,650; :: \$57,050; Yatly furnishedmajor	30 696 NO 705 2 69 771 NO 843/882 3 27 857 NO 1050 4 DF INCOME: YES UTILITIES INCLUDED: aximum. aximum. Water aximum. waitist for PARKING: PET INFO: B years or older. WAITLIST FOR PARKING: PET INFO: PARKING INFO: YES PET INFO: Parking included; waitlist for 2nd stall @ \$30/mo. GENERAL IN Application: Pick up from Note, waitlist every 6 mon *Along with r * Star opoint FURNISHED: *Applicants r * star opoint Partly furnished-major *Applicants r	30 696 NO 705 2 5 69 771 NO 843/882 3 7 27 857 NO 1050 4 9 DF INCOME: YES UTILITIES INCLUDED: TOT, aximum. maximum. MINIMUM V ESTIMATE aximum. Water MINIMUM V ESTIMATE Byears or older. WAITLIST FOR PARKING: PET INFO: CALL EVERY PARKING INFO: YES PET INFO: PET INFO: Parking included; waitlist for 2nd stall @ \$30/mo. GENERAL INFO: Application: Pick up from manager's offic *Note, waitlist status inquiry tevery 6 months. *Along with regular waitlist up must keep contact info updat ersons: \$45,650; FURNISHED: *Applicants must respond to	

	Last Con	nplete Update:	1/24/2022			AREA:	McCully	
PROJECT NAME:	MAKUA ALII	(HPHA-hon)	- NOT AC	CEPTING AF	PLIC	PROJECT TYPE:	Elderly	
ADDRESS:	1541 Kalakaua Ave.					PHONE: 808-973	-0193	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX: 973-019	7	
MANAGER	: Loane Ah Sam			APPLY ADI 1002 North			OUT-OF-STAT	
APPLY TO	: HPHA NOT ACCEPTING	APPLICATIONS		Honolulu, H NOT ACCE	II 96817 PTING APPLI	CATIONS	APPLICATION ACCEPTED:	
APPLY ATTN	: Oahu applications on NOT ACCEPTING				EMAIL -	hphaishereforyou.or	NO	
APPLY PHONE	: 808-832-5961		l	FAX: 832-3461	EMAIL.	Tiphaishereioryou.or	y	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One E	Bdrm: 210	0		522	1	4	YES	
Two E							YES	
Four E								
AGE CRITERIA:	8/2/2016*****					MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 24 AIT LIST (Months): 60	
Head of household older, or disabled	d or spouse must be 6	62 years or	WAITLIS PARKING INFO Included	T FOR PARKING: YES	PET INFO	CALL EVERY	(Months):	
					GENERAL	INFO:		
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a house on Oahu			LEASE:			ENERAL INFO: PREFERENCES: Domestic Violence victims; nomeless in transitional shelters; involuntary displaced.		
INCOME CRITERI ncome Eligibility =	80% of AMI		FURNISHED:		correspor manner. N applicants	ts must respond to a idence from HPHA, i No waitlist updates n s must update any co shold composition in	n a timely eeded, however, ontact	
Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 5 persons - \$88,300; 7 persons - \$94,350; 3 persons - \$100,450			Partly furnished appliances only		waitlist sta need user If elder die	info/household composition info and check waitlist status via hpha.myhousing.com (will need username/password to do so). If elder dies, under age 62 spouse may rent unit. Funding: Fed Low Inc Pub Hsing 100%		
-PERSON MAXIM	UM MONTHLY INCC	DME:	4570		k			
-PERSONS MAXII	MUM MONTHLY INC	OME:	5220					

Oahu Housing Guide

		Last Compl	ete Update:	6/14/2023			AREA:	Liliha	
ROJECT NAME:	MAL	<mark>JLANI HA</mark>	LE				PROJECT TYPE:	Elderly	
ADDRESS: 1	14 Nor	th Kuakini St.					PHONE: 524-273	537-1213	
CITY:	Honolulı	l	STATE: HI	ZIP:	96817		FAX: 545-521	4	
	x 10	alledor, Reside Real Estate Co	0 /	e Lee, COS 524-273		ania St. C101		OUT-OF-STAT APPLICATIO ACCEPTED	
			Department	-	N. EAE E214	EMAIL:	slee@urban-hi.com	YES	
APPLY PHONE:	524-27	31X3009		F#	X: 545-5214				
Unit T	уре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	idio:								
One Bo		150	1410			1	2	YES	
Two Bo									
Three Bo									
Four Bo	arm:				J	J	J	NO	
roject has some So ait, as of 2022). o wait for market ro arket Rate - \$1410	ents - c			Electricity and wat	er		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
GE CRITERIA:							TO REMAIN ON W		
ead of Household ion partner 18+; a				WAITLIST	FOR PARKING:		CALL EVERY	(Months):	
usehold must be			C	PARKING INFO:	YES	PET INFO		PETS OK: YES	
	AS	SSET LIMITS:	NONE	Parking available year waiting list af guest parking ava options for \$40 m	ter move-in; ilable; other	Subject to	o property manager's approval		
AN OWN RESIDE		PROPERTY:	YES		untri.	GENERAL			
SSET LIMIT INFO:				LEASE: 1 year		rent unit. Transport Catholic C federal pr	enant dies, under a ation to Shopping a Charities Hawaii ef. Section 8 60 units	vailable through	
COME CRITERIA		-					Market 89 units + 1 unit for resident n		
aximum annual ind aximum annual ind 0% of AMI) = 1 Pe	come			FURNISHED: Partly furnishedr appliances only, c		SQFT of u Applicatio	units not available fr	om manager.	
PERSON MAXIMU			Ξ:	5446		ļ			
PERSONS MAXIM		ONTHLY INCOM	ИE:	6967					

		Last Comp	lete Update:	2/22/2022			AREA:	Pearl City
ROJECT NAME:	MAN	<mark>ANA GAR</mark>	DENS				PROJECT TYPE:	Family
ADDRESS:	949 Lue	ehu St.					PHONE: 808-455	-4225
CITY:	Pearl C	ity	STATE: HI	ZIP:	96782		FAX: 455-422	5
					APPLY AD 949 Luehu Pearl City,	St.		OUT-OF-STAT APPLICATION
APPLY TO:		-						ACCEPTED YES
		rty Managemen	t Division		FAX 455 4000	EMAIL:	Locationsrentals.co	m/affordable-
APPLY PHONE:	: 808-4:	00-4220			FAX: 455-4232		rentals.aspx	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:							
One E	Bdrm:							
Two B	Bdrm:	71	940	2.5x rent	746			YES
Three B	Bdrm:							
Four B	Bdrm:							YES
as Sliding Scale AP (rent assistan action 8 certificate oss income requi	ice) = \$ e holdei	725 minimum r rs need not mee	ent.	Water & Sewe	r		MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
				Į.			ESTIMATE	
E CRITERIA: ad of household	l must b	e 18 years or o	lder				TO REMAIN ON W CALL EVERY	-
				WAITLI PARKING INF	ST FOR PARKING:	PET INFO	: P	ETS OK: NO
				Parking includ				ę -
	A	SSET LIMITS:	NONE					
AN OWN RESID		PROPERTY:	YES			GENERAL	INFO:	
SET LIMIT INFO	D:			LEASE:			onfirmation letter mailed after receiving plication. Common laundry area. Large	
				1 year		Visitor pa	ty area. On-site resi rking. Near Pearl Cit nd Pearl Highlands.	
COME CRITERIA	A:					2019 Lind	late - Info from Webs	eito.
laximum Annual Income 60% AMI: person - \$49,020 people - \$55,980 people - \$63,000 people - \$69,960 people - \$75,600 people - \$81,180 people - \$89,760		FURNISHED: Partly Furnishe appliances, vir window curtair up.		, '	2019 Update - Info from Website NO RESPONSE IN 2021.			
ERSON MAXIMI	UM MO	NTHLY INCOM	E:	4085				
PERSONS MAXIN		ONTHLY INCO	ME:	4665				

		Last Compl	ete Update:	8/31/2023			AREA:	Manoa
OJECT NAME:	MAN	OA GARD	ENS ELDE	ERLY HOUS	ING	F	PROJECT TYPE:	Elderly
ADDRESS:	2790 K	ahaloa Dr.					PHONE: 808-762	
CITY:	Honolu	lu	STATE: HI	ZIP:	96822		FAX: 762-053	4
MANAGER	R: Reside	ent manager - Ka	ahea Fong			DRESS: n Street, Suite 30 ławaii 96814	04	OUT-OF-STAT
APPLY TO): Hawai	i Affordable Prop	perties, Inc.		Honolulu, F	iawali 90014		ACCEPTED
	l:							YES
APPLY PHONE	: 808-70	62-0101		F	AX:	EMAIL: ka	ahealanif@hawaiia	affordable.com
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	48	975	2xrent	390	1	2	YES
One	Bdrm:	31	1050	2xrent	448	2	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
% AMI rent - \$9 % AMI rent - \$1 Irket rent - \$1 c 8 certificate h E CRITERIA: applicants/resid	dents ma	ne bedroom 050 200 300 eed not meet the ust be 62 or olde by apply without w	r at time of	Water & Sewer WAITLIST PARKING INFO: 51 stalls; \$20/mo	FOR PARKING: YES		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	(Months): 2 AIT LIST (Months): 6 AITLIST
	А	SSET LIMITS:	NONE	parking also avail				
		L PROPERTY:	YES	<u> </u>		GENERAL I		
<u>SET LIMIT INF</u>	0:			LEASE: 1 year, then mont	th to month	outside hom Opened 199 Transportati		
COME CRITER	IA:			F				
aximum Annual person - 60%AM persons - 60%A p income limit fo	/II \$66,02 MI \$75,4	24, 80%AMI \$88 456, 80%AMI - \$,032 100,608	FURNISHED: Partly furnished appliances only. (window shades.				
ERSON MAXIM	IUM MO	NTHLY INCOME	E:	5502		J		
ERSONS MAXI		ONTHLY INCOM	IE:	6288				

		Last Compl	ete Update:	10/24/2023			AREA:	Chinatown	
PROJECT NAME:	MAR	IN TOWER	2				PROJECT TYPE:	Family	
ADDRESS:	60 North	n Nimitz Hwy.					PHONE: 808-528	-4460	
CITY:	Honoluli	L	STATE: HI	ZIP:	96817		FAX: 524-006	0	
MANAGER APPLY TO		sutake Affordable Pro	perties		APPLY AD 60 N. Nimit Honolulu, H	z Hwy	OUT-OF-STA APPLICATIO		
		Kim, Admin Ass						ACCEPTED: YES	
APPLY PHONE	: 808-52	8-4460		F	4X: 524-0060	EMAIL:	Email: marin@hawa https://www.marinto		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	19	1100	2637.50	430	1	2	YES	
One	Bdrm:	108	1200	2825.00	655	1	3	YES	
Two	Bdrm:	109	1330	3387.5	729	2	5	YES	
Three I	Bdrm:								
Four	Bdrm:							NO	
Studio 60%AMI \$1100, 80%AMI \$1200, 120%AMI \$ 140%AMI \$ AGE CRITERIA:	40%AMI \$1500 1750			UTILITIES INCLUDED: Water + Sewer			TOTAL UNITS: 236 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months):		
Head of household	a must be	e 18 years or of	der	-	FOR PARKING:				
				PARKING INFO: Rent does not inc	lude parking.	PET INFO: PETS OK: YES Service animals only.			
	DENTIAL	SSET LIMITS: PROPERTY:				GENERAL			
	ASSET LIMIT INFO:			LEASE: (fo 1 year Ap Pic		Accepts all forms of subsidy payments (for example: Section 8) Most units have a Lanai			
INCOME CRITERIA: 60%AMI 1 2 3 4 5			-			Pick up fr	Application: Pick up from Resident Manager's office Email: marin@hawaiiaffordable.com		
\$54,900 \$6 Units also priced a		0,560 \$78,360) and 140% AM		Partly furnished appliances only	major	NO RESF	20NSE IN 2023		
I-PERSON MAXIM	IUM MOI	NTHLY INCOMI	Ξ:	4575		ļ			
2-PERSONS MAXI	мим мо	ONTHLY INCOM	ИE:	5225					

		Last Comp	lete Update:	5/17/2023			AREA	Chinatown	
PROJECT NAME:	MAUN		OWER (CL	OSED for	application)		PROJECT TYPE	Family	
ADDRESS:	1245 Mau	unakea St.					PHONE: 808-53	7-9905	
CITY:	Honolulu		STATE: HI	ZIP:	96817		FAX: 545-16	63	
	,		,	, in the second s					
MANAGER	8: Terri Wa	asham			APPLY ADI	DRESS:		OUT-OF-STATE	
APPLY TO):							APPLICATION ACCEPTED:	
	I: Maunake	ea Tower							
APPLY PHONE	: 808-537	-9905			FAX: 545-1663	EMAIL:	sandalwoodmgt.co Maunakeatower@	om sandalwoodmgt.com	
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm:	054						YES	
	Bdrm:	254 126	0	NO NO	560	2	2	YES	
Three	!	120			142		4		
Four	Bdrm:							NO	
AGE CRITERIA:	Y ACCEP1	TING APPLIC	ATIONS	Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 60 VAIT LIST (Months): 120	
Head of household	d must be	18 years or o	lder	WAITI	IST FOR PARKING:		CALL EVERY		
				PARKING INFO: NO PET IN			T INFO: PETS OK: NO		
ļ	ASS	SET LIMITS:	NONE		ed; some guest ble; other options fee.	Assistive	animals only		
AN OWN RESI		PROPERTY:	YES			GENERAL	-		
	0.			LEASE:	onth-to-month		379 units Low Incor ection 8 100%	me Housing Tax	
						Confirmat applicatio	tion letter sent upor n	n receipt of	
INCOME CRITER	IA:			•		Applicant annually	s on wait list will red	ceive a notice	
Maximum Annual 2 persons - \$52,2! 4 persons - \$65,3(50; 3 pers			FURNISHED: Partly furnishe appliances on		annuany			
I 1-PERSON MAXIN		THLY INCOM	E:	3808		J			
2-PERSONS MAXI		NTHLY INCO	ME:	4354					

					AREA:	Palama		
DJECT NAME: MAYOR WRIG	HT HOMES	<mark>S (HPHA-ho</mark>	n) - NOT A(CEP	PROJECT TYPE:	Family		
ADDRESS: 521 North Kukui St.					PHONE: 808-832	-3153		
CITY: Honolulu	STATE: HI	ZIP:	96817		FAX: 832-318	8		
MANAGER: Cynthia Yoshida - Ma	nager		APPLY AD	DRESS:				
APPLY TO: HPHA NOT ACCEPTING AF	Ū	1002 North School St. Honolulu, HI 96817 NOT ACCEPTING AP			St. OU			
APPLY ATTN: Oahu applications offi NOT ACCEPTING AF	се					NO		
APPLY PHONE: 808-832-5961		F	AX: 832-3461	EMAIL:	hphaishereforyou.or	g		
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
Studio: One Bdrm: 24	0		5 20		2	YES		
One Bdrm: 24 Two Bdrm: 114	0		530 732	2	4	YES		
Three Bdrm: 168	0		908	3	6	YES		
Four Bdrm: 50	0		1203	4	8	YES		
EFERENCES: Domestic Violence victi meless in transitional shelters; involunts placed. E CRITERIA: ad of household must be 18 years or o	ary	Water and gas + electricity			MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY ((Months): 36 AIT LIST (Months): 66 AITLIST		
· · · · · · · · · · · · · · · · · · ·		WAITLIST PARKING INFO: Included	FOR PARKING:	PET INFO: PETS OK: YES multiple animals ok, but only one from each of				
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:				the catego one doa (u	ries listed below: inder 25 lbs) or cat			
SET LIMIT INFO:		LEASE:		*Applicant	GENERAL INFO: *Applicants must respond to any			
nnot own a house on Oahu		1 year		manner. N applicants info/house waitlist sta	orrespondence from HPHA, in a timely nanner. No waitlist updates needed, however, pplicants must update any contact nfo/household composition info, and check vaitlist status via hpha.myhousing.com (will			
COME CRITERIA:				Funding: F	name/password to c ed Low Inc Pub Hsi	ing 100%		
ome Eligibility = 80% of AMI iximum Annual Income: 1 person - \$53 iversons - \$60,900; 3 persons - \$68,500 iversons - \$76,100; 5 persons - \$82,200 iversons - \$88,300; 7 persons - \$94,350 iversons - \$100,450		FURNISHED: Partly furnished appliances only,	dmajor cryst		All convictions must be 3 yrs ago, unless it's crystal methamphetamine or sex offender NO RESPONSE IN 2023			
ERSON MAXIMUM MONTHLY INCOM	E:	4570		J.				
ERSONS MAXIMUM MONTHLY INCO	ME:	5220						

Last Complete U	pdate: 8/2/2023			AREA:	Mililani
ROJECT NAME: MEHEULA VISTA	l i i i i i i i i i i i i i i i i i i i			PROJECT TYPE:	Elderly
ADDRESS: 95-1060A Lehiwa Dr.				PHONE: 808-626	-9162
CITY: Mililani ST	ATE: HI ZIP:	96789		FAX : 427-859	1
MANAGER: Resident Manager - Bridget Julio Gomez APPLY TO: Meheula Vista	Singleton; Office Assista		ehiwa Drive		OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN: Management Office					YES
APPLY PHONE: 808-626-9162		FAX: 427-8591	EMAIL:	eahhousing.org/apa vista/	
	RENT: Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm: 75	990 2 X rent	420			
Two Bdrm:		420			
Three Bdrm:					
Four Bdrm:			ļ		YES
ENT INFO: RENT IS 30% OF INCOME: NO 0% AMGI - \$690 mo., 4 units 0% AMGI - \$990 mo, 71 units Food Stamps & Rent Subsidy may be accepted help meet min. income. No credit evaluation rec	Electricity, wa			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
GE CRITERIA:	1			ESTIMATE (
Il residents must be 55 or older.	WAITL	IST FOR PARKING:		CALL EVERY	
pplicants can apply without verifiable residenti istories.	PARKING INF		PET INFO	: P	ETS OK: NO
ASSET LIMITS: NON AN OWN RESIDENTIAL PROPERTY: YES	E come, first-se Once all stalls assigned, ten	s have been ancy restricted to	GENERAL	INFO:	
SSET LIMIT INFO: Il income from assets is counted to determine ligibility.	LEASE:	EASE: applica well as manag Picnic landsc laundry Onsite purpos		*Along with completing regular waitlist updates, applicants must keep all contact info current, as well as respond to communication from housing management in a timely manner.* Picnic area, community room, laundry room,	
ICOME CRITERIA: 0% AMI - Max income \$27,510 one person, \$3 vo persons.				Iscaped common areas, coin-operated hdry, site resident manager, visitor parking, multi- bose pavillion. ding: LIHTC, HHFDC, RHTF, and DURF	
0% AMI - Max income -\$48,850 one person, 52,400 two persons.	refrigerator, fr flooring, windo ceiling fan.	eezer, vinyl	Must have	e good landlord refer criminal background	ences and satisfy
PERSON MAXIMUM MONTHLY INCOME:	4071		Į.		
PERSONS MAXIMUM MONTHLY INCOME:	4367				

Last Complete Upd	ate: 8/8/2023		AREA: Mililani		
PROJECT NAME: MEHEULA VISTA II			PROJECT TYPE: Elderly		
ADDRESS: 95-1060B Lehiwa Dr.			PHONE: 808-626-9162		
CITY: Mililani STAT	E: HI ZIP:	96789	FAX: 427-8591		
MANAGER: Resident Manager - Bridget Sir Julio Gomez	ngleton; Office Assistant -	APPLY ADDRESS: 95-1060A Lehiwa Dri Mililani, Hawaii 96789			
APPLY TO: Meheula Vista		William, Hawaii 90703	ACCEPT	ED:	
APPLY ATTN: Management Office			YES		
APPLY PHONE: 808-626-9162	FAX: 4	EM 27-8591	AIL: eahhousing.org/apartments/meheuvista/		
Unit Type: Number of UNITS: REN	IT: Minimum INCOME Required:	SQ FT: MINIM of Peo	per Number of CAREGIVER	२	
Studio: One Bdrm: 75		420		-	
Two Bdrm:			-		
Three Bdrm:					
Four Bdrm:			YES	_	
8 units @ 30% AMGI=\$690; 60 units @ 50% AMGI=\$9190 7 units @ 60% AMGI = \$1000.	Water, sewer and elec	ricity included.	MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):	6	
AGE CRITERIA:				12	
All tenants must be 55 at the time of application submission.	WAITLIST FOR	PARKING:	CALL EVERY (Months):	6	
Applicants can apply without verifiable residential history.	PARKING INFO:		ET INFO: PETS OK: NO		
ASSET LIMITS: NONE	\$50 mo. Parking is lim once all stalls are assist occupancy is restricted	sgned, I to those			
AN OWN RESIDENTIAL PROPERTY: YES	who do not own a vehi	GENE	ERAL INFO:		
ASSET LIMIT INFO:	LEASE:	applic well a	ng with completing regular waitlist update cants must keep all contact info current, as respond to communication from hous agement in a timely manner.*	as	
	I	mana	oke-free property. On-site resident ager, Meeting & multi-purpose room,		
Maximum annual income: 30% AMI - 1 person - \$27,510, 2 persons \$31,440 50% AMI - 1 person - \$45,850; 2 person - \$52,400 60% AMI - 1 person \$55,020; 2 person \$62,880	FURNISHED: Major applicances, gar disposal, vinyl flooring, fan, window coverings	bage	l entry doors, common laundry area, area, community room.		
-PERSON MAXIMUM MONTHLY INCOME:	4585	ļ			
2-PERSONS MAXIMUM MONTHLY INCOME:	5240				

	Last Complete	Update:	8/8/2023			AREA:	Mililani	
ROJECT NAME: MEH	IEULA VISTA					PROJECT TYPE:	Elderly	
ADDRESS: 95-106	0C Lehiwa Dr.					PHONE: 808-626	-9162	
CITY: Mililani	S	TATE: HI	ZIP:	96789		FAX: 427-859	1	
	ent Manager - Bridg Gomez	et Singleton	; Office Assistant -		DRESS: ehiwa Drive		OUT-OF-STATE	
APPLY TO: Manag	-			Mililani, HI S			APPLICATION ACCEPTED:	
APPLY ATTN: Meher APPLY PHONE: 808-62		Kesident Mai	0	AX: 427-8591	EMAIL:	eahhousing.org/apa vista/		
			Minimum					
Unit Type:	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	75	990	2x Rent					
Two Bdrm:								
Three Bdrm:								
Four Bdrm:]			
RENT INFO: RENT IS 30 30% AMI Units - \$690/mo 50% AMI Units - \$990/mo 60% AMI Units - \$1000/m	nth - 8 Units nth - 60 Units	10	UTILITIES INCLU Water, Sewer, an			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6	
AGE CRITERIA:						TO REMAIN ON W	-	
Applicants must be 55 at t submission.	time of application		WAITLIST	FOR PARKING:		CALL EVERY	(Months): 6	
Applicants can apply withon history.	out verifiable residen	ntial	PARKING INFO:	NO	PET INFO	: P	ETS OK: NO	
		NE	\$50/mo. Parking once all stalls are occupancy is res	e assigned,				
AN OWN RESIDENTIA			who do not own a	a vehicle.	GENERAL	AL INFO:		
SSET LIMIT INFO:			LEASE. applican well as r			with completing regular waitlist updates, ants must keep all contact info current, as respond to communication from housing gement in a timely manner.*		
			ļ			free property. On-sit		
NCOME CRITERIA:	mo 1 porcon #00	160 por	FURNISHED:		entry door	meeting/multi-purpors, common laundry		
30% AMI - Maximum inco year., 2 persons - \$30,240 50% AMI - Maximum inco year.; 2 person - \$50,400 60% AMI - Maximum inco year; 2 person \$60,480 pe) per year. me, 1 person - \$44, per year me 1 person \$52,92	100 per	Major appliances disposal, vinyl flo fan, window cove	oring, ceiling	and comn	nunity room.		
-PERSON MAXIMUM MO	NTHLY INCOME:		3675		P			
2-PERSONS MAXIMUM M	ONTHLY INCOME:		4200					

Last Complete Up	date: 8/8/2023	AREA: Mililani
ROJECT NAME: MEHEULA VISTA IN	/	PROJECT TYPE: Elderly
ADDRESS: 95-1060D Lehiwa Drive		PHONE: 808-626-9162
CITY: Mililani STAT	E: Hi. ZIP: 9678	FAX: 427-8591
MANAGER: Resident Manager - Bridget S Julio Gomez APPLY TO: Management Office	95-10	LY ADDRESS: D60D Lehiwa Drive OUT-OF-STAT ni, Hawaii 96789 APPLICATION ACCEPTED:
APPLY ATTN:		YES
APPLY PHONE: 808-626-9162	FAX: 427-8	EMAIL: MVLP-management@eahhousing.org
Unit Type: Number of UNITS: RE	NT: Minimum INCOME Required: SQ FT	T: MINIMUM MAXIMUM CAREGIVER Number of People People: Allowed:
Studio:		
One Bdrm: 9 Two Bdrm:	90 420	
Three Bdrm:		
Four Bdrm:		NO
NT INFO: RENT IS 30% OF INCOME: NO % AMI - \$690 - 4 units % AMI - \$990 - 71 units	UTILITIES INCLUDED: Electricity, water & sewer	TOTAL UNITS: 75 MINIMUM WAIT LIST ESTIMATE (Months):
		MAXIMUM WAIT LIST ESTIMATE (Months):
GE CRITERIA: I tenants must be age 55 or older at the time of		TO REMAIN ON WAITLIST CALL EVERY (Months):
bmitting application.	WAITLIST FOR PAR PARKING INFO:	
ASSET LIMITS: NONE	\$50 mo. Parking is limited a once all stalls are assigned,	nd
AN OWN RESIDENTIAL PROPERTY: YES		GENERAL INFO:
SSET LIMIT INFO:	LEASE:	Along with completing regular waitlist updates, applicants must keep all contact info current, as well as respond to communication from housing management in a timely manner.* Picnic area, community room, laundry room, landscaped common areas, coin-operated
COME CRITERIA:		laundry, Onsite resident manager, visitor parking, multi-
aximum annual income: 0% AMI - 1 person - \$27,510, 2 person - \$31,440 0% AMI - 1 person - \$45,850, 2 person - 52,400	FURNISHED: Major appliances, garbage disposal, vinyl flooring, ceilir fan, window coverings.	purpose pavillion. Funding: LIHTC, HHFDC, RHTF, and DURF
PERSON MAXIMUM MONTHLY INCOME:	3821	Į
PERSONS MAXIMUM MONTHLY INCOME:	4367	

		Last Comp	lete Update:	8/10/2023			AREA:	Waipahu
ROJECT NAME:	MOK		STA				PROJECT TYPE:	Family
ADDRESS:	94-333	Mokuola St.					PHONE: 808-671	-4075
CITY:	Waipah	าน	STATE: H	ZIP:	96797		FAX: 671-280)7
MANAGER	R: Marler	ne Antonio			APPLY AD P.O. Box 2			OUT-OF-STATI
APPLY TO): Locati	ons			Honolulu, H		ipahu	APPLICATION ACCEPTED: YES
APPLY ATTN	I: Prope	rty Managemen	t Division					120
APPLY PHONE	: 808-6	71-4075			FAX: 671-2807		ttp://www.locations le-rentals.aspx	srentals.com/afforda
Unit	туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:							
One	Bdrm:							
Two	Bdrm:	69	1320	2.5 x rent	641	1	5	
Three	Bdrm:							
Four	Bdrm:							YES
units @ 30% AN 5 units @ 60% A Section 8 certifica ross income requ 00+ credit score	MGI for te holde uirement needed.	\$1320 rs need not mee	et the min	Water and sew	ver		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 2 AIT LIST (Months): 3
GE CRITERIA:	d must b	e 18 years or o	lder				O REMAIN ON W CALL EVERY	
				WAITLI PARKING INF	ST FOR PARKING: D: NO	PET INFO:	F	PETS OK: NO
	А	SSET LIMITS:	NONE		ee; 105 parking		mal. Emotional ne	P
AN OWN RESI						GENERAL I	NFO:	
SSET LIMIT INF	0:			LEASE:		Playground A/C, stack	, picnic area. Eac N/D.	h unit will have
							units available on	site
						Funding: R		
						Ŭ	NSE SINCE 2019	: updates taken
NCOME CRITERIA: Annual Maximum Income -30% of AMI: 1 Person \$27,510, 2 persons \$31,440, 3 persons \$35,370, 4 persons - \$39,300 60% of AMI: 1 Person \$55,020, 2 persons \$62,880,3 persons \$70,740, 4 persons \$78,600				FURNISHED:			on's website.	
PERSON MAXIM	IUM MO	NTHLY INCOM	IE:	4585		ļ.		
PERSONS MAXI		ONTHLY INCO	ME:	5240				

		Last Comp	lete Update:	6/13/2023			AREA:	Kakaako
ROJECT NAME:	NA L	<mark>EI HULU I</mark>	KUPUNA				PROJECT TYPE:	Elderly
ADDRESS:	610 Cod	oke St.					PHONE: 808-593	-1009
CITY:	Honolul	u		ZIP:	96813		FAX:	
MANAGER	: Angela	a Hoan, Propert	y manager					
APPLY TO): Na Lei	Hulu Kupuna			96813	Street #114, Ho	Dholulu, HI	OUT-OF-STA APPLICATIO ACCEPTED
APPLY ATTN	l:							YES
APPLY PHONE	: 808-59	93-1009		F	AX:		www.mdihawaii.con angela@mdihawaii.	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	75	966		350	1	2	YES
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
ark Developmen) Units @ 40% A 3 Units @ 50% A 2 Units @ 60% A No waitlist update	AMI - \$73 AMI - \$96 AMI - \$10 es neede	3.00/ month 6.00/month 999.00/month d; applicants or		UTILITIES INCLU			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA:	o whone	Wor nooceary					TO REMAIN ON W	` ´ Į
oplicants must b				WAITUST	FOR PARKING:		CALL EVERY	-
bmission. Applic sidential history,				PARKING INFO:		PET INFO:	P	PETS OK: NO
	A	SSET LIMITS:	NONE	No parking availa	ble.	Accommoo service ani	lation considered fo mals	or verifiable
AN OWN RESI		PROPERTY:	YES			GENERAL		
SSET LIMIT INF	0:			LEASE: 1 year intial lease month after that	e, then month-to-	Catholic C Open in 19 Has social coordinato	tion to Shopping av harities Hawai'i 92; has Air Conditions services on site, par r Katie Hoan	oning. art-time,
	IA:					each floor	units w/ walk in sh	ower, one on
ncome Limit 0% AMI 0% AMI	1 Perso \$35,280/ \$44,100/ \$52,920/	/yr \$40,320/ /yr \$50,400/	'yr 'yr	FURNISHED: Fully furnishedn appliances, bed, table with chairs of removed, if reque Carpets/ Linoleur	dresser, coffee (which can be ested) and A/C.	Accepts Se Can declin	IHTC, RAP ection 8 & Rent Sup e an offer of an apa nat, will need to rea	artment 2-3 times
PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	4410		J.		
PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	5040				

	Last Compl	ete Update:	10/24/2023			AREA	Nanakuli	
OJECT NAME: NAN	A'IKEOLA	SENIOR	APARTMEN	ſS		PROJECT TYPE	Elderly	
ADDRESS: 87-122	Nanaikeola St.					PHONE: 808-66	8-4702	
CITY: Waiana	ae	STATE: H	ZIP:	96792		FAX:		
MANAGER: Mike H	Klein, Compliand	e Manager		APPLY AD	DRESS:		OUT-OF-STA	
APPLY TO: Call for	or viewing and ap	oplication.					APPLICATIO ACCEPTED	
APPLY ATTN:							YES	
APPLY PHONE: 808-6	68-4702		F	AX:	EMAIL:	halealiigroup@yah	oo.com	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio: One Bdrm:	39	0		500		3		
Two Bdrm:								
Four Bdrm:							NO	
			Utility Allowance i	s Subject to Cha	nge	ESTIMATE MAXIMUM W ESTIMATE	AIT LIST	
GE CRITERIA: ead of household must b	e 62 years or ol	der:				TO REMAIN ON V CALL EVERY	-	
oouse/partner must be 18 embers must be 62. Ca	8 and older; all c	other family	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO		PETS OK: YES	
Δ	SSET LIMITS:	NONE	Parking is include available, but is li total)		If under th	e provisions of pet	policy.	
AN OWN RESIDENTIA		YES			GENERAL	INFO:		
SSET LIMIT INFO:			LEASE: 1 year; co-signer credit score is lov		EAH Inc. TDD (877) HUD Sect	Harry and Jeanette Weinberg Nanaikeola Senior Apartments, opened 3/09, managed b		
COME CRITERIA: ot to exceed 30% of Meo 33,550 for 1; \$38,350 for			FURNISHED: major applicance coverings	s, window	Associan, Resident r Trash chu 2 units are	Weinberg Foundat manager on site. te on each floor. handicapped acco MPLETED UPDAT	essibl	
PERSON MAXIMUM MO			2796					
PERSONS MAXIMUM M			3196					

	Last Comp	olete Update:	10/24/2023			AREA:	Waianae
ROJECT NAME:	NANAKULI HO	OMES (HPH	<mark>IA-lee) - N</mark>	OT ACCEPTI	NG A	PROJECT TYPE:	Family
ADDRESS:	87-1606 to 87-1612 Fa	arrington Hwy				PHONE: 808-697	-7171
CITY:	Nanakuli	STATE: HI	ZIP:	96792		FAX: 697-717	4
MANAGER	: Mandy Miyamoto			APPLY AD			
APPLY TO	: HPHA NOT ACCEPTING A	PPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications of NOT ACCEPTING A					h . h . : . h	NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461		hphaishereforyou.oi	g
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St One E	ludio:						
Two E	Bdrm:						
Three E		0		1024	3	8	YES
Four E	3drm:			J	ļ	J	
homeless in transit displaced. AGE CRITERIA:	Domestic Violence vict tional shelters; involunt 2/2/2016****** must be 18 years or c	tary	PARKING INFO	ST FOR PARKING:	PET INFO:		(Months): 36 AIT LIST (Months): 60 AITLIST (Months): ETS OK: YES
	ASSET LIMITS:	NONE	Has carport		the catego	nimals ok, but only c pries listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INFO	D:		LEASE: 1 year		correspon manner. N applicants info/house	is must respond to a dence from HPHA, i lo waitlist updates n must update any co shold composition in atus via hpha.myhou	n a timely eeded, however, ontact fo, and check
2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 person - \$53 10; 3 persons - \$68,500 10; 5 persons - \$82,200 10; 7 persons - \$94,350););	FURNISHED: Partly furnished appliances only		need user Funding: F All convict crystal me	name/password to c Fed Low Inc Pub Hs tions must be 3 yrs a ethamphetamine or s	lo so). ing 100% ago, unless it's
PERSON MAXIM	UM MONTHLY INCOM	IE:	4570		p.		
-PERSONS MAXI	MUM MONTHLY INCC	DME:	5220				

			5/17/2023			AREA:	Kakaako
OJECT NAME:	NOHONA HAL	.E				PROJECT TYPE:	Family
ADDRESS:	630 Cooke St.					PHONE: 808-65	0-3931
CITY	l Honolulu	STATE: HI	ZIP:	96813		FAX: (808) 4	65-2217
0111				90013			
MANAGEF	R: Dorene Young				DRESS: St., Honolulu, H	106912	OUT-OF-STA
APPLY TC): Nohona Hale EAH Housing				site: eahhousing		APPLICATIO ACCEPTEI
	N: Leasing Office						YES
APPLY PHONE	E: 808-650-3931			FAX: (808) 465-22		IH-Management@ Vebsite: eahhousi	
Uni	t Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	Number of People:	Allowed:
	Studio: 111	999	2x Rent	355	1	2	
	Bdrm:	0					
Three	Bdrm:	0					
	Bdrm:	0					YES
II - \$552/month 0 Micro-units (II - \$1024/mont	355 sq. ft. + 75 sq. ft. la th *	ınai) - 60%				ESTIMATE MAXIMUM W ESTIMATE	AIT LIST
E CRITERIA:					٦	TO REMAIN ON V CALL EVERY	-
•				ST FOR PARKING:			
			PARKING INFO		PET INFO		
				b: YES ed, but severely vailable. No guest	PET INFO: No pets allo		PETS OK: NO
N OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:		Parking include	b: YES ed, but severely vailable. No guest	-	owed.	PETS OK: NO
SET LIMIT INF	DENTIAL PROPERTY: O:	YES	Parking include limited or not av	b: YES ed, but severely vailable. No guest	No pets allo GENERAL I **No waitlis	owed. NFO: it updates needed	, however,
SET LIMIT INF	DENTIAL PROPERTY:	YES	Parking include limited or not av parking, either. LEASE:	b: YES ed, but severely vailable. No guest	No pets allo GENERAL I **No waitlis applicants r well as resp manageme Community	NFO: It updates needed must keep contact pond to communic int in a timely man r Features: Bicycle	l, however, t info updated, as cation from uner.* e, Moped &
SET LIMIT INF prest is conside	DENTIAL PROPERTY: FO: ered income for all asse	YES	Parking include limited or not av parking, either. LEASE: 1-year lease for month-to-month	b: YES ed, but severely vailable. No guest	No pets allo GENERAL I **No waitlis applicants r well as resp manageme Community Surfboard s Community	wed. NFO: it updates needed must keep contact pond to communic int in a timely man	I, however, t info updated, as cation from nner.* e, Moped & ding elevators nity room kitchen
SET LIMIT INF erest is conside COME CRITER % AMI: 1 perso 2 perso % AMI: 1 perso	DENTIAL PROPERTY: O: ered income for all asse	YES	Parking include limited or not as parking, either. LEASE: 1-year lease for	b: YES d, but severely vailable. No guest r first year, then h thereafter.	No pets allo GENERAL I **No waitlis applicants r well as resp manageme Community Surfboard s Community Community Manageme	NFO: t updates needed must keep contact pond to communic nt in a timely man r Features: Bicycle storage area; Build r Garden, Commu r orom/lounge area nt office ndry facilities nai	l, however, t info updated, as cation from nner.* e, Moped & ding elevators nity room kitchen
SET LIMIT INF erest is conside COME CRITER % AMI: 1 perso 2 perso % AMI: 1 perso 2 perso	DENTIAL PROPERTY: TO: ered income for all asse IA: pn/\$26,460 Max. pn/\$34,020 Max. pn/\$52,920 Max.	YES ts.	Parking include limited or not as parking, either. LEASE: 1-year lease for month-to-month FURNISHED:	b: YES d, but severely vailable. No guest r first year, then h thereafter.	No pets allo GENERAL I **No waitlis applicants r well as resp manageme Community Surfboard s Community Community Manageme On-Site lau Outdoor lar Secured en	NFO: t updates needed must keep contact pond to communic nt in a timely man r Features: Bicycle storage area; Build r Garden, Commu r orom/lounge area nt office ndry facilities nai	l, however, t info updated, as cation from nner.* e, Moped & ding elevators nity room kitchen

	Last Compl	ete Update:	10/24/2023			AREA	Nuuanu
PROJECT NAME: N	UUANU YMC	A - Men's				PROJECT TYPE	Emergency/Transi
ADDRESS: 14	l41 Pali Hwy					PHONE: 808-53	36-3556
	onolulu	STATE: HI	ZIP:	96813		FAX : 521-1181	
MANAGER: C	Cheryl Young Nina Piunno, Member	ship Coordinator		APPLY AD 1441 Pali H Honolulu, H	lwy.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN:							TES
APPLY PHONE: 8	808-536-3556			FAX: N/A	EMAIL:	cyoung@ymcahor apiunno@ymcaho	
Unit Ty	vpe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stud		45			1	1	
Two Bdi							
Three Bdr Four Bdr							YES
RENT INFO: RENT \$45/night, \$255/week Student housing avai monthly \$720	c - single w/ shared ba	athroom.	JTILITIES INC Access to fitne			MINIMUM V ESTIMATE MAXIMUM V	E (Months): 0
AGE CRITERIA:						TO REMAIN ON	-
Must be 18+. SRO			WAITLI PARKING INFO No parking	IST FOR PARKING:	PET INFO	CALL EVERY	Y (Months): 0 PETS OK: NO
AN OWN RESIDER	NTIAL PROPERTY:				GENERAL	. INFO: y Residence for sir	nale men ONLY
No income requireme	ents.		EASE: None		Check-In	2pm - 8pm -5pm	5
INCOME CRITERIA:		F	TURNISHED: Twin bed, dres & lamp.	sser, closet, desk,	Check-Ou Last Upda		
ļ							

	Last Co	mplete Update:	10/24/2023			AREA:	Waipahu
PROJECT NAME:	OASIS AT W	<mark>AIPAHU AP</mark>		S		PROJECT TYPE:	Family
ADDRESS:	94-207 Waipahu St	t.				PHONE: 808-671	-2800
CITY:) Waipahu	STATE: HI	ZIP:	96797		FAX: 676-694	5
MANAGER APPLY TO	8: Bethany Combs				Vanagement pahu Street		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	l: :: 808-671-2800			FAX: 676-6945	EMAIL:	website: oasis-towi	nhomes.com
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio: Bdrm:						
Two	Bdrm:	1900 2200	2.5xrent 2.5xrent	882 998	1	5	
Four	Bdrm:						YES
324 Units @ Mark 82 Units @ 80% A Preference given f including the 80% AGE CRITERIA: Applicant must be submission. Applicants can ap	AMGI to 60% of the total a	vailable units,	UTILITIES INC None WAITLI PARKING INFO	ST FOR PARKING:	PET INFO	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 0 AIT LIST (Months): 0 /AITLIST
history.			One stall inclue for extra stall	ded. \$100/month	month.	2 pets allowed. \$50	pet rent per
AN OWN RESIL	DENTIAL PROPERT O:		LEASE: 6 - 12 month le	ease agreements	*24 hr Fitr internet ac *Gated co Onsite lau	es - Waipahu St. & I ness room, business ccess, pool (8ft), wa mmunity w/ courtes	s room w/ free ding pool (2ft)
INCOME CRITER	IA:		FURNISHED:		Online pa Dog Park		
				igerator, blinds, c, garbage	LAST CO 5/14/2020	MPLETED UPDATE	OCCURRED ON

PROJECT NAME: ADDRESS: CITY:				ANA			PROJECT TYPE:	Emergency/Trans
ļ		ialei Homes	tead Rd.					
	Waianae						PHONE: 808-696	-4095
			STATE: HI	ZIP:	96792		FAX: 696-714	4
MANAGER	: Desiree Rot	peinson. Sit	e Manager		APPLY AD	DRESS:		
	: Alternative S		Ū					OUT-OF-STATI APPLICATION ACCEPTED:
APPLY ATTN:	:							
APPLY PHONE:	808-696-40	95		F	AX:	EMAIL:	Website: www.kahu	imana.org
Unit		mber JNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:							
One B	Bdrm:	6					4	
Two B	Bdrm:	36					6-8	
Three B	Bdrm:	6					8-10	
Four B	Bdrm:							
Program receives r coordinated entry s only. AGE CRITERIA:	system only fo	or transition	al housing	Electric and wate			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 0 AIT LIST (Months): 0 /AITLIST
For families with m homelessness.	linor children	experiencir	ig	_	FOR PARKING	PET INFO:		PETS OK:
	10057			PARKING INFO: included, one sta parking available		PET INFO.	. Г	
AN OWN RESID						J GENERAL	INFO [.]	
ASSET LIMIT INFO		I		LEASE:		Referral to Coordinate	o Ohana Ola is throu ed Entry System (C al housing only.	
	A:					managem	respond to commu ent, in a timely man f application.*	
				FURNISHED:			ONSE IN 2023	
-PERSON MAXIMI 2-PERSONS MAXIM				0				

	Last Comp	lete Update:	10/24/2023			AREA:	Kakaako
DJECT NAME:	<mark>OLA KA'ILIMA</mark>	ARTSPAC	E LOFTS			PROJECT TYPE:	Family
ADDRESS:	1025 Waimanu St.					PHONE: 808-439	-6402
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX: (808) 43	9-6402
	: EAH Housing Office Address: 1025 Honolulu HI 96814 : EAH Housing-OLA K	,		and submitt https://www	cations can be o ed at: .eahhousing.org	•	OUT-OF-STA APPLICATIC ACCEPTEI
APPLY ATTN:	N/A: Online application	ons only; paper ap	plications are no	s/artspace-l	ofts/		YES
APPLY PHONE:	0 1		F	AX: N/A	EMAIL: A N	L- IANAGEMENT@E	AHHOUSING.OF
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St One B	udio:	0	2.5x rent	680-721		3	
Two B		1539	2.5x rent	851-1016		5	
Three B		1766	2.5x rent	1265-1279		7	
Four B	Bdrm:	0		J		J	YES
293/mo o Bedrooms 50 % AMI - 6 Units	1067/mo; 60% AMI - 7 9% AMI - 23 Units - \$12 - \$1539/mo 0% AMI - 2 Unite - \$14	268/mo; 52/mo	WAITLIST PARKING INFO: Resident parking	FOR PARKING: YES	PET INFO:	ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY P 3250 Pet Deposit.	AIT LIST (Months):
	ASSET LIMITS:						
	ENTIAL PROPERTY:	NO			GENERAL II		
SET LIMIT INFC	Ј.		LEASE: 1 Year		applicants n well as resp managemen Applications	completing regula nust keep all conta ond to communica nt in a timely manr s: Online only, at .eahhousing.org/a	act info current, a ation from housin her.*
					e-lofts/	sher and dryer fac	•
1)%AMI \$25,400)% AMI \$42,300)%AMI \$50,760	\$48,350 \$54,400	\$36,250 \$60,400	FURNISHED: Major appliances refrigerator).	s only (stove and	room; Court community office; On-s	tyard with playgrou gardens; *On-site ite maintenance NSE IN 2023	nd and
	UM MONTHLY INCOM		0]		
ERSONS MAXIN	NUM MONTHLY INCO	ME:	0				

OJECT NAME: OLD	VINEYAR					PROJECT TYPE:	Family
ADDRESS: 265 So	uth Vineyard St.					PHONE: 808-524	-2731 x 3609
CITY: Honolu	lu	STATE: HI	ZIP:	96813		FAX: 545-521	4
MANAGER: Myrna	Chun, Resident	Mgr.; Sunnie L	.ee, COS 524-2731		DRESS: tania St. C101		OUT-OF-STA
APPLY TO: Urban				Honolulu, ł	HI 96813		APPLICATIO ACCEPTED YES
APPLY ATTN: Housin		Department	-	AN 545 5014	EMAIL:	slee@urban-hi.com	
APPLY PHONE: 808-52	24-2731 X 3009		F	AX: 545-5214			
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:			NO				YES
Two Bdrm:	14	0	NO		2	2	YES
Three Bdrm:	5	0	NO		3	6	YES
Four Bdrm:							NO
NT INFO: RENT IS 30	0% OF INCOME:	YES	UTILITIES INCLU	DED:		ΤΟΤΑ	L UNITS: 32
E CRITERIA:			UTILITIES INCLU Water	DED:		MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST
E CRITERIA:			Water	FOR PARKING		MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months):
E CRITERIA: ad of household must b		der	Water	FOR PARKING	PET INFO	MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST
E CRITERIA: ad of household must b AN OWN RESIDENTIAI	e 18 years or old	der	Water WAITLIST PARKING INFO: Parking included	FOR PARKING		MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (P	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months):
E CRITERIA: ad of household must b AN OWN RESIDENTIAI	e 18 years or old	der	Water WAITLIST PARKING INFO: Parking included	FOR PARKING	GENERAL	MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (P	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months):
NT INFO: RENT IS 30 E CRITERIA: ad of household must b AN OWN RESIDENTIAL SET LIMIT INFO:	e 18 years or old	der	Water WAITLIST PARKING INFO: Parking included parking is availab	FOR PARKING	GENERAL Funding: S	MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (P INFO: Section 8 100%	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months): ETS OK: NO
E CRITERIA: ad of household must b AN OWN RESIDENTIAI	e 18 years or old	der	Water WAITLIST PARKING INFO: Parking included parking is availab LEASE: 1 year	FOR PARKING	GENERAL Funding: S Application Send requ	MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (P INFO: Section 8 100%	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months): 7 ETS OK: NO
E CRITERIA: ad of household must b A N OWN RESIDENTIAI SET LIMIT INFO:	e 18 years or old	der	Water WAITLIST PARKING INFO: Parking included parking is availab LEASE:	FOR PARKING NO and guest le.	GENERAL Funding: S Application Send requ	MINIMUM W/ ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W CALL EVERY (P INFO: Section 8 100%	AIT LIST (Months): 3 AIT LIST (Months): 6 AITLIST (Months): 5 ETS OK: NO

ADDRESS: 50 Belleau Woods St. CITY: Kapolei STATE: H ZIP: 96707 MANAGER: Tanya Tehotu, Executive Director APPLY ADDRESS: 87-132 Farrington Hwy APPLY TO: Kealahou West O'ahu APPLY TO: Kealahou West O'ahu APPLY ATTN: No action required unless updating contact info APPLY PHONE: 808-782-4342 FAX: 682-5428 Unit Type: Number of UNITS; RENT: Number Minimum Number MAXIMUM MAXIMUM MAXIMUM Monore SQ FT: One Bdrm: SQ FT: Two Bdrm: SQ FT: Two Bdrm: SQ FT: Two Bdrm: SQ FT: Four Bdrm: SQ FT: Male (single occupant) dorm: Female (single occupan	а	AREA: Kalaeloa			10/24/2023	ete Update:	Last Complete Update				
CITY: Kapolei STATE: H ZIP: 96707 MANAGER: Tanya Tehotu, Executive Director APPLY ADDRESS: 87-132 Farrington Hwy OUT-C APPLY TO: Kealahou West O'ahu 87-132 Farrington Hwy OUT-C APPLY APPLY ATTN: No action required unless updating contact info EMAIL: 1.tehotu@kwohawail.org APPLY PHONE: 808-782-4342 FAX: 682-5428 EMAIL: 1.tehotu@kwohawail.org Minimum INCOME SQ FT: Number of of People Number of People: Allow Studio: Introduction SQ FT: Introduction MAXIMUM MAXIMUM MAXIMUM Three Bdrm: Introduction SQ FT: Introduction Male Introduction Allow Three Bdrm: Introduction Introduction Introduction Number Number MINIMUM WAIT LIST Cocupant) dom: Four Bdrm: Introduction Introduction MAXIMUM WAIT LIST ESTIMATE (Months): Large family unit (4-6pp) Allow TOTAL UNITS: Introduction Introduction MAXIMUM WAIT LIST Large family unit (4-6pp) </th <th>ncy/Transi</th> <th>PROJECT TYPE: Emergency</th> <th></th> <th>nning</th> <th><mark>a New Beg</mark>i</th> <th>- Hope for</th> <th>LAU'ENA ·</th> <th>ROJECT NAME: ONE</th>	ncy/Transi	PROJECT TYPE: Emergency		nning	<mark>a New Beg</mark> i	- Hope for	LAU'ENA ·	ROJECT NAME: ONE			
CITY: Kapolei STATE: HI ZIP: 96707 MANAGER: Tanya Tehotu, Executive Director APPLY ADDRESS: 87-132 Farrington Hwy OUT-C APPLY TO: Kealahou West O'ahu B6792 APPL APPLY ATTN: No action required unless updating contact info EMAIL: t.tehotu@kwohawaii.org APPLY PHONE: 808-782-4342 FAX: 682-5428 Unit Type: Number of UNITS: RENT: Minimum NCOME SQ FT: One Bdrm: Implement Two Bdrm: Implement Two Bdrm: Implement Two Bdrm: Implement Targe family unit (4-6ppl) Implement All are subject to 30% household total income AXIMUM WAIT LIST AGE CRITERIA: Cortexpand form pleiduity of placement. Head of household must be 18 at time of application. Application is completed upon eligibility of placement. Application is number of eligibility of placement. PARKING: PARKING INFO: PET INFO: PETS OK:		PHONE: 808-782-4342					eau Woods St.	ADDRESS: 50 Belle			
87-132 Farrington Hwy Waianae, HI 96792 OUT-G APPLY APPLY TO: Kealahou West O'ahu Waianae, HI 96792 APPLY ATTN: No action required unless updating contact info EMAIL: t.tehotu@kwohawaii.org APPLY PHONE: 808-782-4342 FAX: 682-5428 Unit Type: Number of UNITS: RENT: Studio: SQ FT: Studio: Minimum Two Bdrm: SQ FT: Two Bdrm: Minimum Four Bdrm: Minimum Four Bdrm: Minimum Fax: SQ FT: Minimum MAXIMUM Mainimum Maximud Minimum Maximud Two Bdrm: Minimum Four Bdrm: Minimum Four Bdrm: Minimum Fax: SQ FT: Maie (single occupant) dorm; Female (single cocupant) dorm; Female (single cocupant) dorm; Female (single cocupant) dorm; Female (single cocupant) dorm; Semale (single cocupant) dorm; CALE VERY Adde do household must be 18 at time of application Maximud Wait LIST Core ParkIng: Fared of household mus		FAX: 682-5428		TATE: HI ZIP: 96707			i	CITY: Kapolei			
ACC APPLY ATTN: No action required unless updating contact info APPLY PHONE: 808-782-4342 FAX: 682-5428 Unit Type: Number of UNITS: RENT: REN	OF-STATE LICATION		rrington Hwy	87-132 Fa		ive Director					
APPLY PHONE: 808-782-4342 FAX: 682-5428 Unit Type: Number of UNITS: RENT: Minimum INCOME Required: SQ FT: Number of People One Bdrm: Image: SQ FT: Two Bdrm: Image: SQ FT: Three Bdrm: Image: SQ FT: Four Bdrm: Image: SQ FT: Four Bdrm: Image: SQ FT: Three Bdrm: Image: SQ FT: Total UNITS: Number of People: Mall Image: SQ FT: Image: SQ FT: Mall Image: SQ FT: Image: SQ FT: Mall Image: SQ FT: Image: SQ FT: Malt:	CEPTED:	ACCEF			act info	ess undating or					
Unit Type: Number of UNITS: RENT: INCOME Required: SQ FT: Number of People Number of People: CAREC Allow Studio: One Bdrm: Income Incom Income Income </td <td></td> <td>t.tehotu@kwohawaii.org</td> <td>EMAIL: 1</td> <td>4X: 682-5428</td> <td></td> <td></td> <td>·</td> <td></td>		t.tehotu@kwohawaii.org	EMAIL: 1	4X: 682-5428			·				
One Bdrm:		Number of CAREGIV	Number	SQ FT:	INCOME	RENT:		Unit Type:			
Two Bdrm: Image: Second se								Studio:			
Three Bdrm: Image: Sector State											
Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO Male (single occupant) dorm; Female (single occupant) dorm; Studio (1-3 ppl); ADA studio (1-3ppl) UTILITIES INCLUDED: TOTAL UNITS: Male (single occupant) dorm; Studio (1-3 ppl); ADA studio (1-3ppl) All MINIMUM WAIT LIST ESTIMATE (Months): Couple studio (1-3ppl); Family unit (1-4ppl) Large family unit (4-6ppl) *All are subject to 30% household total income AGE CRITERIA: TO REMAIN ON WAITLIST ESTIMATE (Months): MAXIMUM WAIT LIST CALL EVERY (Months): Head of household must be 18 at time of application Application is completed upon eligibility of placement. WAITLIST FOR PARKING: PET INFO: PETS OK:											
Male (single occupant) dorm; Female (single occupant) dorm; Studio (1-3 ppl); ADA studio (1-3ppl) All MINIMUM WAIT LIST ESTIMATE (Months): Couple studio (1-3ppl); Family unit (1-4ppl) Large family unit (4-6ppl) MAXIMUM WAIT LIST ESTIMATE (Months): *All are subject to 30% household total income MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): AGE CRITERIA: TO REMAIN ON WAITLIST CALL EVERY (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): Head of household must be 18 at time of application Application is completed upon eligibility of placement. WAITLIST FOR PARKING: PET INFO: PARKING INFO: PET INFO: PETS OK:	10	NO									
		ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): PETS OK:	PET INFO:	FOR PARKING	WAITLIST PARKING INFO:	gle dio (1-3ppl)) ome application placement.	rm; Female (sing -3 ppl); ADA stu amily unit (1-4ppl busehold total inc pe 18 at time of a upon eligibility of fiable residential) \$150/mo	Male (single occupant) dor occupant) dorm; Studio (1- Couple studio (1-3ppl); Fai Large family unit (4-6ppl) *All are subject to 30% hor AGE CRITERIA: Head of household must b Application is completed u Applicants must have verif *Multi-family unit (6-12ppl)			
AN OWN RESIDENTIAL PROPERTY: GENERAL INFO: ASSET LIMIT INFO: Need to go through Kealahou West O'al	ahu	-					L PROPERTY:				
LEASE: Must be homeless - preference to home Waianae Coast, but will place from othe Accepts families with minor child, couple	eless on er areas	omeless - preference to homeles Coast, but will place from other a	Must be ho Waianae C		EASE:						
INCOME CRITERIA: FURNISHED: Accepts failules with millior child, couples adult children (18+), couples with no chi and singles Accepts failules with millior child, couples with no chi and singles adult children (18+), couples with no chi and singles Application: Pick up from Kealahou West Oahu loca NO RESPONSE SINCE 2022	nildren,	Iren (18+), couples with no childr es n: om Kealahou West Oahu locatior	adult childr and singles Application Pick up fro		URNISHED:			INCOME CRITERIA:			

	Last Compl	ete Update:	10/24/2023			AREA:	Kalaeloa
PROJECT NAME:	ONEMALU - Tr	ansitiona	al shelter			PROJECT TYPE:	Transitional
ADDRESS:	48 Belleau Woods St.					PHONE: 808-682	-5868
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 682-542	8
			ļ	00101			
MANAGER	R: Tanya Tehotu						
APPLY TO):			P.O. Box 75 Kapolei, HI			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	1:						NO
APPLY PHONE	<u>:</u> 682-5868		F	AX: 682-5428	EMAIL:		
Unit	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	itudio: 11			267	2	4	
One	Bdrm: 5			329	3	5	
Two	Bdrm: 26			535	4	8	
Three	Bdrm:						
Four	Bdrm:						
Unit size determin Must be family wit age. *All units rent base Market rate: \$750/	ENT IS 30% OF INCOME ned by family size. No Si th at least one child 0 to ed on 30% of client incor /month	ngles. 17 years of	UTILITIES INCLU Water and electric			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months):
AGE CRITERIA:						TO REMAIN ON W	
	d must be 18 years or ol	der at time	WAITLIST	FOR PARKING:		CALL EVERY	
	vided to head of househo	ld upon	PARKING INFO:		PET INFO	; F	PETS OK: NO
placement via CE	ASSET LIMITS:	NONE	Must provide curr check, insurance, license.				
AN OWN RESID	DENTIAL PROPERTY:		I		GENERAL	INFO: 3 clearance, inc verit	ind dischility
None	0.		LEASE:		verified		
			4-month program may be renewed		Communa unit. Expl Honolulu	must participate in al kitchen, but micro ress bus from Kapol rakes app. 30 min F	+ minifridge in ei transit center to
INCOME CRITER	IA: ication of monthly incom	e that	FURNISHED:		Stipend 1		
confirms the appli	cant's ability to afford the meeting basic needs of	monthly	Yes. Beds allowe inspection. No la furniture.		A homele	Units - studio (1) + 2 ss verification letter f referral accepts pla	needs to be
					NO RESP	ONSE SINCE 2022	
1-PERSON MAYIM	IUM MONTHLY INCOM	=.	J		J		

Last Complete Update:	5/8/2023	AREA: Waianae
PROJECT NAME: PAI'OLU KAIAULU (Wai	anae Civic Center)	PROJECT TYPE: Emergency/Trans
ADDRESS: 85-638 Farrington Hwy		PHONE: 808-664-1400 808-696-
CITY: Waianae STATE: HI	ZIP: 96792	FAX: 696-6711
, , , , , , , , , , , , , , , , , , , ,	,	
MANAGER: Program Manager: Charles Robinso Executive Director: Tanya Brown	n APPLY ADDR	ESS: OUT-OF-STATE APPLICATION
APPLY TO: Need to be assessed by Service Pro Info below) if homeless unsheltered.		APPLICATION ACCEPTED: NO
APPLY ATTN:		NO
APPLY PHONE: 808-688-7631	FAX: 696-6711	EMAIL: CRobinson2@us.vets.org
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required: SQ FT:	MINIMUM Number of People People: CAREGIVER Allowed:
Studio:		
One Bdrm:		
Two Bdrm:		
Four Bdrm:		
RENT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INCLUDED:	TOTAL UNITS: 102
Small (45) - 8 ftx10 ft (80 sq ft) \$120 - 1 person Medium (20) - 10ftx12ft (120 sq ft) \$150 - 2 persons Large (32) - 12ftx12ft (144 sq ft) \$150 - 3 persons	Electricity, water, and sewer. Public telephones on-site.	MINIMUM WAIT LIST ESTIMATE (Months):
No Transitional Units. Emergency Shelter only.		MAXIMUM WAIT LIST ESTIMATE (Months):
AGE CRITERIA:		
0-60+, minors are accompanied by legal guardians	WAITLIST FOR PARKING:	CALL EVERY (Months):
	PARKING INFO: NO Parking for vehicles with valid	PET INFO: PETS OK: NO
ASSET LIMITS: NONE	safety check, registration, & insurance.	
AN OWN RESIDENTIAL PROPERTY:		GENERAL INFO:
ASSET LIMIT INFO:	LEASE:	Service Providers:
None	None	Waianae Coast Comprehensive Health Center: (p) 696-1559; 696-1586
		Waianae Community Outreach: (p) 696-5667
INCOME CRITERIA:	,	Waikiki Health Center - Care-A-Van
None	FURNISHED:	Administered by US Veterans Initiative
	1 bed, additional cots. Shelving/drawer may be provided. No power outlets. Coin operated W/D on-site.	Cubicle like units. Community bathrooms, Community Meals
]		

		Last Comp	ete Update:	9/27/2023			AREA	Kapolei
PROJECT NAME:	PALE		RACE PH	. 1			PROJECT TYPE:	Family
ADDRESS:	92-1074	Palahia St.					PHONE: 808-67	2-5602
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 672-56	46
	-	Akiona - Comi ement Speciali	nunity Director sts Co.		APPLY AD 1330 S. Be 96814	DRESS: eretania St. #20	0 Hon. HI	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Afforda	ble Housing D	ept.					YES
APPLY PHONE	: 808-94	9-7611 x131			FAX: 946-0572	EMAIL:	mschousing@haw	aii.rr.com
	Type: tudio:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: Bdrm:	76	1294	2363	819			YES
Three I		7	1468	2700	1037			YES
RENT INFO: RE	11 13 30			UTILITIES INC	JLUDED.		MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:	d must be	a 18 years or o	der	r.			ESTIMATE TO REMAIN ON V CALL EVERY	VAITLIST
	u must be			WAITL PARKING INF	IST FOR PARKING:	PET INFO:		PETS OK: NO
ļ				2 stalls per un		Service ar		
AN OWN RESIE		SSET LIMITS: PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	0:			LEASE: 1 year		Funding: Accepts S	RHTF ection 8	
				l'your		Credit che	cks through Equifa	x
	IA:							
60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 4 persons \$78360				FURNISHED: Partly furnishe appliances on				
I-PERSON MAXIM		NTHLY INCOM	E:	4575		I.		
2-PERSONS MAXI	мим мс	ONTHLY INCO	ME:	5225				

		Last Compl	ete Update:	9/27/2023			AREA:	Kapolei
PROJECT NAME:	PALE	EHUA TER		l. 2		F	ROJECT TYPE:	Family
ADDRESS:	92-1074	4 Palahia St.				F	PHONE: 808-67	2-5602
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 672-56	02
	,		ļ	,				
MANAGER	: Angela	a Akiona - Comr	nunity Director	r APPLY ADDRESS: 1330 S. Beretania St			Hon HI	OUT-OF-STATE
APPLY TO): Manag	gement Speciali	sts Co.		96814			APPLICATION ACCEPTED:
APPLY ATTN	I: Afforda	able Housing De	ept.					YES
	: 808-94	19-7611 x131		F	AX: 946-0572	EMAIL: m	schousing@hawa	aii.rr.com
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:							
Three	Bdrm:	57	1260	2.25xRent 2.25xRent	948			
		7	1400					
	Bdrm:				J	ļ		J
RENT INFO: RE				UTILITIES INCLU			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 /AIT LIST (Months): 36
AGE CRITERIA: Head of household	d must b	e 18 years or ol	der				O REMAIN ON V CALL EVERY	-
				WAITLIS PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: NO
				Parking included	, , , , , , , , , , , , , , , , , , ,	Service anim	nals ok	
AN OWN RESI		SSET LIMITS:				J GENERAL IN	IFO:	
ASSET LIMIT INF		FROFERTI.		LEASE:			Room, Picnic Are	ea
				1 year			e 2 bathrooms through Equifax tion 8	
INCOME CRITER	IA:					Funding: RI	HTF	
60% of AMI: 1 person \$54900 2 person \$62700 3 person \$70560 4 persons \$78360	1			FURNISHED: Partly furnished- appliances only	-major			
I 1-PERSON MAXIM		NTHLY INCOM	E:	4575		J		
2-PERSONS MAXI	MUM M	ONTHLY INCOM	ME:	5225				

	Last Compl	ete Update:	12/15/2021			AREA	Palolo		
OJECT NAME: PAL	<mark>OLO VALL</mark>	EY HOME	S (HPHA-ho	on) - NOT A	CCEP	PROJECT TYPE:	Family		
ADDRESS: 2107 A	he St.					PHONE: 808-73	3-9113		
CITY: Honolu	lu	STATE: HI	ZIP:	96816		FAX:			
MANAGER: Kelsie	Tilton						OUT-OF-STA		
APPLY TO: HPHA NOT	ACCEPTING AP	PLICATIONS		Honolulu, H	II 96817	chool St. 96817 TING APPLICATIONS			
APPLY ATTN: Oahu NOT	applications offic						NO		
APPLY PHONE: 808-8	32-5961		F	AX: 832-3461	EMAIL:	nphaishereforyou.c	org		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
Studio: One Bdrm:	8	0		513		4	YES		
Two Bdrm:	34	0		676	2	6	YES		
Three Bdrm:	40	0		1045	3	8	YES		
Four Bdrm:	32	0		1147	4	10	YES		
inimum Rent: \$0 for Fec	5*****		and gas			ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	/AIT LIST (Months): 6		
ead of household must b	be 18 years or old	der		FOR PARKING:		CALL EVERY			
			PARKING INFO:	NO	PET INFO: With Perm		PETS OK: YES		
A	SSET LIMITS:	NONE							
AN OWN RESIDENTIA	L PROPERTY:	NO	ļ		GENERAL				
SSET LIMIT INFO: annot own a house on C	Pahu		LEASE: h			PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary displaced.			
COME CRITERIA:			<u> </u>		Ŭ	ed Low Inc Pub He	0		
come Eligibility = 80% of aximum Annual Income persons - \$60,900; 3 pe persons - \$76,100; 5 pe persons - \$88,300; 7 pe persons - \$100,450	: 1 person - \$53,2 rsons - \$68,500; rsons - \$82,200;		FURNISHED: Partly furnished- appliances only,			thamphetamine or			
PERSON MAXIMUM MC	NTHLY INCOME	: :	4570		ų				
PERSONS MAXIMUM M	ONTHLY INCOM	IE:	5220						

	Last Comp	lete Update:	5/16/2023			AREA:	Palolo
OJECT NAME: PALO	OLO VALL	EY HOME	ES I			PROJECT TYPE:	Family
ADDRESS: 2170 A	he St.					PHONE: 808-733	-8650
CITY: Honolul	u	STATE: HI	ZIP:	96816		FAX: 735-521	1
,			P				
MANAGER: Wand				APPLY AD 2170 Ahe S Honolulu, F	St.		OUT-OF-STAT APPLICATIO
APPLY TO: Mutual Homes		ciation of Hawa	ii dba Palolo Valley	rionolaid, r			ACCEPTED
APPLY ATTN:					EMAIL	wsamson@mutual-	housing org
APPLY PHONE: 808-73	33-8650		F	AX: 735-5211	EWAIL.	wsamson@mutual-	nousing.org
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							YES
One Bdrm: Two Bdrm:	9	668 849		485	2	4	YES
Three Bdrm:	9	1068		860	3	8	YES
Four Bdrm:							NO
iters names are taken fr	rom Section 8 w	aitlist				MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 3
E CRITERIA:						TO REMAIN ON W	
ad of household must b plying.				FOR PARKING	-	CALL EVERY	
plicants must have verif	iable residentia	history.	PARKING INFO: Every unit given of	only 1 stall	PET INFO: Service An	F imals Only - MD No	PETS OK: NO
A	SSET LIMITS:	YES					
AN OWN RESIDENTIAL	PROPERTY:	NO			GENERAL		
SET LIMIT INFO: nnot own a house. Ass			LEASE:		Funding: L Funding: I		
plicable income for adm it for continued occupar		imes that	1 year; then mont		Applicatior Available t	ns: hrough Section 8 of	ffice
COME CRITERIA:							
ximum Annual Income: ersons - \$31,350; 3 per ersons - \$39,180; 5 per ersons - \$45,450; 7 per ersons - \$51,720; 9 per	sons - \$35,280 sons - \$42,330 sons - \$48,600		FURNISHED: Partly furnished appliances only	major			
ERSON MAXIMUM MO	NTHLY INCOM	E:	2287		r		
ERSONS MAXIMUM M	ONTHLY INCO	ME:	2612				

		Last Compl	ete Update:	5/16/2023			AREA:	Palolo	
OJECT NAME:	PAL	OLO VALL	EY HOME	ES II			PROJECT TYPE:	Family	
ADDRESS:	2170 AI	he St.					PHONE: 808-733	-8650	
CITY:	l Honolul	u	STATE: HI	I ZIP: 96816			FAX: 735-5211		
-			<u> </u>	ļ	00010				
MANAGER		a Samson, Prop	perty Mgr.		APPLY AD 2170 Ahe S			OUT-OF-STAT	
APPLY TO		I Housing Assoc		ii dba Palolo Valley	Honolulu, H			APPLICATION ACCEPTED:	
APPLY ATTN	:								
APPLY PHONE	: 808-73	33-8650		F	AX: 735-5211	EMAIL:	wsamson@mutual-ł	nousing.org	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	5Bdrm 8	1511		1345	5	12		
One I	Bdrm:	16	668		478	1	4	YES	
Two B	Bdrm:	64	849		647	2	6	YES	
Three I	Bdrm:	76	1068		880	3	8	YES	
Four I	Bdrm:	60	1286		1100	4	10	NO	
lled from Sectio full handicappe ailable		ist additional partia	l units				MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (Months): 3	
E CRITERIA:							TO REMAIN ON W		
ad of household	d must b	e 18 years or ol	der when	WAITLIST	FOR PARKING:	_	CALL EVERY (
plicants must ha	ave verif	iable residential	history.	PARKING INFO: Every unit given of	anhy 1 atall	PET INFO	: P nimal ONLY - MD no	ETS OK: NO	
	•	SSET LIMITS:	VES		Jily I Stall	Service Al		ite required	
AN OWN RESID		PROPERTY:				GENERAL	INFO:		
SET LIMIT INFO	0:			LEASE:		Funding: I	LIHTC		
Cannot own a house. Assets limited to two times the applicable income for admission or three times that imit for continued occupancy.				1 year; then mont	th-to-month		ing: RHTF cations available through Section 8 ram		
COME CRITERI	A			1		NO RESP	ONSE 2021		
aximum Annual persons - \$31,35 persons - \$39,18 persons - \$45,45	Income: 50; 3 per 30; 5 per 50; 7 per	1 person - \$27, sons - \$35,280; sons - \$42,330; sons - \$48,600; sons - \$54,852;	450;	FURNISHED: Partly furnished appliances only	major				
ERSON MAXIM		NTHLY INCOM		2287					

	Last Compl	ete Update:	12/15/2021			AREA:	McCully	
OJECT NAME: PAC	OAKALANI ((HPHA-ho	n) - NOT AC		APPLI	PROJECT TYPE:	Elderly	
ADDRESS: 1583	Kalakaua Ave.					PHONE: 808-97	3-0193	
CITY: Hono	lulu	STATE: HI	ZIP:	96826		FAX: 973-01	97	
MANAGER: loan	e Ah Sam			APPLY AD			OUT-OF-STAT	
APPLY TO: HPH NOT	IA ACCEPTING AP	PLICATIONS		Honolulu, H		ICATIONS	APPLICATIO ACCEPTED	
APPLY ATTN: Oah NOT	u applications offic				EMAU .	EMAIL: hphaishereforyou.or		
APPLY PHONE: 808-	832-5961		F	AX: 832-3461	EMAIL.	nphaishereioryou.c	ng	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	90	0		315	1	2	YES	
One Bdrm:	60	0		465	1	4	YES	
Two Bdrm:								
Three Bdrm:	1							
Four Bdrm:								
extension of the second		years or	WAITLIST PARKING INFO:	FOR PARKING	PET INFO:	ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	/AIT LIST (Months): 6	
			Included		Small pets	under 25 lbs. only		
	ASSET LIMITS:							
AN OWN RESIDENTI SET LIMIT INFO: Innot own a house on			LEASE:		homeless displaced.	NCES: Domestic V	ers; involuntary	
COME CRITERIA:						0	0	
come Eligibility = 80% (aximum Annual Incom persons - \$60,900; 3 p persons - \$76,100; 5 p persons - \$88,300; 7 p persons - \$100,450	e: 1 person - \$53,; ersons - \$68,500; ersons - \$82,200;		FURNISHED: Partly furnished appliances only,		All convictions must be 3 yrs ago, unless it's crystal methamphetamine or sex offender			
ERSON MAXIMUM M	ONTHLY INCOM	Ξ:	4570		k			
ERSONS MAXIMUM	MONTHLY INCOM	ME:	5220					

Last Complete Updat	e: 10/19/2023		AREA	Chinatown	
ROJECT NAME: PAUAHI HALE			PROJECT TYPE	Family	
ADDRESS: 126 North Pauahi St.			PHONE: 808-52	4-7233	
CITY: Honolulu STATE:	HI ZIP:	96817	FAX:		
MANAGER: Bill Hanrahan, Manager	-	APPLY ADDRESS: 1221 Kapiolani Blvd., Si	uite 345	OUT-OF-STAT	
APPLY TO: Mental Health Kokua				APPLICATIO	
APPLY ATTN: Melby Albano					
APPLY PHONE: 808-737-2523	FAX:	EMAI	L: malbano@mhkhav	waii.org	
Unit Type: Number of UNITS: RENT	: Minimum INCOME Required: S	Q FT: MINIMUM Number of People	Number of	CAREGIVER Allowed:	
Studio: 38 760		120 1	1	YES	
One Bdrm:					
Two Bdrm:					
Four Bdrm:					
ENT INFO: RENT IS 30% OF INCOME: YES linimum rent \$300. Maximum rent \$760 5 units must be offered to those eligible to pay the 300 minimum rent payment. Security deposit is quivalent of one month rent.	UTILITIES INCLUDED: Electricity and water		TOTAL UNITS: 38 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):		
GE CRITERIA:	_		TO REMAIN ON V		
INGLE ROOM OCCUPANCY (SRO) fust be over the age of 18	WAITLIST FOR PARKING INFO:	PARKING:	CALL EVERY	' (Months):	
	Not included. Available door for \$40/month.				
AN OWN RESIDENTIAL PROPERTY: YES SSET LIMIT INFO:	LEASE:	4 story	AL INFO: walk-up. Single room	occupancy.	
	1 year	kitchen	men's and women's on each floor g: Unknown	bathrooms and	
ICOME CRITERIA:		Applicat	tion:		
laximum Annual Income: 1 person - \$40,260 (below 0% area AMI)	FURNISHED:		from Manager's Offic	ce	
PERSON MAXIMUM MONTHLY INCOME:	3355				

		Last Comp	lete Update:	4/19/2024			AREA	Makiki	
PROJECT NAME:	PIIKC	OI VISTA					PROJECT TYPE:	Elderly	
ADDRESS:	, 1326 Pii	koi St.					PHONE: 808-585-8882		
CITY:	Honolulu	ı	STATE: HI	ZIP:	96814		FAX: 521-68	97	
MANAGER	R: Paul Ho	obson			APPLY ADD		Je, Honolulu, HI OUT-OF-STA		
APPLY TO): Locatio	ons			96815			APPLICATION ACCEPTED:	
APPLY ATTN	I: Propert	ty Managemen	t Division					YES	
APPLY PHONE	: 808-58	5-8882			FAX: 808-521-6897	k	http://www.location ble-rentals.aspx	srentals.com/afforda	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	itudio:								
	Bdrm:	47	1225	2xrent	420				
	Bdrm:					<u> </u>			
Three									
Four	Bdrm:			ļ		J		YES	
RENT INFO: RE Food stamps can Section 8 certifica gross income requ	be used t te holders	to meet min. in	come.	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 3	
AGE CRITERIA:							TO REMAIN ON V		
All residents must Does not require v			orv	WAITL	IST FOR PARKING:		CALL EVERY	(Months):	
	ernable i		,	PARKING INF		PET INFO:		PETS OK: NO	
ļ	AS	SSET LIMITS:	NONE	all stalls are a occupancy is					
AN OWN RESI		PROPERTY:	YES	barking availa		GENERAL	INFO: 2007; Funding: LII	ITC	
All income from as eligibility.	ssets is c	ounted to dete	rmine	LEASE:		Has Victor Community and reside	y garden, Locked e / room for activitie nt manager on site hort walk to groce	entry doors, s, Social Worker e, Laundry room on	
INCOME CRITER						Application			
50% AMI: 1 perso	n \$48,750	0; 2 persons \${	55,700		edmajor nyl floording, AC, d garbage disposal.	Download Ask manag Send require envelope	from website jement to mail it est with self-addre m Manager's office		
P 1-PERSON MAXIM	IUM MON	THLY INCOM	E:	4063		¢			
2-PERSONS MAXI		ONTHLY INCO	ME:	4642					

						AREA: PROJECT TYPE:	Elderly	
ADDRESS: 626 Co						PHONE: 808-744) ·	
						FAX: 744-6582		
CITY: Honolu	u	STATE: HI	ZIP:	96813		1744-000	2	
MANAGER: DeAn	n Auwae, Manag	ger						
APPLY TO: Hawa	i Affordable Pro	operties Inc.		626 Coral S Honolulu, H	St. Ste. #507 II 96813		OUT-OF-STAT APPLICATION ACCEPTED:	
APPLY ATTN:							NO	
APPLY PHONE: 808-7	44-6063		F	AX: 744-6582		http://hawaiiaffordal properties/		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:	128	1350	2.5 x rent	425	1	2	YES	
One Bdrm:	135	1493	2.5 x rent	454	1	2	YES	
Two Bdrm:								
Three Bdrm:								
Four Bdrm:							YES	
o action required unless formation or in response pplicaton fee - \$0						ESTIMATE MAXIMUM W ESTIMATE		
GE CRITERIA:						TO REMAIN ON W		
II household members m				FOR PARKING:		CALL EVERY	-	
pplication. Caregiver allo oes not require verifiable			PARKING INFO:	YES	PET INFO:	P	ETS OK: YES	
Ą	SSET LIMITS:	NONE	2 yr wait for on-s month; parking a Kakaako for \$44.	t Kauhale .88/mo (call				
AN OWN RESIDENTIA	PROPERTY:	NO	District prking - 5	97-1789)	GENERAL	INFO:		
SSET LIMIT INFO: annot own a majority inte	erest in resident	ial property	LEASE:			ers are allowed in both studio and 1 bdrm D letter; cannot work outside home.		
fee simple or leasehold nit within the same count	usuitable for a		1 year		Studio has Services: I	all system; Secure e a lanai; 3 elevators Meals on Wheels m ation to Shopping av	eal site	
ICOME CRITERIA:					Catholic C	harities Hawaii State Rental Assista	-	
Maximum Annual Income: person - \$78,000 sons - \$89,120			FURNISHED: Partly furnished appliances, drap cable ready, tub	es, carpet,	opened 19 Rec deck			
		the						
lote: Minimum Income R ninimum rent	equired is 2.5 x		amount of) walk-	III SHOWEI				

		Last Comp	lete Update:	12/15/2021			AREA:	Kapalama		
PROJECT NAME:	PUA	HALA HOI	MES I (HP	HA) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family		
ADDRESS:	1638 - 1	1699 Ahiahi Pl.					PHONE: 808-832	-3336		
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 832-338	5		
MANAGER APPLY TO			PLICATIONS		APPLY AD 1002 North Honolulu, H NOT AC	School St. II 96817	PLICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:		
	(Oahu	CCEPTING AF					: hphaishereforyou.or	NO		
APPLY PHONE	: 808-83	32-5961			FAX: 832-3461					
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:		
	Bdrm:			, 						
	Bdrm:									
Three							-			
	Bdrm:	14	0		1116	4	10	YES		
RENT INFO: RE 14 five bdrm units Minimum Rent: Ou Three Bdrm - \$15 funding source: st	. (1202 s ne Bdrm 2; Four E	qft) - \$108; Two Bo		UTILITIES INCLUDED: Water and allowance for electricity and gas			MINIMUM W/ ESTIMATE (MAXIMUM W/	(Months): 36 AIT LIST		
		/Ე/ᲔᲘ1ፎ********	****	ji			ESTIMATE (
AGE CRITERIA: Head of household	d must b	e 18 years or o	lder				TO REMAIN ON W CALL EVERY (
				PARKING INF	ST FOR PARKING:	PET INFO	D: P	ETS OK: NO		
1	•	SSET LIMITS:		Included						
AN OWN RESI						GENERA	L INFO:			
ASSET LIMIT INFO: Cannot own a house on Oahu. Assets limited to two times the applicable income for admission or three times that limit for continued occupancy.				LEASE: 1 year		1.)The E Veterans Families was dete	TATE HOUSING PREFERENCES:)The Elderly 2.) The Displaced 3.) Disabled eterans w/ service connected disabilities 4.) amilies of deceased veterans whose death as determined to be service connected. 5.)			
INCOME CRITER 50% AMI: 1 perso persons \$42,800;	n \$33,30		38,050; 3	FURNISHED: Partly furnishedmajor Fundin			eterans 6.) Families re nal Shelters 7.) All oth State Pub Hsing 100 ctions must be 3 yrs c	ners - Indefinate		
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	3450		<u> </u>				
2-PERSONS MAXI	мим мо	ONTHLY INCO	ME:	4895						

		Last Comp	lete Update:	12/15/2021			AREA	Kapalama	
PROJECT NAME:	PUA	HALA HO	MES II (HF	PHA) - NOT .	ACCEPTING		PROJECT TYPE:	Family	
ADDRESS:	, Ahiahi F	기.		-			PHONE: 808-83	2-3336	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 322-06	32	
				,					
MANAGER APPLY TO		/iggett .CCEPTING AF	PPLICATIONS		APPLY ADI NOT ACCE 1002 North Honolulu, H	PTING APPLI School St.	PPLICATIONS OUT-OF-ST t. APPLICAT ACCEPT		
		CCEPTING AF						NO	
APPLY PHONE		applications of 2-5961	fice)	I	FAX: 832-3461	EMAIL:	hphaishereforyou.c	org	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
One	Bdrm:								
Two	Bdrm:	12	0		676	2	6	YES	
Three	Bdrm:	8	0		940	3	8	YES	
Four	Bdrm:								
RENT INFO: RE Minimum Rent: Ou Three Bdrm - \$152 funding source: st	ne Bdrm 2; Four B ate	- \$108; Two Bo Bdrm - \$180	drm - \$128;	UTILITIES INCL Water and allow and gas	ance for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36	
AGE CRITERIA:							TO REMAIN ON V		
Head of household	d must be	e 18 years or o	lder	WAITLIS	T FOR PARKING:		CALL EVERY	(Months): 12	
				PARKING INFO		PET INFO:		PETS OK: NO	
r	A	SSET LIMITS:	YES						
AN OWN RESI		PROPERTY:	NO			GENERAL	INFO:		
ASSET LIMIT INF Cannot own a hou times the applicab times that limit for	ise on Oa le incom	e for admissior		LEASE: 1 year		1.)The Eld Veterans Families d was deter	OUSING PREFERI derly 2.) The Displa w/ service connecte of deceased veterar mined to be service erans 6.) Families r	ced 3.) Disabled ed disabilities 4.) hs whose death e connected. 5.)	
INCOME CRITER						Transition	al Shelters 7.) All o	thers - Indefinate	
50% AMI: 1 perso persons \$42,800;			38,050; 3	FURNISHED: Partly furnished appliances only		Funding: S	State Pub Hsing 10 tions must be 3 yrs		
I 1-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	3450		Į			
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	4895					

		Last Comp	lete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUA	HALA HO	MES III (H	PHA) NOT .	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahiahi F	기.					PHONE: 808-832	-3336
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 832-338	5
MANAGER APPLY TO			PLICATIONS		APPLY ADI NOT ACCE 1002 North Honolulu, H	PTING APPLI School St.	ICATIONS	OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN	Oahu a	ACCEPTING AF			FAX: 832-3461		hphaishereforyou.o	NO
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							YES
	Bdrm:	10	0		504	1	4	YES
	Bdrm:	14	0		676 940	2	6	YES
Three		16	0		340			
Four	Bdrm:			ļ	J	1	ļ	
RENT INFO: RE Minimum Rent: Or Three Bdrm - \$15 funding source sta	ne Bdrm 2; Four E ate	- \$108; Two Bo 3drm - \$180	Irm - \$128;	UTILITIES INC Water and allow and gas	LUDED: wance for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST (Months): 60
AGE CRITERIA: Head of household	d must b	e 18 years or o	lder				TO REMAIN ON W CALL EVERY	
				PARKING INFO	ST FOR PARKING:	PET INFO) <u>:</u> F	PETS OK: NO
-	А	SSET LIMITS:	YES					
AN OWN RESII ASSET LIMIT INF	DENTIAL					GENERAL	_ INFO: OUSING PREFERE	NCES:
Cannot own a hou times the applicab times that limit for	le incom	e for admissior		LEASE: 1 year		Veterans Families was deter	derly 2.) The Displac w/ service connecte of deceased veteran mined to be service terans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITER							nal Shelters 7.) All ot	
50% AMI: 1 perso persons \$42,800;			38,050; 3	FURNISHED: Partly furnished appliances only		Funding:	State Pub Hsing 100 tions must be 3 yrs o	
I 1-PERSON MAXIN	IUM MO	NTHLY INCOM	E:	3450		Į		
2-PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	4895				

	Last Comp	lete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HO	MES IV (H	PHA) - NOT		G AP	PROJECT TYPE:	Family
ADDRESS:	School St. and Lanakil	a Ave.				PHONE: 808-832	2-3336
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 322-063	32
	: Julie Wiggett	PLICATIONS		APPLY AD NOT ACCE 1002 North Honolulu, H	PTING APPLIC	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	HPHA I: NOT ACCEPTING AF Oahu applications offi : 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	NO
				FAX: 032-3401			
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 4	0		519		4	YES
	Bdrm: 32	0		662	2	6	YES
Three		0		808	3	8	YES
Four	Bdrm:						
Minimum Rent: Or Three Bdrm - \$15	NT IS 30% OF INCOME ne Bdrm - \$108; Two Bo 2 SED 8/2/2016*********	Irm - \$128;	UTILITIES INCL Water and allow and gas	vance for electricity		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 36 AIT LIST (Months): 60
Head of household	d must be 18 years or o	lder	WAITLIS	T FOR PARKING:		CALL EVERY	(Months): 12
			PARKING INFO	:	PET INFO:	F	PETS OK: NO
Į.	ASSET LIMITS:	YES					
	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
times the applicab	O: ise on Oahu. Assets lin le income for admissior continued occupancy.		LEASE: 1 year		1.)The Eld Veterans v Families o was deterr	DUSING PREFERE erly 2.) The Displac w/ service connecte f deceased veteran nined to be service erans 6.) Families re	ed 3.) Disabled d disabilities 4.) s whose death connected. 5.)
INCOME CRITERIA: 50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550.			FURNISHED: Partly furnishedmajor appliances only		Transitiona Wait Funding: S	State Pub Hsing 100	hers - Indefinate
P 1-PERSON MAXIN	IUM MONTHLY INCOM	E:	3450		μ		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	4895				

APPLY TO: APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-841-5657 Two Bdrm: 62 0 RENT: RENT		Last Compl	lete Update:	11/24/2021			AREA	Palama
CITY: Honolulu STATE: HI ZIP: 96817 MANAGER: APPLY ADDRESS: Get application onsite; bring I.D. OUT-OF-APPLIC APPLY TO: Get application onsite; bring I.D. OUT-OF-APPLIC APPLY ATTN: YE APPLY PHONE: 808-841-5657 FAX: Unit Type: Number Minimum IV Dit Type: Number Minimum IV Dit Type: Number FAX: Unit Type: Number Minimum IV Dit Type: Number Get application onsite; bring I.D. One Bdrm: 62 0 NO Three Bdrm: Get 0 NO 565 2 4 YES Three Bdrm: Intil Tites includeed: NO NO 565 2 4 YES Total UNITS: VILILITIES INCLUDED: NO TOTAL UNITS: EXTENTIONED	PROJECT NAME:	PUALANI MAN	OR			F	PROJECT TYPE	Family
CITY: Honolulu STATE: HI ZIP: 96817 MANAGER: APPLY ADDRESS: Get application onsite; bring I.D. OUT-OF- APPLIC APPLY TO: Get application onsite; bring I.D. OUT-OF- APPLIC APPLY ATTN: YE APPLY PHONE: 808-841-5657 FAX: EMAIL: None Unit Type: Number of UNITS: RENT: Minimum NCOME Required: SQ FT: MINIMUM Number of People MAXIMUM Number of People CAREGIV Allower Studio: Image: Signature SQ FT: MINIMUM Number of of People CAREGIV Allower One Bdrm: 62 0 NO 565 2 4 YES Three Bdrm: Image: Signature Image: Signature Image: Signature NO TOTAL UNITS: Signature	ADDRESS:	1216 Pua Ln.				PHONE: 808-841-5657		
Get application onsite; bring I.D. OUT-OF-APPLIC ACCEI APPLY TO: APPLY APPLY ATTN: EMAIL: None APPLY PHONE: 808-841-5657 FAX: Unit Type: Number of UNITS: RENT: Minimum NCOME SQ FT: Of People One Bdrm: 62 One Bdrm: 62 Two Bdrm: Image: Comparison of the state of t	CITY:	l Honolulu	STATE: HI	ZIP:	96817		FAX:	
APPLY ATTN: EMAIL: None APPLY PHONE: 808-841-5657 FAX: Unit Type: Number of UNITS: RENT: Minimum INCOME Required: SQ FT: MINIMUM Number of People: CAREGIVAL Studio: Image: Studio: Image: SQ FT: Image: SQ FT: MINIMUM Number of People: CAREGIVAL One Bdrm: 62 0 NO 565 2 4 YES Two Bdrm: Image: SQ FT: Image: SQ FT: <td< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th>I.D.</th><th>OUT-OF-STATE APPLICATION ACCEPTED:</th></td<>							I.D.	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY PHONE: 808-841-5657 EMAIL: None Unit Type: Number of UNITS: RENT: Minimum Number of People MAXIMUM Number of People: CAREGIV Allowed Studio: Image: Studio:<		N:						YES
Onit Type: Number of UNITS: RENT: INCOME Required: SQ FT: Number of People Number of People: CAREGIV Allower Studio: 0 NO 565 2 4 YES One Bdrm: 62 0 NO 565 2 4 YES Two Bdrm:				F	AX:	EMAIL: N	one	
One Bdrm: 62 0 NO 565 2 4 YES Two Bdrm:		of UNITS:	RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS: 62 *To remain on waitlist WPITE IN every 6 months Water Water TOTAL UNITS: 62	One	Bdrm: 62	0	NO	565	2	4	YES
*To remain on waitlist W/PITE IN even 6 months								NO
MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):	5				JDED:		MINIMUM W ESTIMATE MAXIMUM W	/AIT LIST (Months): 48
AGE CRITERIA: TO REMAIN ON WAITLIST	AGE CRITERIA:					т		
	Head of household	d must be 18 years or ol	F	PARKING INFO:	NO	PET INFO:		(Months): 6 PETS OK: NO
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES		DENTIAL PROPERTY:	NONE	Parking Included				
ASSET LIMIT INFO: LEASE: Funding: Section 8 100%.		:O:		-		Funding: Se	ection 8 100%.	
INCOME CRITERIA:	INCOME CRITER	IA:						
Maximum Annual Income: 50% AMI. FURNISHED: Changing 3/2015 to new HUD guidelines Partly furnishedmajor appliances only.			- F	Partly furnished-				

	Last C	omplete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUMEHAN	<mark>A (HPHA-hon</mark>) - NOT AC	CEPTING AF	PLIC	PROJECT TYPE:	Elderly
	1212 Kinau St.					PHONE: 808-586	6-9724
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX: 973-019	97
)	I I	,				
MANAGER	: Sol Sentous						
APPLY TO		G APPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
	: Oahu application	s office G APPLICATIONS					NO
APPLY PHONE				FAX: 832-3461	EMAIL:	hphaishereforyou.o	ng
Unit	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 98	0		454	1	2	YES
One	Bdrm: 40	0		553	1	4	YES
Two I	Bdrm: 1	0					
Three	Bdrm:						
Four I	Bdrm:						
AGE CRITERIA:	8/2/2016***** d must be 62 years	or older, or	ļ			ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	AIT LIST (Months): 60 /AITLIST
disabled			WAITLIS PARKING INFO		PET INFO:		PETS OK: YES
			Included	··		under 25 lbs. only	
	ASSET LIM	ITS: NONE					
	DENTIAL PROPER	TY: NO			GENERAL		
ASSET LIMIT INF Cannot own a hou	-		LEASE: 1 year		homeless displaced.	NCES: Domestic \ in transitional shelt es, under age 62 sp ing: Fed Low Inc Pu	ers; involuntary ouse may rent
INCOME CRITERI	IA:					ions must be 3 yrs	-
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - 00; 3 persons - \$68 00; 5 persons - \$82 00; 7 persons - \$94	9,500; 2,200;	FURNISHED: Partly furnished appliances only			thamphetamine or	
I-PERSON MAXIM	IUM MONTHLY INC	COME:	4570		p.		
2-PERSONS MAXI	MUM MONTHLY II	NCOME:	5220				

	Last Comp	lete Update:	12/15/2021			AREA:	Makiki	
PROJECT NAME: PUN	CHBOWL	HOMES (I	HPHA-hon) -	NOT ACCE	EPTIN	PROJECT TYPE:	Elderly	
ADDRESS: 730 Ca	ptain Cook Ave.					PHONE: 808-586	-9724	
CITY: Honolul	lu	STATE: HI	ZIP:	96813		FAX: 586-972	8	
MANAGER: Sol Se	entous			APPLY AD 1002 North			OUT-OF-STATI	
APPLY TO: HPHA		PLICATIONS		Honolulu, H NOT ACCE	II 96817 PTING APPLI	CATIONS	APPLICATION ACCEPTED:	
APPLY ATTN: Oahu		се					NO	
APPLY PHONE: 808-83			F	AX: 832-3461	EMAIL:	hphaishereforyou.or	g	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:							YES	
One Bdrm: Two Bdrm:	97	0		711	2	6	YES	
Three Bdrm:	1	0						
Four Bdrm:								
********CLOSED 8/2/2016 AGE CRITERIA: Head of household or spor older, or disabled		years or	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY	AIT LIST (Months): 60	
Δ	SSET LIMITS:	NONE	Included		Small pets	s under 25 lbs. only		
AN OWN RESIDENTIAL					GENERAL	. INFO:		
ASSET LIMIT INFO: Cannot own a house on Oahu			LEASE: 1 year		GENERAL INFO: PREFERENCES: Domesti homeless in transitional sh displaced.			
			<u> </u>			es, under age 62 spo ling: Fed Low Inc Pu		
INCOME CRITERIA: ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450			FURNISHED: Partly furnished appliances only	major	crystal me	tions must be 3 yrs a ethamphetamine or s ation to Shopping av charities Hawaii	sex offender	
I-PERSON MAXIMUM MO	NTHLY INCOM	E:	4570		ļ.			
2-PERSONS MAXIMUM M	ONTHLY INCO	ME:	5220					

	Last Compl	ete Update:	12/15/2021			AREA:	Aiea	
		(HPHA-ho	on) - NOT A		APP	PROJECT TYPE:	Family	
ADDRESS: 99-132	Kohomua St.					PHONE: 808-483	-2550	
CITY: Aiea		STATE: HI	ZIP:	96701		FAX: 483-255	2	
MANAGER: Marcu	us Asami			APPLY AD	DRESS: School St.		OUT-OF-STAT	
APPLY TO: HPHA NOT	A ACCEPTING AP	PLICATIONS		Honolulu, H NOT ACCE	H 96817 PTING APPLIC	ATIONS	APPLICATION ACCEPTED:	
APPLY ATTN: Oahu	applications offic	ce PLICATIONS					NO	
APPLY PHONE: 808-8			F	AX: 832-3461	EMAIL: h	phaishereforyou.o	rg	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:							YES	
One Bdrm:	48	0		550	2	6	YES	
Three Bdrm:	88	0		1080	3	8	YES	
Four Bdrm:	38	0		1158	4	10	YES	
linimum Rent: \$0 for Feo			Electricity and wa			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36	
GE CRITERIA: ead of household must b	be 18 vears or ol	der				TO REMAIN ON W CALL EVERY		
	,		WAITLIS	T FOR PARKING	PET INFO:	F	ETS OK: YES	
1	ASSET LIMITS:	NONE	Included		the categor	mals ok, but only c ies listed below: nder 25 lbs) or cat	one from each of	
, AN OWN RESIDENTIA					, GENERAL I			
ASSET LIMIT INFO:			LEASE: 1 year		PREFERENCES: Domestic Violence victims; homeless in transitional shelters; involuntary displaced. Funding: Fed Low Inc Pub Hsing 100%			
ICOME CRITERIA:			ļ			ons must be 3 yrs a hamphetamine or s		
come Eligibility = 80% of laximum Annual Income persons - \$60,900; 3 pe persons - \$76,100; 5 pe persons - \$88,300; 7 pe persons - \$100,450	: 1 person - \$53, rsons - \$68,500; rsons - \$82,200;		FURNISHED: Partly furnished- appliances only,					
PERSON MAXIMUM MC	NTHLY INCOM	≣:	4570		k			
PERSONS MAXIMUM M	IONTHLY INCOM	/E:	5220					

		Last Compl	ete Update:	4/23/2024			AREA:	Downtown
OJECT NAME:		<mark>EN EMMA</mark>	APARTM	ENTS			PROJECT TYPE:	Family
ADDRESS:	1270 Q	ueen Emma St.					PHONE: 808-646	6-2660
CITY:	l Honolul	u	STATE: HI	ZIP:	96813		FAX: 808-490)-0707
		ica Malabey Real Estate			APPLY ADD 1270 Queen Honolulu, Ha	Emma Street		OUT-OF-STAT APPLICATION
APPLY ATTN	-							ACCEPTED
APPLY PHONE	: 808-64	46-2660			FAX: 808-490-0707		www.queenemmaa manager@queener ~	partments.com nmaapartments.co
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER Allowed:
	tudio:	32	1238	Required:	369-405	of People	People:	
	Bdrm:	13	1300	2 x rent	446-680		3	
	Bdrm:	26	1562	2 x rent	618-850	2	5	
Three		20	1302	2 × 1611	010-030		3	
Four								YES
	bann.			ļ	J	1	ļ	I ILS
HTC; Income rest action 8 vouchers studios only at 3 aposit equal to o	strictions s accept 0% AMI ne mont	ted. - \$550 mo.		UTILITIES INC	-		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
E CRITERIA:							TO REMAIN ON W	Į.
e 18				WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
				PARKING INFO		PET INFO:		PETS OK: NO
	А	SSET LIMITS:		Limited, on-site	e parking available	Pets not al	lowed.	
AN OWN RESID	DENTIAL	PROPERTY:				GENERAL	INFO:	
SET LIMIT INF	0:			LEASE: 12 month		ceiling wind wood-style site manag call emerge	social spaces, new dows, 9 ft. ceilings, flooring, some uni jement, laundry fac ency maintenance,	walk-in closets, ts have lanais, on- ilities, elevator, on- WiFi in common
COME CRITERI	IA:			r			iness center/compu- v lounges, secured	
9% AMI units - m 27,510; 2 person 9% AMI maximur 52,880, 3 - \$70,7	- \$31,44 m incom	e for 1 - 55,020,	2 -	FURNISHED: Major applianc window coverin counter tops	es, microwave, ngs, granite			
ERSON MAXIM	IUM MO	NTHLY INCOMI	E:	4585		J		
ERSONS MAXI		ONTHLY INCOM	ИE:	5240				

Last Complete Update	8/7/2023			AREA: Chinatown
OJECT NAME: RHF PAUAHI KUPUNA	A HALE		PROJEC	T TYPE: Elderly
ADDRESS: 167 North Pauahi St.			PHONE:	808-524-5844
CITY: Honolulu STATE:	HI ZIP:	96817	FAX:	949-2554
MANAGER: Sue Stacey		APPLY AD 911 N. Stud		OUT-OF-STAT
APPLY TO: Retirement Housing Foundation		Long Beach (562) 257-5	n, CA. 90815-4900 100	
APPLY ATTN:				YES
APPLY PHONE: 808-524-5844	FA	X :	EMAIL: www.rhf.or	g
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:		CAREGIVER Allowed:
Studio: 12 0		539		
One Bdrm: 36 0 Two Bdrm:		579		2 YES
Three Bdrm:	_			
Four Bdrm:				YES
023 Update: No action required unless updating ontact information	Water, sewer & tra	sh	ES MAX	IMUM WAIT LIST TIMATE (Months): 90 IMUM WAIT LIST TIMATE (Months): 120
GE CRITERIA:				IN ON WAITLIST
lead of household must be 62 years or older, or isabled (mobility impaired)	WAITLIST F	OR PARKING:	CALL	EVERY (Months):
	PARKING INFO:		PET INFO:	PETS OK: YES
	Parking not availab	ле		
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO	-		GENERAL INFO:	
SSET LIMIT INFO:	LEASE:		Caregivers are allow	ed with MD letter; can work erly tenant dies, under age
	1 year		62 spouse may rent	
			Services: meal site	next door
ICOME CRITERIA:	_		Funding: Section 202	2
aximum Annual Income: 1 person - \$34,750; 2 ersons - \$39,700.	FURNISHED: Partly furnishedm appliances only. C		waitlist. Application: Ask management to	cant to keep application on mail it lf-addressed stamped

	lete Update:	8/7/2023			AREA	McCully		
HF PHILIP S	TREET AP	ARTMENTS		F	PROJECT TYPE	Elderly		
05 Philip St.				F	PHONE: 808-94	9-2555 808-69		
onolulu	STATE: HI	ZIP:	96826	FAX: 949-2554				
Sue Stacey, Manager	- Suite 200					OUT-OF-STA		
Retirement Housing F	Foundation				00	APPLICATIO ACCEPTED		
						YES		
08-949-2555		F	AX: 949-2554	EMAIL: w	ww.rhf.org			
rpe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
lio: 10	0	NO	550	1	1	YES		
rm: 24	0	NO	575	1	2	YES		
rm:								
rm:								
rm:						NO		
ion required unless u	pdating				MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	: (Months): 9 VAIT LIST : (Months): 12		
ousehold must be ac	je 62+,				CALL EVERY			
be 18+. Other memb 3+.	pers of the	PARKING INFO:		PET INFO:		PETS OK: YES		
		Available		One small p		Ľ		
				I GENERAL IN	NFO:			
		LEASE:						
		1 year, then mon	th to month	62 spouse m	nay rent unit.	-		
				Opened 199	03			
				Funding: Se	ction 202 100%			
laximum Annual Income: 1 person - \$33,550; persons - \$38,350.			major	Application: Ask management to mail it Send request with self-addressed stamped envelope Pick up from manager's office				
	305 Philip St. onolulu Sue Stacey, Manager Retirement Housing F 308-949-2555 (pe: Number of UNITS: Jio: 10 rm: 24 rm: 10 rm: 24 rm: 10 ousehold must be age be 18+. Other membrands+. ASSET LIMITS: NTIAL PROPERTY: xome: 1 person - \$33	305 Philip St. onolulu STATE: HI Sue Stacey, Manager - Suite 200 Retirement Housing Foundation 308-949-2555 7Pe: Number of UNITS: 300: 10 0 7m: 24 0 rm: 24 0 rm: 10 10 0 rm: 24 0 rm: 10 10 0 Is 30% OF INCOME: YES ion required unless updating or in response to communication ousehold must be age 62+, be 18+. Other members of the B+. NO NO Some: 1 person - \$33,550;	Denolulu STATE: HI ZIP: Sue Stacey, Manager - Suite 200 Retirement Housing Foundation 208-949-2555 F. 209: 10 NO 210: 10 0 24 0 NO NO rm: 24 0 NO rm: 24 0 NO rm: 24 10 0 rm: 24 10 0 rm: 24 10 NO Required	2005 Philip St. conclulu STATE: HI ZIP: 96826 Sue Stacey, Manager - Suite 200 APPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PPLY AD 911 N. Stu Long Beac (562) 257-4 Sue Stacey, Manager - Suite 200 PARKING NOME Itic: 10 0 NO 550 TIN: 24 0 NO 575 TIM: 24 0 Superstring transported to communication UTILITIES INCLUDED: Outschold must be age 62+, be 18+. VAITLIST FOR	State Philip St. Image: State St	505 Philip St. PHONE: 508-944 conclulu STATE: H ZIP: 96826 Sue Stacey, Manager - Suite 200 APPLY ADDRESS: 911 N. Studebaker Rd. Sue Stacey, Manager - Suite 200 APPLY ADDRESS: 911 N. Studebaker Rd. Sue Stacey, Manager - Suite 200 APPLY ADDRESS: 911 N. Studebaker Rd. Sue Stacey, Manager - Suite 200 EMAIL: www.rhf.org Retirement Housing Foundation SQ FT: Minimum INCOME SQ FT: Number of of People Ite: 10 0 NO Ite: 10 NO 550 Ite: 10 NO 575 Ite: Ite: Ite:<		

	Last Comp	lete Update:	5/4/2023			AREA:	Chinatown
DJECT NAME: RIVI	<mark>ER PAUAH</mark>	<mark>l (Not tak</mark>	ing application	ons)		PROJECT TYPE:	Family
ADDRESS: 1155 F	River St.					PHONE: 808-89	2-1812
CITY: Honol	ulu		ZIP:	96817		FAX: None	
MANAGER: Luis;				APPLY AD Not current	DRESS: Ily taking applic	ations	OUT-OF-STA APPLICATIO
APPLY TO: River			-				ACCEPTEI YES
APPLY ATTN: Certii		specialist (LV r		AX: 892-1801	EMAIL:		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	41	0	NO		1	3	YES
Two Bdrm:	7	0	NO		3	5	YES
Three Bdrm:							
Four Bdrm:							
			Electricity and wa	ter		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
E CRITERIA:							
ad of household must	be 18 years or ol	der	-	FOR PARKING		CALL EVERY	
			PARKING INFO: No parking.		PET INFO:		PETS OK: NO
	ASSET LIMITS:	NONE					
N OWN RESIDENTIA					GENERAL	INFO:	
SET LIMIT INFO:			LEASE:		Funding: S	Section 8 100%	
			1 year		3 handica	p units 2 - 1 bdrm 8	& 1 - 2 bdrms
OME CRITERIA:			1				
ximum Annual Income ersons - \$38,000; 3 pe ersons - \$47,500; 5 pe	ersons - \$42,750;	;	FURNISHED: Partly furnished appliances only. I				
ERSON MAXIMUM MO	ONTHLY INCOM	E:	2771]		
ERSONS MAXIMUM N		ME:	3167				

	Last Comp	lete Update:	6/29/2023			AREA	Makiki	
ROJECT NAME: ROY	I	PROJECT TYPE: Elderly						
ADDRESS: 728 Kir	nau St.					PHONE: 808-52	1-3678	
CITY: Honolu	lu	STATE: HI	ZIP:	96813		FAX: 521-29	31	
MANAGER: Natas	ha James, Corr	imunity Manager	,	APPLY AD				
APPLY TO: Royal	Kinau Apartme	nts		728 Kinau	Street, Honolulu,	HI 96813	OUT-OF-STAT APPLICATION ACCEPTED:	
APPLY ATTN:							YES	
APPLY PHONE: 808-5	21-3678		F	AX: 521-2931	EMAIL: ro m		r@royalkinauapts.cc	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One Bdrm:	60	1032	1.5 x rent	541		2	YES	
Two Bdrm:	24	1468	1.5 x rent	741	1	4	YES	
Three Bdrm:								
Four Bdrm:							NO	
No action is required unles information. Longer wait f Section 8 certificate holde	or two-bedrooo	m units.	Electric, water, ar			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6	
AGE CRITERIA:					Т	O REMAIN ON V CALL EVERY	-	
All residents must be 62 o	rolder			FOR PARKING:	-			
			PARKING INFO: Parking included, some covered	YES 57 spaces	PET INFO:		PETS OK: NO	
A AN OWN RESIDENTIA	SSET LIMITS:							
ASSET LIMIT INFO:	ET KOI EKTT.		LEASE:		opened 199	GENERAL INFO: opened 1998		
			1 year; then mon	th-to-month	units have l Funding: Ll Funding: R	HTC, Section 8		
			<u> </u>		8 handicapp	bed access		
INCOME CRITERIA: 50% AMI: 1 person \$45,250; 2 persons \$52,250; 3 persons \$54,250: 4 persons \$60,250			FURNISHED: See Partly furnishedmajor en appliances only Pic En		envelope Pick up fron Email reque	st with self addre	e	
-PERSON MAXIMUM MO	NTHLY INCOM	IE:	3771		p.			
-PERSONS MAXIMUM M	ONTHLY INCO	ME:	4354					

		Last Comp	lete Update:	11/24/2021		AREA: Downtown		
PROJECT NAME:	SAFE	HAVEN/	MENTAL H	IEALTH KOI	KUA		PROJECT TYPE: Emergency/T	
ADDRESS:	, 126 N. F	Pauahi St.					PHONE: 808-524-7233	
CITY:	l Honolulı	u	STATE: HI	ZIP:	96817		FAX: 524-035	3
	,		ļ	J				
MANAGER	: Bill Har	nrahan						
APPLY TO		Health Kokua Monday - Frida	y from 1pm - 4p	m	126 N Paua Honolulu, H			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:							NO
APPLY PHONE	: 808-52	4-7233		F/	AX: 524-0353	EMAIL:		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:	25	<u> </u>		80		1	
One E	Bdrm:							
Two E	Bdrm:							
Three E								
Four E	Bdrm:]	ļ	
RENT INFO: REI	NT IS 30	% OF INCOME		UTILITIES INCLU	DED:		ΤΟΤΑ	L UNITS: 25
Rooms with share Includes 3 meals p	ber day.		•	All utilities			MINIMUM W	
Homeless mentally depression). 18 yrs			enia,				MAXIMUM W	AIT LIST
				Į.			ESTIMATE	· · [
AGE CRITERIA: Head of household	d must be	e 18 years or ol	der		FOR PARKING:		TO REMAIN ON W CALL EVERY	
				PARKING INFO:	FOR PARKING.	PET INFO	: F	ETS OK: NO
				No parking				
	AS	SSET LIMITS:				ļ		
AN OWN RESID		PROPERTY:	NO	<u> </u>		GENERAL	-	
ASSET LIMIT INFO	0:			LEASE:		Clients m mentally i	ust be homeless and II.	d severely
				Month-to-month		Funding: I AUW, C 8	HUD Continuum of (C Esg; State HPH, residential, Case M	A; other services
J				<u> </u>		Plcmt Ser	vices,	
INCOME CRITERI						Activity Co rehab,	enter (waiting list) - p med/psych svcs, ch	provides social nemical
Max income limits	- None			FURNISHED: Bed, dresser		depend integration	dency treatment, co	mmunity
						Intake M-	es.	
							ONSE IN 2023	
]				ļ		J		

Last Complete U	Jpdate: 12/15/2021			AREA:	Salt Lake
PROJECT NAME: SALT LAKE (HPH)	A-hon) - NOT AC	CEPTING APP	<mark>PS</mark>	PROJECT TYPE:	Family
ADDRESS: 2907 Ala Ilima St.				PHONE: 808-483	3-2550
CITY: Honolulu ST	ATE: HI ZIP:	96818		FAX: 483-25	52
J	μμ				
MANAGER: Marcus Asami					
APPLY TO: HPHA NOT ACCEPTING APPLIC	ATIONS	1002 North S Honolulu, HI NOT ACCEF		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN: Oahu applications office					NO
NOT ACCEPTING APPLIC APPLY PHONE: 808-832-5961	ATIONS	FAX: 832-3461	EMAIL: h	nphaishereforyou.c	org
	Minimum		MINIMUM	MAXIMUM	
Unit Type: Number of UNITS: F	RENT: INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
Studio:					
One Bdrm: 28	0	642	1	4	YES
Two Bdrm:					
Three Bdrm:					
Four Bdrm:		J	J	1	
******** CLOSED 8/2/2016***** AGE CRITERIA: Head of household must be 18 years or older	WAITL PARKING INF	IST FOR PARKING: O:	PET INFO:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 36 /AIT LIST (Months): 60 /AITLIST
ļ	Included			imals ok, but only ies listed below:	one from each of
ASSET LIMITS: NON	IE			nder 25 lbs) or cat	t
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO:	ļ		GENERAL	INFO: NCES: Domestic \	/iolence victims:
Cannot own a house on Oahu	LEASE:		homeless i displaced.	ed Low Inc Pub Hs	ers; involuntary
INCOME CRITERIA:				ons must be 3 yrs hamphetamine or	
ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450	FURNISHED: Partly furnishe appliances on	edmajor ly some carpets			
I-PERSON MAXIMUM MONTHLY INCOME:	4570		μ		
2-PERSONS MAXIMUM MONTHLY INCOME:	5220				

	Last Compl	ete Update:	3/17/2020			AREA:	Waianae
OJECT NAME: SEA	WINDS A	PARTME	NTS, H & J W	einberg		PROJECT TYPE:	Emergency/Trans
ADDRESS: 85-29	5 Kauiokalani Pl.					PHONE: 808-696	-0061
CITY: Waiar	nae		ZIP:	96792		FAX:	
MANAGER: Jess	e Smith, General	Manager					
	up and drop off a Thurs./Sat./Sun.		I0a.m. to 2pm, most vailable by email	Apartments	anager, Sea Wir s, 85-295 Kauiol anae, Hawaii 96	kalani PI.	OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN: Jess	e Smith						NO
APPLY PHONE: 808-0	696-0061		F	AX:	EMAIL: j	esse@hsiservices.	net
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	20	975	1600	500	1	4	
One Bdrm:							
Two Bdrm:	30**	1295	2000	770	4	7	
Three Bdrm:							
Four Bdrm:							NO
Transtional studio unitay. Rents range from \$ 30 permanent 2 bdrm ve sliding scale rents of	\$650 - \$975 townhouse rentals		Water, sewer, tras	sn		MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6
GE CRITERIA:						TO REMAIN ON W	
and older				FOR PARKING		CALL EVERY	
			PARKING INFO: \$25 month	NO	PET INFO:	F cal household pets,	ETS OK: YES
	ASSET LIMITS:		4 -0		DOGS. Se	e pet agreement fo	or details.
N OWN RESIDENTIA					GENERAL	INFO:	
SET LIMIT INFO: JD Urban Honolulu Lov	w Income Limit		LEASE: 1 year		Preference in a homel 2 units (inc handicappe	of Housing Solutio is given if applicar ess shelter. Iudes 1 studio) are ed; 2 units (include: r hearing disabled.	adapted for
COME CRITERIA:					Application		
000 minimum gross m od stamps) for 2 bdrm. oss monthly income fo	\$1600	ot including minimum	FURNISHED: Drapes, tiled floor appliances (refrig stove top).		Pick up fro	 m manager's office est to Jesse@hsise	
ERSON MAXIMUM M	ONTHLY INCOM	E:	3665		ļ		
PERSONS MAXIMUM N	MONTHLY INCOM	ME:	4185				

	Last Comp	ete Update:	7/6/2023			AREA	Iwilei
PROJECT NAME:	SENIOR RESID	ENCE AT	IWILEI			PROJECT TYPE:	Elderly
ADDRESS:	888 Iwilei Rd.					PHONE: 808-88	8-0876
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 521-11	92
	8: Indigo Real Estate 9: Senior Residence at In	wilei		APPLY ADI Manager's (888 Iwilei R		Hi 96817	OUT-OF-STATE APPLICATION ACCEPTED:
	I: Manager's Office						
	: 808-888-0876			FAX:	EMAIL:		
S One Two Three	Type: Number of UNITS: itudio: 146 Bdrm: 13 Bdrm: 13 Bdrm: 13	RENT: 1317 1550	Minimum INCOME Required: 2x rent 2x rent	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
RENT INFO: RE	NT IS 30% OF INCOME		JTILITIES INCL Water and sewe			TOT/ MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 2
AGE CRITERIA:					٦	O REMAIN ON V CALL EVERY	
62+				T FOR PARKING:			
			PARKING INFO 87 stalls	: NO	PET INFO:		PETS OK: NO
AN OWN RESIL	ASSET LIMITS: DENTIAL PROPERTY: O:	NONE	LEASE: One-year		GENERAL I Application: Ask manag Pick up fror Pick up ons	ement to mail it n manager's offic	e
	IA: 1 person; \$52,400 2 pp 1 person; \$62,880 2 pp	;	FURNISHED: Partly furnished appliances only				
	IUM MONTHLY INCOM		3820		J		
2-PERSONS MAXI	IMUM MONTHLY INCOM	ИE:	4367				

		Last Comp	lete Update:	6/6/2023			AREA:	Kaneohe
PROJECT NAME:	SENI	OR RESI	DENCE AT	KANEOH	E		PROJECT TYPE:	Elderly
ADDRESS:	45-705 I	Kamehameha I	Hwy.				PHONE: 808-235	-2898
CITY:	Kaneoh	<u>م</u>	STATE: HI	ZIP:	96744		FAX: 235-089)7
•••••		6	••••••		30744			
MANAGER APPLY TO		a Monton, Resid anaka, Inc.	dent Manager		APPLY AD Mail to proj			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-23	5-2898			FAX: 235-0897	EMAIL:		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:	74	1025	2x rent	428			YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:			ļ				NO
RENT INFO: RE *44 (HUD) Rents a *30 (LIHTC) units Deposit same as r Section 8 certifica gross income requ AGE CRITERIA: All residents must	are 30% (are \$102 rent. Mus te holders uirement	of income; wait 5; waitlist 1-3 y st be below 60% s need not mee	list 1-3 yrs rs. 6 AMI	UTILITIES INC Water & Sewe	-		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 12 AIT LIST (Months): 36 /AITLIST
				PARKING INF	·	PET INFO		PETS OK:
AN OWN RESI		SSET LIMITS:		Monthly Rent parking stalls Come First Se	DO NOT include 48 First erved	LIHTC - N HUD - PE GENERAL	TS OK	
ASSET LIMIT INF				LEASE:			ty center, laundry ro	om.
	10.			6 months		floor near Units hav onsite soo	age compartments a laundry room	
50% AMI: 1 perso persons \$58,800 60% AMI: 1 perso 2 persons - \$62,70	n \$45,75 n - \$54,9	00	52,250; 3	FURNISHED: Partly furnishe appliances on		Funding: (24 units) Transport	RHTF, Section 202 ation to Shopping av Charities Hawai'I	(44 units), Home
I-PERSON MAXIN		NTHLY INCOM	E:	4575		k		
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	5040				

	I	Last Comple	ete Update:	5/11/2023			AREA:	Kapolei
PROJECT NAME:	SENIOF	R RESID	ENCE AT	KAPOLEI	1&2		PROJECT TYPE:	Elderly
ADDRESS:	91-1034 Na	mahoe St.					PHONE: 808-674	-2937
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 674-293	8
	e: Cat Suan, B: Bob Tanak		anager		APPLY AD 1055 Kalo I 96826	DRESS: Place Ste 103 H	łonolulu, HI	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Ext 24							YES
	: 808-949-4	111			FAX: 949-7211	EMAIL:		
		umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	79	0		463-500	1	3	
Three								
Four I	Bdrm:			ļ		J	J	NO
RENT INFO: RE 60 unit @ 30% AM Namahoe St. 20 u 91-1098 Namahoe Gross maximum ru income (if qualified Change Security AGE CRITERIA: All residents 62+.	AGI at Kapol units @ 50% e St. ent: \$725/77 d) Monthly a	ei 1 - 91-102 AMGI at Ka 8 month or 3 amount is So month's ror	24 Ipolei 2 - 30% of Jubject to	SR Kapolei #2	: \$88/ utility allowand : \$87/utility allowand ST FOR PARKING: D: NO	e	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 36 AIT LIST (Months): 48 /AITLIST
AN OWN RESIE ASSET LIMIT INFO Must not wholly ov	DENTIAL PR O:		NO	LEASE:		GENERAL Opened 6/2 HUD PRAC		
real estate.	. ,			One-year		property, o fans. Acce	s include: screen d n bus route, laundr ss to the recreation	y room, ceiling center w/pool
INCOME CRITER		· 2 persons	\$29,000	FURNISHED:		l'	e; about a 10 minut	,
50% of AMI: 1 per						Any crimin	al conviction = ineli	gible
1-PERSON MAXIM	IUM MONTH	ILY INCOME	E:	3812				
2-PERSONS MAXI	MUM MONT	HLY INCOM	1E:	4354				

	Last Comp	lete Update:	5/10/2023			AREA	/
ROJECT NAME: SIL	/ERCRES1	ſ				PROJECT TYPE	Elderly
ADDRESS: 520 Pi	ne St.					PHONE: 808-62	
CITY: Wahia	wa	STATE: H	ZIP:	96786		FAX: 621-77	781
MANAGER: Lisa I	Esteron - Proper	ty Manager		APPLY ADI			OUT-OF-STAT
APPLY TO:					0		APPLICATIO ACCEPTED
APPLY ATTN:							YES
APPLY PHONE: 808-6	622-2785		F	AX: 621-7781	EMAIL:		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:	78	0	NO	500		3	YES
Two Bdrm:							
Three Bdrm:							
Four Bdrm:				J	J		NO
RENT INFO: RENT IS 3 80% of Adjusted Income After application is receiv sent. ALL HAP WORKERS MU DN THE APPLICATION	ed, a confirmatio	on letter is	UTILITIES INCLU Water, Sewer, Tr utility allowance.	JDED: ash Removal, \$63		MINIMUM V ESTIMATE MAXIMUM V	E (Months): 2
GE CRITERIA:						TO REMAIN ON	WAITLIST
lead of Household must companion) 18+, minor of		if HOH has	WAITLIST	FOR PARKING:		CALL EVER	
egal custody. Adult child ver 18 allowed.		- ·	PARKING INFO:		PET INFC):	PETS OK: YES
,	ASSET LIMITS:	NONE	Limited guest par area.		1 animal		
AN OWN RESIDENTIA	L PROPERTY:	YES			GENERAL	-	ears will result in
			LEASE: 1 year		denial (ap and sex o regardles Will not a	oplicant or caregive offenses will result i s of time. ccept any evictions	r). Violent, drug, n automatic denial -
COME CRITERIA:			ļ			995; Funding: Sec	
	: changes per H	UD	FURNISHED:		Laundry F	acilities	-
			Refrigerator, stov	ve, carpet, blinds	Send req	on: Ask manageme uest with self addre manager's office.	
,	L PROPERTY:	VES	area. LEASE: 1 year	rking in outside	GENERAL Any conv denial (ap and sex of regardles Will not a possessio Opened 1 Library, c Laundry F Applicatio Send req	iction in the last 7 y oplicant or caregive offenses will result is s of time. ccept any evictions ons. 1995; Funding: Sec ommunity room, La Facilities on: Ask manageme uest with self addre	r). Violent, drug, n automatic den s/summary tion 202 PRAC anai lounge, Coin nt to mail it

Last Comple	te Update: 5/17/2023			AREA:	Chinatown
ROJECT NAME: SMITH BERETA	NIA			PROJECT TYPE:	Family
ADDRESS: 1170 Nuuanu Ave.				PHONE: 808-521	-6486
CITY: Honolulu	STATE: HI ZIP:	96817		FAX: 531-660	5
MANAGER: Ko Norasing-Yun		APPLY ADI On-Site Ste			OUT-OF-STAT
APPLY TO: Indigo Real Estate Serv	ices, Inc.		-		APPLICATION ACCEPTED
APPLY ATTN: ***WAITLIST CI	OSED SINCE 2018***				
APPLY PHONE: 808-521-6486		FAX: 531-6605	EMAIL:		
Unit Type: Number of UNITS:	RENT: Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:					
One Bdrm: 82	0 NO	548	1	2	YES
Two Bdrm: 82	0 NO	719	2	4	YES
Three Bdrm: Four Bdrm:					
Four Burni.	JI	J	J	1	NO
o action required unless updating contact nely response to communication by projec GE CRITERIA:				MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 2 AIT LIST (Months): 2 AITLIST
ead of household must be 18 years or old	er. WAITL	LIST FOR PARKING:		CALL EVERY	
	PARKING INF		PET INFO	: P	ETS OK: NO
		ueu			
AN OWN RESIDENTIAL PROPERTY:			GENERAL	INFO:	
SSET LIMIT INFO:	LEASE: 1 year		Two weel	new applicants only w ss after announceme outed and accepted f	ent, applications
			A lottery i the waitlis	s performed to selec	t applicant's # for
COME CRITERIA:	50; FURNISHED:		Funding:	Section 8 100%	
aximum Annual Income: 1 person - \$36,6 persons - \$41,850; 3 persons - \$47,100; persons - \$52,300; 5 persons - \$56,500; persons - \$60,700; 7 persons - \$64,900; persons - \$69,050	Partly furnish Partly furnish appliances or	edmajor			
PERSON MAXIMUM MONTHLY INCOME	3517		J		
PERSONS MAXIMUM MONTHLY INCOM	E: 4017				

	Last Comp	lete Update:	12/15/2021			AREA:	Makiki
ROJECT NAME: SPE	NCER HO	USE (HPH	<mark>A-hon) - NO</mark>	T ACCEPTI	ING A	PROJECT TYPE:	Family
ADDRESS: 1035 S	Spencer St.					PHONE: 808-58	6-9724
	ılu	STATE: HI	ZIP:	96822		FAX: 586-972	28
MANAGER: Sol S	entous			APPLY AD 1002 North			OUT-OF-STAT
APPLY TO: HPH/ NOT	A ACCEPTING AP	PLICATIONS		Honolulu, H		ICATIONS	APPLICATION ACCEPTED:
APPLY ATTN: Oahu NOT	applications offi				EMAU		NO
APPLY PHONE: 808-8	332-5961		F	AX: 832-3461		: hphaishereforyou.c	ng
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:							YES
Two Bdrm:	1	0		798	3	8	YES
Three Bdrm:	16	0		190			
Four Bdrm:				ļ	1	J	
Minimum Rent: \$0 for Fea ********* CLOSED 8/2/201 AGE CRITERIA:			Water and gas + electricity			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 36 /AIT LIST (Months): 60
Head of household must	be 18 years or ol	der	WAITLIST	FOR PARKING:		CALL EVERY	(Months): 12
			PARKING INFO:	NO	PET INFC		PETS OK: YES
,	ASSET LIMITS:	NONE			the categ	animals ok, but only ories listed below: (under 25 lbs) or_ca	
AN OWN RESIDENTIA	L PROPERTY:	NO			GENERA		
ASSET LIMIT INFO: Cannot own a house on C	Dahu		LEASE: 1 year		homeless displaced	ENCES: Domestic N s in transitional shelt I. Fed Low Inc Pub Hs	ers; involuntary
NCOME CRITERIA:			,			ctions must be 3 yrs	
ncome Eligibility = 80% o Maximum Annual Income 2 persons - \$60,900; 3 pe 4 persons - \$76,100; 5 pe 6 persons - \$88,300; 7 pe 8 persons - \$100,450	: 1 person - \$53, ersons - \$68,500; ersons - \$82,200;		FURNISHED: Partly furnished- appliances only,		crystai m	ethamphetamine or	Sex Unender
-PERSON MAXIMUM MC	ONTHLY INCOM	E:	4570		ļ		
-PERSONS MAXIMUM M	IONTHLY INCO	ME:	5220				

		Last Comp	lete Update:	6/7/2023			AREA:	Mililani
PROJECT NAME:	THE (COURTY	ARDS AT I		IAUKA		PROJECT TYPE:	Family
ADDRESS:	95-1015	Koolani Dr.					PHONE: 808-626	-9455
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX: 626-945	6
	-	Gates, Reside	-			DRESS: agement Office Mililani, HI 96		OUT-OF-STATE APPLICATION
		ourtyards at Mil	iani Mauka					ACCEPTED: YES
APPLY ATTN:		6-9455			FAX: 626-9456		http://www.locations ble-rentals.aspx	srentals.com/afforda
	. 000 02							
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	udio:							
One E		12	979	2.25xRent	636			
Two B		24	1147	2.25xRent 2.25xRent	841			
		12	1319	2.2001011				
Four B	sarm:			ļ	J	J	J	YES
AGE CRITERIA:				Water			MINIMUM W/ ESTIMATE MAXIMUM W/ ESTIMATE TO REMAIN ON W	(Months): 24 AIT LIST (Months): 36
Head of household	l must be	e 18 years or o	lder		ST FOR PARKING:		CALL EVERY	-
						PET INFO:	Р	ETS OK: NO
	AS	SSET LIMITS:	NONE		d; Max 2 stalls, but d to have 2nd stall, available			
AN OWN RESID ASSET LIMIT INFO		PROPERTY:	NO			GENERAL	INFO:	
Cannot own a majo	-	rest in resident	al	LEASE:		LIHTC		
properties.				1 year		Application		plement
I INCOME CRITERI	Δ٠			ļ			from website om manager's office	
60% of AMI: 1 pers persons \$70,740; 4	son \$55,0		\$62,880; 3	FURNISHED: Partly furnishe appliances onl				
1-PERSON MAXIMI	UM MON	ITHLY INCOM	E:	4585		ļ		
2-PERSONS MAXIN		NTHLY INCO	ME:	5240				

		Last Comp	lete Update:	3/3/2020			AREA:	Kalihi
PROJECT NAME:	THE T	TOWERS	AT KUHI	O PARK			PROJECT TYPE:	Family
ADDRESS:	, 1475 Lir	napuni St.					PHONE: 808-888	8-2816
CITY:	Honolulu	l	STATE: HI	ZIP:	96819		FAX: 888-063	31
MANAGER			nager -Tower / ager -Tower B-	A- PH: 888-3382 PH: 983-1631	APPLY AD on-site	DDRESS:		OUT-OF-STATE APPLICATION
APPLY TO	: The Mi	chaels Organiz	ation					ACCEPTED:
APPLY ATTN	1:							YES
APPLY PHONE	: 808-88	8-2816			FAX: 888-0631	EMAIL:	towers@tmo.com	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:		1356	3280	579			
	Bdrm:		1627	3937	792			
Three			1880	4268	944			
	Bdrm:							
Rent listed is for T The Towers at Kul Subsidized units - Authority	hio Park f	for market units	S.	Water, electric	city and gas		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:							TO REMAIN ON W	
Head of household	d must be	e 18 years or o	der	WAITL	IST FOR PARKING	:	CALL EVERY	
				PARKING INF		PET INFC): F	PETS OK: NO
		SSET LIMITS:			ded. Each unit has stalls. Parking is			
AN OWN RESID	O:			LEASE:		GENERAL Newly rer	novated	
If asset generates income	income,	then it is count	ed toward	One-year			rvices program for a unty Section 8 okay	
INCOME CRITERI	IA:					24-hour n	naintenance and sec	curity
2x rent				FURNISHED:		_ NO RESP	PONSE IN 2021	
I-PERSON MAXIM		ITHLY INCOM	E:	4220		I		
2-PERSONS MAXI	МОМ МС	ONTHLY INCO	ME:	4820				

		Last Comple	ete Update:	12/16/2021			AREA:	Downtown
ROJECT NAME:	THO	MAS BUIL	DING				PROJECT TYPE:	Family
ADDRESS:	Unknow	'n					PHONE:	,
CITY:	Honolul	u	STATE: HI	ZIP:	0		FAX:	
			ļ					
MANAGER	ł:				APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO): Housir	ng Solutions, Inc						APPLICATION ACCEPTED:
APPLY ATTN	I: BUILD	ING IS NOT OP	EN OR IN OP	ERATION				
APPLY PHONE	i:			F	AX:		Website: https://wv Email: Unknown	vw.hsiservices.net/
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:		0					
One	Bdrm:		0					
	Bdrm:		0					
Three			0					
Four	Bdrm:		0		J	J	J	
ENT INFO: RE				WAITLIST	FOR PARKING:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months):
				PARKING INFO:		PET INFO:		PETS OK:
	A	SSET LIMITS:						
AN OWN RESI	DENTIAL					GENERAL	INFO:	
SSET LIMIT INF	0:			LEASE:		Honolulu.	y, century-old struc Residential floors throoms, opening 2	of 25 units with
	IA:			ļ				
				FURNISHED:				
PERSON MAXIM		NTHLY INCOME	::	0				
PERSONS MAXI	MUM MC	ONTHLY INCOM	1E:	0				

						AREA: PROJECT TYPE:	
		HOUSE					· ·
ADDRESS. 20	019 Vancouver Dr.					PHONE: 808-94 FAX: 944-39	
	onolulu	STATE: HI	ZIP:	96822		1 AA . [944-39	70
MANAGER: (Chris Gerson			APPLY ADD	ORESS: outreach ager		OUT-OF-STA
APPLY TO: H	Housing Solutions, Ir	IC.		homeless sh			APPLICATIO ACCEPTED
APPLY ATTN: (Chris Gerson						NO
APPLY PHONE: 9	947-7181		F	AX : 944-3976	EMAIL:	chris@hsiservices	.net
Unit Ty	/pe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stuc	:oit						
One Bd	rm: 25	1100		460	2	4	
Two Bd	rm: 8	1400		580	5	7	
Three Bd	rm:						
Four Bd	rm:						NO
1100 for 1-bdrm; \$	1400 for 2-bdrm		Electricity, water, disposal	sewer, and refuse		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA:						TO REMAIN ON V	
1 4 4 0 10 10	ast 1 minor child (18 pregnant	and under)		FOR PARKING:		CALL EVERY	(Months):
	r · - 9		PARKING INFO:	IYES	PET INFO:		
	F - 2		PARKING INFO: Limited parking a month, approx 6-		PET INFO:		
at least 6 months	ASSET LIMITS: NTIAL PROPERTY:			at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL		
at least 6 months	ASSET LIMITS:		Limited parking a month, approx 6- no guest parking parking for reside	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL	INFO: or at risk	р
at least 6 months	ASSET LIMITS:		Limited parking a month, approx 6- no guest parking parking for reside available on first	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL	INFO: or at risk families with at lea	ast one minor child
at least 6 months	ASSET LIMITS:		Limited parking a month, approx 6- no guest parking parking for reside available on first LEASE:	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL Homeless Homeless under 18 y	INFO: or at risk families with at lea rears. ousehold must be	ast one minor child
AN OWN RESIDE	ASSET LIMITS: NTIAL PROPERTY:		Limited parking a month, approx 6- no guest parking parking for reside available on first LEASE: Month to Month	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL Homeless Homeless under 18 y Head of He hours a we	INFO: or at risk families with at lea rears. ousehold must be	ast one minor child working at least 19
r at least 6 months	ASSET LIMITS: NTIAL PROPERTY:		Limited parking a month, approx 6- no guest parking parking for reside available on first LEASE: Month to Month	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL Homeless Homeless under 18 y Head of He hours a we Homless =	INFO: or at risk families with at lea ears. ousehold must be eek currently unshelte	ast one minor child working at least 19
AN OWN RESIDE	ASSET LIMITS: NTIAL PROPERTY:		Limited parking a month, approx 6- no guest parking parking for reside available on first LEASE: Month to Month	at \$50 per 12 mon waitlist; on site. Street ents and guest	GENERAL Homeless Homeless under 18 y Head of He hours a we Homless = emergency	INFO: or at risk families with at lea ears. ousehold must be eek currently unshelte	ast one minor child working at least 19 ered or in an of being homeless

		Last Comp	lete Update:	11/24/2021			AREA:	Ewa Beach
ROJECT NAME:	VILLA	GES OF	MOA'E KI	J - PHASE I			PROJECT TYPE:	Family
ADDRESS:	91-1655	Pahika St.					PHONE: 808-681	-3000
CITY:	Ewa Bea	ach	STATE: HI	ZIP:	96706		FAX: 681-300	4
	Mercad	vasaki, Mgr; Ja o, Admin Asst /illages of Moa		sing Agent; Betty	APPLY AD 91-1655 Pa Ewa Beach	ahika St.		OUT-OF-STAT APPLICATIOI ACCEPTED
	۷:							YES
APPLY PHONE	: 808-68	1-3000		FÆ	X: 681-3004	EMAIL:	www.eahhousing.or	g
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
I	Studio: Bdrm:	6	1279	2.5x rent	674		3	
Two	Bdrm:	32	1524	2.5x rent	797	2	5	
Three	Bdrm:	25	1750	2.5x rent	1119	3	7	
Four	Bdrm:							
ased on 2019 M o Change MI % - 30/50/60			Subject	Water/sewer/trash			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
GE CRITERIA:				la			ESTIMATE TO REMAIN ON W	
8+ Multi-Family F	Property			WAITLIST	FOR PARKING:		CALL EVERY	-
				PARKING INFO:		PET INFO	: F	ETS OK: NO
	AS	SET LIMITS:	YES	Assigned on an "A basis. Current dri insurance, safety	vers license, check,	Notify ma Assistanc	nagement if have a s e animal	Service or
AN OWN RESI		PROPERTY:		registration require	ed	GENERAL	-	
SSET LIMIT INFO:			LEASE:			Non-Smoking property - smoking not allowed anywhere on the property, including inside apts		
				1 year		Laundry F	nd/Totlot, Communit Room, Picnic Area, d internet	/ Meeting Room, Computer with
NCOME CRITERIA: Maximum monthly income limits subject to change annually		o change	FURNISHED: Refrigerator, stove, rangehood,		HMMF	Funding: RHTF, LIHTC, CDBG, NSP, HOME,		
PERSON MAXIM	IUM MON	ITHLY INCOM	E:	4220		J		
PERSONS MAXI	ІМИМ МО	NTHLY INCO	ME:	4820				

		Last Com	olete Update:	11/24/2021			AREA:	Ewa Beach	
PROJECT NAME:	VILL	AGES OF	MOA'E K	J - PHASE II			PROJECT TYPE:	Family	
ADDRESS:	91-1655	5 Pahika St.					PHONE: 808-68	1-3000	
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706		FAX: 681-3004		
	Merca	wasaki, Mgr; J do, Admin Ass Villages of Mo	t.	asing Agent; Betty	APPLY AD 91-1655 Pa Ewa Beach	ahika St.		OUT-OF-STATE APPLICATION ACCEPTED:	
	l:							YES	
	: 808-68	31-3000		F	AX: 681-3004	EMAIL:	www.eahhousing.o	rg	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm:	9	1222	2.5xrent			3		
	Bdrm:	37	1457	2.5xrent		2	5		
Three	Bdrm:	29	1671	2.5xrent		3	7		
Four	Bdrm:							YES	
RENT INFO: RE Max rent is around AMI % - 30/50/55 Based on 2020 M 2021 Update: Wai	d 55% of TSP/VLI	income. income limits		UTILITIES INCLU Water/sewer/trasl			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12	
AGE CRITERIA:	senond to	undata lattar	or bo	μ. I			ESTIMATE TO REMAIN ON V		
18+				WAITLIST	FOR PARKING:	:	CALL EVERY	-	
	A	SSET LIMITS:		PARKING INFO: Assigned on an ", basis. Current dr insurance, safety	As needed" ivers license, check,		<u>.</u> 1	PETS OK: NO	
		PROPERTY:		registration requir	red	GENERAL	-		
ASSET LIMIT INF		ne		LEASE: 1 year		Laundry F high spee	nd/Totlot, Communit Room, Picnic Area, ed internet ing on Property		
INCOME CRITER Maximum monthly annually		limits subject	to change	FURNISHED: Refrigerator, stov blinds	e, rangehood,	Funding:	RHTF, LIHTC, CDE	3G, HOME, HMMF	
I-PERSON MAXIN	IUM MOI	NTHLY INCOM	ΛE:	4042		p			
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	4620					

		Last Comp	lete Update:	3/5/2020			AREA:	Ewa Beach
PROJECT NAME:	VILL	AGES OF	MOA'E K	U - PHASE II	l		PROJECT TYPE:	Family
ADDRESS:	91-165	5 Pahika St.					PHONE: 808-681	-3000
CITY:	Ewa Be	each	STATE: HI	ZIP:	96706		FAX:	
	Merca	wasaki, Mgr; Ja do, Admin Assi Villages of Moa	stant	easing Agent; Betty		DRESS: ahika Street n, HI 96706		OUT-OF-STATE APPLICATION ACCEPTED:
	l:							YES
	: 808-68	31-3000		F	AX: 681-3004	EMAIL:	www.eahhousing.or	g
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	4	0	2.5x rent	674		3	
Two	Bdrm:	28	1524	2.5x rent	797	2	5	
Three	Bdrm:	20	1750	2.5x rent	1119	3	7	
Four	Bdrm:		0					YES
Based on 2019 M change AMI % - 30/50/60	TSP/VLI	Income Limits.	Subject to	Water/Sewer/Tras	sh		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA: 18+ Multi-Family F	Property						TO REMAIN ON W CALL EVERY	
	. op only			WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	: Р	ETS OK: NO
	A	SSET LIMITS:		Assigned on an " basis. Current dri insurance, safety	vers license, check,	Notify ma Assistanc	nagement if have a S	r
AN OWN RESI		PROPERTY:		registered require	ed	GENERAL		
ASSET LIMIT INFO:						-Smoking property - smoking not allowed where on the property, including inside apts		
							nd/Tot lot, Communit Room, Picnic Area, C d internet	
INCOME CRITER		limite aubient t	o obongo	FURNISHED:			RHTF, LIHTC, CDBG	, HOME, HMMF
annually	mcome	innits subject t	o change	Refrigerator, stov blinds	e, rangehood,		from website	
							PONSE IN 2021	
1-PERSON MAXIM				4220				
2-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	4820				

	Last Compl	lete Update:	6/1/2023			AREA:	Kapolei	
ROJECT NAME: VILL	<mark>AS AT A'E</mark>	LOA				PROJECT TYPE: Family		
ADDRESS: 91-111	8 Namahoe St.	(Mailing addres	s: 91-1130 Namal	noe St.)		PHONE: 808-674-4245		
CITY: Kapole	i	STATE: HI	ZIP:	96707		FAX: 674-424	6	
MANAGER: Aman	da Mercado			APPLY AD 91-1130 Na	mahoe St.		OUT-OF-STATE	
APPLY TO: Locati	ons LLC			Kapolei, HI	96707		APPLICATION ACCEPTED:	
APPLY ATTN: Afford	able Housing De	ept.						
APPLY PHONE: 808-6	74-4245			FAX: 674-4246	r	ocationsrentals.cor rentals.aspx	n/affordable-	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	19	1100	2.25x rent	637				
Two Bdrm:	32	1200	2.25x rent	841				
Three Bdrm:	20	1500	2.25x rent	1068				
Four Bdrm:							YES	
Section 8 applications are income requirement. Must be below 50% & 60% Minimum Income Require 1 bdrm: \$2182.50-\$2322.5 bdrm: \$2567.50 \$2750 AGE CRITERIA:	6 AMI ments: 50					MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 12 AIT LIST (Months): 1 /AITLIST	
Head of household must b	be 18 years or of	der		T FOR PARKING:				
			PARKING INFO	king stall included	PET INFO:		PETS OK: NO	
۵	SSET LIMITS:	NONE		J				
AN OWN RESIDENTIA					GENERAL	INFO:		
ASSET LIMIT INFO:		·	LEASE:		LIHTC Fun	ding		
			1 year; then mo	onth to month	Accepts Se 71 units for	r 60%AMI		
NCOME CRITERIA			ļ		9 units for	50% AMI		
NCOME CRITERIA: 0% AMI: 1 person \$45,750, 2 persons \$52,250, 3 ersons \$58,800, 4 persons \$65,300, 0% AMI: 1 person \$54,900, 2 persons \$62,700, 3 ersons \$70,560, 4 persons \$78,360, 5 persons 84,660, 6 persons \$90,900			FURNISHED: Partly furnished appliances only		AMI Application Donwnloac Pick up fro	I from website m manager's office		
-PERSON MAXIMUM MO		E:	4220			ONSE IN 2021		
-PERSONS MAXIMUM M			4820					
		VIL.	4020					

	Last Comp	lete Update:	6/7/2023			AREA:	Kapolei	
OJECT NAME: VILL	<mark>.AS AT MA</mark>	LU'OHAI				PROJECT TYPE:	Family	
ADDRESS: 91-102	5 Kaiau Ave.					PHONE: 808-888	-2377	
	ei	STATE: HI	ZIP:	96707		FAX:		
MANAGER:				APPLY AD 91-1025 Ka Kapolei, HI	iau Ave		OUT-OF-STAT	
APPLY TO: Villas	at Malu'Ohai			Tapoloi, Th	50101		ACCEPTED	
APPLY ATTN: Resid	lent Manager						-	
APPLY PHONE: 808-9	43-9314			FAX: 946-0572	EMAIL:	https://www.locatior able-rentals	nsrentals.com/affo	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:								
Two Bdrm:	55	1112	2.25xrent	713				
Three Bdrm:	16	1329	2.25xrent	940				
Four Bdrm:							NO	
ucher. Credit evaluatior nants. Tenants must ha erence. Must meet min teria. E CRITERIA:	ve good landlord	Ł				MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 1 AIT LIST (Months):	
ad of Household 18+			\\/AITI I	ST FOR PARKING:		CALL EVERY		
			PARKING INFO		PET INFO	: F	ETS OK: NO	
	ASSET LIMITS:		2 designated p unit	arking stalls per				
ہ N OWN RESIDENTIA					, GENERAL	INFO:		
SET LIMIT INFO:			LEASE:		Laundry F	Room, air conditionir		
plicant cannot own a majority interest in residential perties			1 year Applica			opping, schools and recreation center. oplication: ck up outside of building near entry door.		
OME CRITERIA:			1					
% AMI: 1 person \$45,7 persons \$58,800; 4 pers % AMI: 1 person: \$54,5 persons: \$70,560; 4 per persons: \$84,660; 6 per persons: \$97,200; 8 per	sons \$65,300 900; 2 persons: sons: \$78,360 sons: \$90,900		FURNISHED: Partly furnished appliances only					
ERSON MAXIMUM MC	ONTHLY INCOM	E:	4575		μ			
ERSONS MAXIMUM N	IONTHLY INCO	ME:	5225					

	Last Com	plete Update:	7/16/2020			AREA	Liliha	
PROJECT NAME:		TMENTS				PROJECT TYPE: Family		
ADDRESS:	1320 Aala St.					PHONE: 808-55	50-0440	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 525-68	311	
	ļ		ļ					
MANAGER	R: Sheryl Oschin, on-si	te manager		APPLY AD			OUT-OF-STATE	
APPLY TO):		Honolulu, HI 96817			APPLICATIO		
	1:							
	E: 808-550-0440		I	FAX: 525-6811	EMAIL:			
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	itudio:							
	Bdrm: 60	1680	2.5x rent	543				
	Bdrm: 196	1840	2.5x rent	745				
Three		2040		823				
Four	Bdrm: 55	2320	2.5x rent	1046	J			
Rent subject to ch	INT IS 30% OF INCOM nange on a daily basis of e above rent pricing ba	due to		UDED:		MINIMUM V ESTIMATE MAXIMUM V	E (Months): 0	
AGE CRITERIA:			le.			TO REMAIN ON	E (Months): 0	
Head of Househol	ld 18+			T FOR PARKING:		CALL EVER		
			PARKING INFO:		PET INFC):	PETS OK: NO	
			1 stall included					
	ASSET LIMITS				ļ			
AN OWN RESIL	DENTIAL PROPERTY: ·O·		ļ		GENERAL	- INFO: PONSE IN 2023		
			LEASE: 6 or 12 month le	200		ONSE IN 2025		
INCOME CRITER	IA:		ļ					
Max income limits	s - 140% AMI		FURNISHED:					
I 1-PERSON MAXIN	IUM MONTHLY INCOM	ME:	7828		ļ			
2-PERSONS MAXI	IMUM MONTHLY INCO	DME:	8948					

APPLY TO: HPHA NOT ACCEPTING APPLICATIONS APPLY ATT: Cahu applications office NOT ACCEPTING APPLICATIONS APPLY PHONE: 808-832-5961 Unit Type: Number of UNITS: RENT: RENT: Minimum Number of UNITS: RENT: SQ FT: NIMINUM Number of UNITS: RENT: SQ FT: NIMINUM Number of People Studio: SQ FT: NIMINUM Number of People Studio: SQ FT: NIMINUM Number of People SQ FT: NIMINUM Number Nu	ahiawa	AREA: Wal	А			12/15/2021	ete Update:	Last Compl			
CITY: Wahiawa STATE: H ZIP: 96786 FAX: 622-0362 MANAGER: Jimary Quinones APPLY ADDRESS: 1002 North School St. C MANAGER: Jimary Quinones APPLY ADDRESS: 1002 North School St. C MANAGER: Jimary Quinones APPLY ATTN: Ochun School St. C MANAGER: Jimary Quinones FAX: 832-3461 EMAIL: hphaishereforyou.org MINIMUM MAXIMUM MAXIMUM MAXIMUM MAXIMUM C People: C Unit Type: Number Number FAX: 832-3461 Minimum MAXIMUM MAXIMUM MAXIMUM C Image: Image: Image: SQ FT: Minimum Maximum Maximum C	mily	CT TYPE: Fam	PROJECT T	TIN	NOT ACCEF	HA-cen) -	RRACE (HF	IAWA TEF	AME: WAH	OJECT N	
CITY: Wahiawa STATE: HI ZP: 96786 MANAGER: Jimary Quinones APPLY ADDRESS: 1002 North School St. Constraints APPLY ATN: School St. 1002 North School St. Constraints Constraints APPLY ATN: School St. Honolulu, Hi 99817 NOT ACCEPTING APPLICATIONS APPLY ATN: School St. Honolulu, Hi 99817 NOT ACCEPTING APPLICATIONS APPLY TW: School St. Honolulu, Hi 99817 NOT ACCEPTING APPLICATIONS APPLY TW: School St. Honolulu, Hi 99817 NOT ACCEPTING APPLICATIONS APPLY TW: School St. Honolulu, Hi 99817 NOT ACCEPTING APPLICATIONS APPLY PHONE: School St. Hinimum Pepule Constants Import Type: Number Minimum Maximum People: Constants Import Type: Number 12 0 547 1 4 Import Type: Number 1200 4 10 For People: Constants Import Type: Number 120 547 1 4 10 For People: Cons	30	E: 808-622-6360	PHONE: 80					m St.	ESS : 337 Pa	ADDR	
MANAGER: Jimary Quinones APPLY ADDRESS: 1002 North School St. MAPLY TO: HPHA NOT ACCEPTING APPLICATIONS APPLY ATTN: Oshu applications office NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number of UNITS: RENT: Minimum Studio: Number of UNITS: Minimum Required: SQ FT: One Bdrm: 12 0 One Bdrm: 2 6 Three Bdrm: 24 0 Four Bdrm: 8 0 INFO: RENT: Minimum Required: Minimum SQ FT: Informe Bdrm: 24 0 936 3 8 Four Bdrm: 24 0 936 3 8 7 Informum Rent: \$0 for Faderal Low Income projects UTILITIES INCLUDED: TOTAL UN Minimum Rent: \$0 for Faderal Low Income projects Minimum Maximum Amart: \$0 for Faderal Low Income projects Minimum Minimum Rent: \$0 for Faderal Low Income projects Minimum Minimum Rent: \$0 for Faderal Low Income projects TO TAL UN Maximum Amart: \$0 for Baderal Low Income projects AN OWN RESIDENTIAL PROPERTY: NO LEASE: To REMAIN ON WAIT I CALL EVERY (Mon Maximum Annual Income: 1 person - S53, 260; persons - S63, 00; 3 p		(: 622-6362	FAX: 62		96786	ZIP:	STATE: HI	/a	CITY: Wahiay	(
APPLY TO: HPHA NOT ACCEPTING APPLICATIONS 1002 North School SI. Honolulu, H196817 NOT ACCEPTING APPLICATIONS APPLY ATTN: Oahu applications office NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number of UNITS: RENT: Studio: Immuner One Bdrm: 12 Three Bdrm: 24 One Bdrm: 16 Three Bdrm: 24 INIMOUDE Fax: 832-3461 Water and allowance for electricity and gas Total UN MINIMUM WAT I ESTIMATE (Mon MAXIMUM WAT ESTIMATE (Mon MAXI					00100		••••••	iu iii	, vuina		
APPLY TO: HPHA NOT ACCEPTING APPLICATIONS APPLY ATTN: Oahu applications office NOT ACCEPTING APPLICATIONS APPLY ATTN: Oahu applications office NOT ACCEPTING APPLICATIONS APPLY PHONE: 808-832-5961 Trive Barber of UNITS; RENT: Studio: Unit Type: Unit Type: Unit Type: Unit Type: Unit Type: Number of UNITS; RENT: Studio: Studio: Trive Bdrm: 12 0 Four Bdrm: 12 0 Four Bdrm: 12 0 Four Bdrm: 12 0 Four Bdrm: 12 0 Four Bdrm: 12 0 Four Bdrm: 16 0 Four Bdrm: 16 0 Four Bdrm: 12 0 Four Bdrm: 16 0 Four Bdrm: 16 0 Four Bdrm: 17 Federal Low Income projects NUTILITIES INCLUDED: TOTAL UN Minimum Maximum Martine ESTIMATE (Mon Maximum Martine ESTIMATE (Mon Maximum Martine ESTIMATE (Mon Maximum Martine ESTIMATE (Mon Maximum Martine ESTIMATE (Mon Maximum Martine ESTIMATE (Mon Maximum Rent: \$0 for Federal Low Income projects ASSET LIMITS: NONE NO WAITLIST FOR PARKING: PARKING INFO: EASSET LIMITS: NONE ASSET LIMITS: NONE ASSET LIMITS: NONE ASSET LIMITS: NONE ASSET LIMITS: NONE AN OWN RESIDENTAL PROPERTY: NO EASSET LIMITS: NONE ASSET LIMITS: NONE ALCASE: DISTIMATE (Mon CALL EVERY (MON ASSET LIMITS: NONE ALCASE: DISTIMATE (Mon CALL EVERY (MON ASSET LIMITS: NONE ALCASE: DISTIMATE (MON ASSET LIMITS: NONE ALCASE: DISTIMATE (MON ASSET LIMITS: ALCASE: DISTIMATE (MON ASSET LIMITS: AL								Quinones	AGER: Jimary	MAN	
APPLY ATTN: Oahu applications office NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number Iminimum Unit Type: Number Iminimum Iminimum Required: SQ FT: Minimum Iminimum Required: SQ FT: Minimum Iminimum Iminimum Iminimum Iminimum Iminimum Iminimum 12 0 547 1 4 Iminimum 16 0 691 2 6 6 Iminimum Rent: 24 0 936 3 8 6 1200 4 10 6 INT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UN Inimum Rent: S0 for Federal Low Income projects Water and allowance for electricity MiNIMUM WATI L ESTIMATE (Mon Mad of household must be 18 years or older WattLIST FOR PARKING: PET INFO:	OUT-OF-STA APPLICATIO ACCEPTED	A	CATIONS	96817	Honolulu, H		PLICATIONS			APP	
APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number of UNITS: RENT: Winimum Required: SQ FT: MINIMUM Number of People One Bdrm: 12 0 One Bdrm: 12 0 Two Bdrm: 16 0 Four Bdrm: 24 0 Four Bdrm: 8 0 Three Bdrm: 24 0 Four Bdrm: 8 0 VTILITIES INCLUDED: TOTAL UN Minimum Rent: \$0 for Federal Low Income projects UTILITIES INCLUDED: Minimum Rent: \$0 for Federal Low Income projects UTILITIES INCLUDED: MAXIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon MAX	NO									APPLY	
Unit Type: Number of UNITS; RENT: INCOME Required: SQ FT: Number of People Number of People C. Studio: 12 0 547 1 4 Two Bdrm: 16 0 691 2 6 Three Bdrm: 24 0 936 3 8 Four Bdrm: 8 0 1200 4 10 ENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UN MINIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon SEC LIMITS: NONE TO REMAIN ON WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L		ereforyou.org	hphaisherefor	EMAIL: I	FAX: 832-3461		PLICATIONS		-	APPLY P	
of UNITS: RENT: NUMBER SQ FT: NUMBER NUMBER Studio: 0 0 691 2 6 One Bdrm: 16 0 691 2 6 Three Bdrm: 24 0 936 3 8 Four Bdrm: 8 0 1200 4 10 0 INT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UN Inimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L See CRITERIA: TO REMAIN ON WAITL ESTIMATE (Mon ASSET LIMITS: NONE WAITLIST FOR PARKING: PET INFO: PET INFO: PARKING INFO: PARKING INFO: PETS PETSION 250, or cat GENERAL INFO: SISET LIMITINFO: Information of a biologin transitional shelters; ir displaced. Funding: Fed Low Inc Pub Hsing 1 All convictions must be 3 yrs ago, i crystal methamphetamine or sex o provision sex o crystal methamphetamine or sex o Sersons - \$86,000; 3 persons - \$85,200; person	AREGIVER			-				Number	Unit Type:		
One Bdrm: 12 0 547 1 4 Two Bdrm: 16 0 691 2 6 Three Bdrm: 24 0 936 3 8 Four Bdrm: 8 0 1200 4 10 INT INFO: RENT IS 30% OF INCOME: YES VITILITIES INCLUDED: TOTAL UN Inimum Rent: \$0 o 1200 4 10 MINIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon Asset LIMITS: NONE NONE WAITLIST FOR PARKING: PET INFO: PET INFO: PARKING INFO: WAITLIST FOR PARKING: PET INFO: PET INFO: PET INFO: SET LIMITS: NONE NONE LEASE: Todo (under 25 lbs) or cat GENERAL INFO: SET LIMIT INFO: Innot own a house on Oahu LEASE: 1 year FURNISHED: FURNISHED: Furnishedmajor appliances only, no carpet Partly furnishedmajor appliances only, no carpet All convictions must be 3 yrs ago, i crystal methamphetamine or sex o	Allowed:	mber of			SQ FT:		RENT:				
Two Bdrm: 16 0 691 2 6 Three Bdrm: 24 0 936 3 8 Four Bdrm: 8 0 1200 4 10 NT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UN nimum Rent: \$0 of Federal Low Income projects UTILITIES INCLUDED: TOTAL UN Water and allowance for electricity and gas MINIMUM WAIT L ESTIMATE (Mon E CRITERIA: TO REMAIN ON WAITL ESTIMATE (Mon ad of household must be 18 years or older WAITLIST FOR PARKING: PET INFO: PETS NOWN RESIDENTIAL PROPERTY: NO EASE: Inutiple animals ok, but only one fn the categories listed below: one doo (under 25 lbs) or cat GENERAL INFO: SET LIMITS: NONE LEASE: Inutiple animals ok, but only one fn the categories is transitional shelters; in displaced. NOWN RESIDENTIAL PROPERTY: NO EASE: PREFERENCES: Domestic Violen homeless in transitional shelters; in displaced. Some Erigibility = 80% of AMI FURNISHED: Partly furnishedmajor appliances only, no carpet All convictions must be 3 yrs ago, i crystal methamphetamine or sex o Partly furnished-store, \$560,	YES				547			12			
Three Bdrm: 24 0 936 3 8 Four Bdrm: 8 0 1200 4 10 NT INFO: RENT IS 30% OF INCOME: YES TOTAL UN nimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon E CRITERIA: TO REMAIN ON WAITL GALL EVERY (Mon ad of household must be 18 years or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PARKING INFO: PET INFO: MOWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Inview a house on Oahu 1 year COME CRITERIA: FURNISHED: Dree Eligibility = 80% of AMI FURNISHED: Partly furnishedmajor appliances only, no carpet All convictions must be 3 yrs ago, crystal methamphetamine or sex o	YES	H									
Four Bdrm: 8 0 1200 4 10 INT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UN Inimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity MINIMUM WAIT L Immum Rent: \$0 for Federal Low Income projects Water and allowance for electricity MINIMUM WAIT L Immum Rent: \$0 for Federal Low Income projects Water and allowance for electricity MINIMUM WAIT L Immum Rent: \$0 for Federal Low Income projects Water and allowance for electricity MINIMUM WAIT L Immum Rent: \$0 for Federal Low Income projects TO REMAIN ON WAITL ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon Imade of household must be 18 years or older WAITLIST FOR PARKING: PET INFO: PETS ASSET LIMITS: NONE NONE MAXIMUM WAIT L CALL EVERY (Mon AN OWN RESIDENTIAL PROPERTY: NO EEASE: Inultiple animals ok, but only one fr The categories listed below: one doa (under 25 lbs) or cat SET LIMIT INFO: Innot own a house on Oahu IEASE: Inuntiple animals ok, but only one fr Indigalaced. </td <td>YES</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	YES										
ENT INFO: RENT IS 30% OF INCOME: YES Inimum Rent: UTILITIES INCLUDED: TOTAL UN Immum Rent: Water and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: Start and allowance for electricity MINIMUM WAIT L Immum Rent: NONE MAXIMUM WAIT L AN OWN RESIDENTIAL PROPERTY: NO EEASE: Immutiple animals ok, but only one for the categories instead below: Immutiple animals on oahu Immutiple animals ok, but only one for the categories in transitional shelters; in displaced. FURNISHED: Immutiple animal Income: 1 person - \$53,250; Partly furnishedmajor appliances only, no carpet All convictions must be 3 yrs ago, crystal met	YES	10	10	4	1200	i —			Four Bdrm:		
Asset LIMITS: NONE ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: 1 year PREFERENCES: Domestic Violen homeless in transitional shelters; in displaced. FURNISHED: FURNISHED: Partly furnishedmajor appliances only, no carpet Partly furnishedmajor appliances only, no carpet	nths): 3	ESTIMATE (Mont	ESTIM MAXIMU		wance for electricity		e projects				
ASSET LIMITS: NONE ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: Image: Second Condense of Additional State St										-	
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: annot own a house on Oahu COME CRITERIA: ome Eligibility = 80% of AMI aximum Annual Income: 1 person - \$53,250; bersons - \$60,900; 3 persons - \$68,500; bersons - \$76,100; 5 persons - \$82,200; bersons - \$76,100; 5 persons - \$82,200; bersons - \$88,300; 7 persons - \$94,350;	. la						der	e 18 years or ol	sehold must b	ead of hou	
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: annot own a house on Oahu COME CRITERIA: ome Eligibility = 80% of AMI aximum Annual Income: 1 person - \$53,250; bersons - \$60,900; 3 persons - \$68,500; bersons - \$76,100; 5 persons - \$82,200; bersons - \$88,300; 7 persons - \$94,350; ANONE IEASE: 1 year FURNISHED: Partly furnishedmajor appliances only, no carpet Interventional shelters; indisplaced. FURNISHED: Partly furnishedmajor appliances only, no carpet	SOK: YES	k, but only one fro	nimals ok, but	multiple an	D:	ARKING INFO					
SET LIMIT INFO: LEASE: Innot own a house on Oahu I year PREFERENCES: Domestic Violen homeless in transitional shelters; in displaced. COME CRITERIA: FURNISHED: Ome Eligibility = 80% of AMI aximum Annual Income: 1 person - \$53,250; bersons - \$60,900; 3 persons - \$68,500; bersons - \$60,900; 5 persons - \$82,200; bersons - \$76,100; 5 persons - \$82,200; bersons - \$88,300; 7 persons - \$94,350; FURNISHED:							NONE	SSET LIMITS:	А		
Import own a house on Oahu Import own a house on Oahu homeless in transitional shelters; in displaced. Import own a house on Oahu Import own a house on Oahu homeless in transitional shelters; in displaced. COME CRITERIA: Import own a house of AMI FURNISHED: Dome Eligibility = 80% of AMI FURNISHED: All convictions must be 3 yrs ago, in crystal methamphetamine or sex of crystal methamphetamine or sex of persons - \$60,900; 3 persons - \$68,500; bersons - \$62,200; bersons - \$76,100; 5 persons - \$82,200; bersons - \$88,300; 7 persons - \$94,350; Partly furnishedmajor appliances only, no carpet		Domostic Violon					NO	PROPERTY:			
COME CRITERIA: FURNISHED: ome Eligibility = 80% of AMI FURNISHED: aximum Annual Income: 1 person - \$53,250; Partly furnishedmajor persons - \$60,900; 3 persons - \$68,500; Partly furnishedmajor persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350;	PREFERENCES: Domestic Violence victims; nomeless in transitional shelters; involuntary displaced.			homeless i		-					
come Eligibility = 80% of AMI FURNISHED: aximum Annual Income: 1 person - \$53,250; Partly furnishedmajor persons - \$60,900; 3 persons - \$68,500; persons - \$60,100; 5 persons - \$82,200; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350;	100%	Inc Pub Hsing 10	Fed Low Inc P	Funding: F							
ome Eligibility = 80% of AMI FURNISHED: aximum Annual Income: 1 person - \$53,250; Partly furnishedmajor persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350; Partly furnishedmajor											
						Partly furnishe		ximum Annual Income: 1 person - \$53,250; ersons - \$60,900; 3 persons - \$68,500; ersons - \$76,100; 5 persons - \$82,200; ersons - \$88,300; 7 persons - \$94,350;			
ERSON MAXIMUM MONTHLY INCOME: 4570				Į.		4570	E:	NTHLY INCOM	IAXIMUM MO	ERSON	
PERSONS MAXIMUM MONTHLY INCOME: 5220						5220	ИЕ:	ONTHLY INCOM	MAXIMUM M	ERSONS	

	Last Compl	ete Update:	12/15/2021			AREA:	Waianae
PROJECT NAME:	WAIMAHA/SUN	IFLOWER	(HPHA-lee) - CLOSED		PROJECT TYPE:	Family
ADDRESS:	85-186 McArthur St.					PHONE: 808-697	-7171
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX: 697-717	4
APPLY TO:	: Mandy Miyamoto : HPHA			APPLY ADI 1002 North Honolulu, H NOT ACCE	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:	: Oahu applications offic	ce			-		NO
APPLY PHONE:	808-832-5961			EMAIL: hphaisheref FAX: 832-3461			g
	Type: Number		Minimum		MINIMUM	MAXIMUM	
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
One E	adio: Bdrm: 52	0		513	1	4	YES
Two B	Bdrm: 46	0		650	2	6	YES
Three B	Bdrm: 32	0		991	3	8	YES
Four B	Bdrm:						
Security Deposit is	0 for Federal Low Incom equal to rent amount ED 8/2/2016***** Communication by project I must be 18 years or old	et is		T FOR PARKING:	PET INFO	MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 36 AIT LIST (Months): 60 AITLIST
			Included	·	Subject to		LIS OK. JES
	ASSET LIMITS:	NONE]		
AN OWN RESID					GENERAL	INFO: NCES: Domestic V	iolonoo viotimo:
			LEASE: 1 year		homeless displaced.	Fed Low Inc Pub Hs	ers; involuntary
					Ŭ	ions must be 3 yrs a	C C
NCOME CRITERIA: ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 3 persons - \$100,450				crvs		thamphetamine or s	
-PERSON MAXIMI	UM MONTHLY INCOME	≣:	4570		μ		
2-PERSONS MAXIN	MUM MONTHLY INCOM	5220					

	Last Compl	ete Update:	10/16/2023			AREA: Waimanalo		
PROJECT NAME: WAI	MANALO A		ITS			PROJECT TYPE:	Family	
ADDRESS: 41-545	Hihimanu St.					PHONE: 808-259	-5649	
CITY: Waimai	nalo	STATE: HI	ZIP:	96795		FAX: 259-970	5	
June		<u> </u>		00100				
MANAGER: Linda		0		APPLY AD 41-545 Hihi Hawaii 967	imanu Street, W	aimanalo,	OUT-OF-STATE APPLICATION	
APPLY ATTN:		.5					ACCEPTED: YES	
APPLY PHONE: 808-25	59-5649			FAX: 259-9705		vaimanalo@cmi.ne vaimanaloapartmei		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Studio:								
One Bdrm:	37	1473	2.5xrent	576		3	YES	
Two Bdrm:	28	1768	2.5xrent	720		5	YES	
Three Bdrm:	8	2043	2.5xrent	864		7	YES	
Four Bdrm:	2	2280	2.5x rent	1134		9	YES	
RENT INFO: RENT IS 30 Rent range - 1 bdrm - \$1093 - \$1312 2 bdrm - \$1312 - \$1575 3 bdrm - \$1516 - \$1819, 2 4 bdrm - \$1691 - \$2029, 2 AGE CRITERIA:	bath		UTILITIES INC Electricity and	-		MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE FO REMAIN ON W	(Months): AIT LIST (Months): 'AITLIST	
Head of household must b	e 18 years or ol	der	WAITLI	ST FOR PARKING:		CALL EVERY		
			PARKING INFO		PET INFO:	F	ETS OK: NO	
A AN OWN RESIDENTIAL	SSET LIMITS:				GENERALI			
ASSET LIMIT INFO:					Project doe	s not maintain a w		
			LEASE: ar			are filled on a first-come, first-serve basis. Barbecue area, on bus line		
<u> </u>					http://www.	waimanaloapartme	ents.com/	
NCOME CRITERIA:					onsite mgm	nt by Cambridge M	gmt. Inc.	
NCOME CRITERIA: //aximum Annual Income: 1 person - \$55,020; / persons - \$62,880; 3 persons - \$70,740; / persons - \$78,600			Partly furnishedmajor Asi appliances only Sei env Pic			Application: Ask management to mail it Send request with self-addressed stamped envelope Pick up from manager's office Request through waimanaloapartments.com		
I-PERSON MAXIMUM MO	NTHLY INCOMI	≣:	4585		1			

	Last Comple	ete Update:	10/16/2023			AREA:	Waimanalo
PROJECT NAME:	Waimanalo Em	ergency S	Shelter; prev	viously Wei	nber	PROJECT TYPE:	Emergency
ADDRESS:	41-490 Saddle City Rd.					PHONE: 808-204	-0982
CITY:	Waimanalo	STATE: HI	ZIP:	96795		FAX: 744-061	6
	Valinaliaio	<u> </u>		00100			
MANAGER	: Destiny, Site Manager			APPLY ADI	DRESS:		
APPLY TO							OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						NO
APPLY PHONE	: 204-0982		F	4X: 744-0616	EMAIL:	www.kahumana.org	
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio: 8			180	2	4	
One	Bdrm: 8			420	3	4	
Two I	Bdrm: 7			550	3	6	
Three	Bdrm: 7			950	5	10	
Four	Bdrm:]	J	NO
5	NT IS 30% OF INCOME	YES	UTILITIES INCLU	DED:	_	ΤΟΤΑΙ	L UNITS: 30
Emergency Shelte 30%; cap \$250/mo			All utilities			MINIMUM WA ESTIMATE (
						MAXIMUM WA ESTIMATE (-
AGE CRITERIA:						TO REMAIN ON W	AITLIST
18уо			WAITLIST	FOR PARKING:		CALL EVERY (
			PARKING INFO:		PET INFO	: P	ETS OK: NO
1	10057 UN#70				ADA certii		1011
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:	NO			J GENERAL	INFO [.]	
ASSET LIMIT INF			LEASE:		Must parti	cipate in programs a	as determined by
			Program agreeme	ent: 90 Days	casework Playgroun Must follo Must be w		isabled.
	١٨٠		ļ			-	
None	A.		FURNISHED:				
			Stove, refrigerato inflatable mattres				
J					Į		

1-PERSON MAXIMUM MONTHLY INCOME:

ADDRESS: Humuniki St. & Humuna PI. CITY: Waimanalo STATE: HI ZIP: 96735 MANAGER: Roberta Kahele APPLY ADDRESS: 1002 North School St. OUT APPLY TO: HPHA NOT ACCEPTING APPLICATIONS NOT ACCEPTING APPLICATIONS APPLY PHONE: 808-832-5961 EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 EMAIL: hphaishereforyou.org Minimum Number of UNITS: RENT: Minimum Number APPLY PHONE: 808-832-5961 CAR Monimum One Bdrm: 19 0 877 2 6 APPLY PHONE: CAR Twoe Bdrm: 19 0 877 2 6 APPLY BORES TOTAL UNITS: TOTAL UNITS: Three Bdrm: 18 0 11171 4 10 People: SSTIMATE (Monits) Minimum Rent IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS: Minimum Rent: S0 for Federal Low Income projects Maximut WAIT LIS CASET LIMITS: NONE NOXE SSTI	analo	AREA: Waimana	ARI			12/15/2021	lete Update:	Last Comp		
CITY: Waimanalo STATE: HI ZIP: 96795 FAX: 233-3769 MANAGER: Roberta Kahele APPLY ADDRESS: 1002 North School St. OUT NOT ACCEPTING APPLICATIONS AP NOT ACCEPTING APPLICATIONS AP APPLY ATM: Cahu applications office NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Maximum CAR Studio: Iminimum Iminimum SG FT: Monimum Maximum Maximum Maximum AP Two Bdrm: 19 0 877 2 6 AP Three Bdrm: 18 0 11017 3 8 T Four Bdrm: 19 0 877 2 6 T Minimum Rent: 30% OF INCOME: YES YES YESTIMATE (Monthe MAXIMUM WAT LIS ESTIMATE (Monthe MAXIMUM WAT LIS EST	У	CT TYPE: Family	PROJECT TY	ACC	wind) - NOT	II (HPHA-\	HOMES I &	AIMANALO I	ROJECT NAME:	
CITY: Waimanalo STATE: HI ZIP: 96795 MANAGER: Roberta Kahele APPLY ADDRESS: 002 North School St. 001 APPLY TO: HPHA NOT ACCEPTING APPLICATIONS AP APPLY ATTN: Oah applications office NOT ACCEPTING APPLICATIONS AP NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number of UNITS: RENT: Minimum INCOME Required: SQ FT: MINIMUM MAXIMUM Studio: Image and the second applications office SQ FT: MINIMUM MAXIMUM Studio: Image and the second applications office SQ FT: MINIMUM MAXIMUM CAR Studio: Image and the second applications office SQ FT: MINIMUM MAXIMUM AP Three Bdrm: 19 0 377 2 6 Image and allowance for electricity MINIMUM WAIT LIST Minimum Rent: \$30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS: Maximum Rent:		808-233-3766	PHONE: 808-				na Pl.	muniki St. & Humun	ADDRESS:	
Market		233-3769	FAX: 233-		96795	ZIP:	STATE: HI	imanalo	CITY:	
APPLY TO: HPHA NOT ACCEPTING APPLICATIONS Honolulu, HI 66817 NOT ACCEPTING APPLICATIONS AP APPLY ATTN: Oshu applications office NOT ACCEPTING APPLICATIONS EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: of UNITS: of UNITS: For Bdrm: Number of UNITS: Number Minimum NCOME Required: Minimum NCOME Required: Minimum Number of People CAR Number Of People Two Bdrm: 19 0 877 2 6 Two Bdrm: 18 0 1017 3 8 Four Bdrm: 18 0 1017 3 8 Minimum Rent: \$0 for Federal Low Income projects UTILITIES INCLUDED: TOTAL UNIT: Water and allowance for electricity and gas TOTAL UNIT: Minimum Rent: \$0 for Federal Low Income projects AGE CRITERIA: Head of household must be 18 years or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PET S DI multiple animals ok, but only one from the categories listed below: one doa lunder 23 liss or cat AN OWN RESIDENTIAL PROPERTY: NONE LEASE: Typer PET INFO: PET S DI multiple animals ok, but only one from the categories listed below: one doa lunder 23 liss or cat GENERAL INFO: NOCME CRITERIA: LEASE: Iyper Iyper PET INFO: </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>oberta Kahele</td> <td>MANAGER</td>								oberta Kahele	MANAGER	
IMALL: hphaishereforyou.org IMAIL: hphaishereforyou.org IMINIMUM	T-OF-STAT	APPLI ACCI	PLICATIONS	HI 96817	Honolulu, H		PPLICATIONS		APPLY TO:	
APPLY PHONE: 808-832-5961 FAX: 832-3461 Unit Type: Number of UNITS: RENT: Studio: Minimum NCOME Required: SQ FT: MINIMUM Number of People MAXIMUM Number of People One Bdrm: 9 877 2 6 Two Bdrm: 19 0 877 2 6 Three Bdrm: 18 0 1017 3 8 7 RENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS Winimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT LIS ESTIMATE (Months MAXIMUM WAIT LIS ESTIMATE (Months MAXIMUM WAIT LIST FOR PARKING: AGE CRITERIA: ASSET LIMITS: NONE VAITLIST FOR PARKING: PET INFO: CALL EVERY (Months MAXIMUM WAIT LIST ESTIMATE (Months MAXIMUM WAIT LIST FOR PARKING: AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: 1 year One doa (under 25 lbs) or cat GENERAL INFO: NCOME CRITERIA: LEASE: 1 year Displaced. (B) substandard hing; red Leases in transitional shell Displaced. (B) substandard hing; red Leases in transitional shell Displaced. (B) substandard hing; red Leases in transitional shell NCOME CRITERIA: NOW INCE If y	NO									
Unit Type: Number of UNITS: RENT: NCOME Required: SQ FT: Number of People Number People: CAR People: Studio: Image: Super- of People Sumber of People Number People CAR People Studio: Image: Super- of People Super- People Number People CAR People Two Bdrm: 19 Image: Super- People Super- People Image: Super- People Im		eforyou.org	IL: hphaishereforyc	EMAIL:	FAX: 832-3461			08-832-5961	APPLY PHONE	
One Bdrm: 19 0 877 2 6 Two Bdrm: 19 0 877 2 6 Three Bdrm: 18 0 1017 3 8 7 RENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS Minimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT LIS ESTIMATE (Months MAXIMUM WAIT LIS ESTIMATE (Months MAXIMUM WAIT LIS AGE CRITERIA: TO REMAIN ON WAITLIST FOR PARKING: PET INFO: PETS OF ASSET LIMITS: NONE ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: EASE: Cannot own a house on Oahu LEASE: PREFERENCES: (A) domestic violen victims; homeless in transitional shell: part of income. (C) others = indefinite wait INCOME CRITERIA: Income Eligibility=80% of AMI Income Eligibility=80% of AMI	EGIVER llowed:	ber of CAREG	r Number of	Number	SQ FT:	INCOME	RENT:		Unit	
Investignment 19 0 07 2 0 Three Bdrm: 18 0 1017 3 8 Four Bdrm: 4 0 1171 4 10 RENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS Minimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT LIS SestimATE (Months MAXIMUM WAIT LIS ESTIMATE (Months AGE CRITERIA: TO REMAIN ON WAITLIST FOR PARKING: PET INFO: PETS OI AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO LEASE: 1 year PREFERENCES: (A) domestic violen vicine; homeless in transito: violen vicine; homeless in tran										
Four Bdrm: 18 0 1171 4 10 Four Bdrm: 4 0 1171 4 10 RENT INFO: RENT IS 30% OF INCOME: YES UTILITIES INCLUDED: TOTAL UNITS Minimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT LIS ESTIMATE (Months MAXIMUM WAIT LIS ESTIMATE (Months AGE CRITERIA: TO REMAIN ON WAITLIS CALL EVERY (Months Head of household must be 18 years or older WAITLIST FOR PARKING: PET INFO: PETS OI AN OWN RESIDENTIAL PROPERTY: NO EASET LIMITS: NONE LEASE: 1 year 1 year 1 year 1 year PREFERENCES: (A) domestic violen victims; homeless in transitional shelt Displaced. (B) substandard hsing; re of income. (C) others = indefinite wait Funding: Fed Low Inc Pub Hsing 100 NCOME CRITERIA: NCOME CRITERIA: Income Eligibility=80% of AMI	YES	0					0			
RENT INFO: RENT IS 30% OF INCOME: YES Minimum Rent: \$0 for Federal Low Income projects UTILITIES INCLUDED: TOTAL UNITS Minimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity and gas MINIMUM WAIT LIS' ESTIMATE (Months MAXIMUM WAIT LIS' ESTIMATE (Months CALL EVERY (Mont	YES									
Minimum Rent: \$0 for Federal Low Income projects Water and allowance for electricity MINIMUM WAIT LIS and gas ESTIMATE (Months AGE CRITERIA: TO REMAIN ON WAITLIS' Head of household must be 18 years or older WAITLIST FOR PARKING: ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Cannot own a house on Oahu LEASE: INCOME CRITERIA: LEASE: INCOME CRITERIA: I year	TES	TEX		Į	1	ļ	0	4		
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a house on Oahu INCOME CRITERIA:	5): 36 T 5): 60 T 5): 12	STIMATE (Months):	ESTIMA MAXIMUM ESTIMA TO REMAIN OI CALL EVE		ST FOR PARKING:	and gas WAITLIS	lder	2016*****	AGE CRITERIA:	
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a house on Oahu LEASE: I year UNCOME CRITERIA: GENERAL INFO: GENERAL INFO: PREFERENCES:(A) domestic violen victims; homeless in transitional shelt Displaced. (B) substandard hsing; re of income. (C) others = indefinite wait Funding: Fed Low Inc Pub Hsing 100 Income Eligibility=80% of AMI	i each of	below:	egories listed below	the catego	,		NONE	ASSET LIMITS:		
Cannot own a house on Oahu LEASE: victims; homeless in transitional shelt 1 year Displaced. (B) substandard hsing; re of income. (C) others = indefinite wait NCOME CRITERIA: Income Eligibility=80% of AMI				-						
INCOME CRITERIA:	ter; invol. ent >50% t.	PREFERENCES:(A) domestic violence victims; homeless in transitional shelter; invol. Displaced. (B) substandard hsing; rent >50% of income. (C) others = indefinite wait.			1 year Displa of inco					
	70	C C	•	, i i i i i i i i i i i i i i i i i i i						
Maximum Annual Income: 1 person - \$53,250; Partly furnishedmajor All convictions must be 3 yrs ago, unl		All convictions must be 3 yrs ago, unless it's crystal methamphetamine or sex offender				Partly furnished	,250; ; ;	persons - \$60,900; 3 persons - \$68,500; persons - \$76,100; 5 persons - \$82,200; persons - \$88,300; 7 persons - \$94,350;		
-PERSON MAXIMUM MONTHLY INCOME: 4570				И		4570	IE:	MONTHLY INCOM	-PERSON MAXIM	
-PERSONS MAXIMUM MONTHLY INCOME: 5220						5220	ME:	M MONTHLY INCO	-PERSONS MAXIN	

		Last Compl	ete Update:	1/5/2022			AREA:	Waipahu	
PROJECT NAME:	WAIF	PAHU HAL	L ELDERL	Y			PROJECT TYPE: Elderly		
ADDRESS:	94-1060) Waipahu St.					PHONE: 808-671	-3801	
CITY:	l Waipah	u	STATE: HI	ZIP:	96797		FAX: 680-045	6	
			<u> </u>	ļ					
	Kelsey		ior Community N istant Communit ent Inc.		APPLY AD Waipahu H 94-1060 Wa Waipahu, H	all aipahu St., Offi	ce	OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	:							_	
	: 808-67	71-3801		F	FAX: 680-0456	EMAIL:	waipahu@cmiweb.r	net	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm:	72	0		636		3	YES	
	Bdrm:								
Three I	Bdrm:								
Four I	Bdrm:							NO	
Max rent is \$1465 AGE CRITERIA: Head of household	d must b		dar ar	Electricity and wa	ater		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 18 AIT LIST (Months): 24 AITLIST	
disabled. Other m children, grandchil	embers	of the househol	d may be	WAITLIS PARKING INFO:	T FOR PARKING:	PET INFO:		ETS OK: NO	
of age and older.	iuren, sic	lings, or menus	To years	Parking included			reasonable accomr		
		SSET LIMITS:							
AN OWN RESID				LEASE:			enter & social activit	ies	
				1 year, then mor	nth-to-month	Recreation A gated co On-site ma Guest inte	& lush landscaping 1 room with tv 1 mmunity on busline 1 nagement 1 rcom system	9	
INCOME CRITER 2021 data - Maxim \$40,260; 2 person	num ann			FURNISHED: Partly furnished- appliances only, floor		Recycling program Transportation to Shopping available th Catholic Charities Hawai'l Application:			
I-PERSON MAXIM	IUM MOI	NTHLY INCOM	≣:	3355		Į.			
2-PERSONS MAXI		ONTHLY INCOM	ΛE:	3835					

	Last Comple	ete Update:	12/15/2021			AREA:	Waipahu
ROJECT NAME:	WAIPAHU I (HF	PHA-lee) -	NOT ACCE	PTING APP	S	PROJECT TYPE:	Family
ADDRESS:	94-111 Pupuole St.					PHONE: 808-483	-2550
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX: 483-255	2
MANAGER	: Marcus Asami			APPLY AD			OUT-OF-STATE
APPLY TO:	: HPHA NOT ACCEPTING AP	PLICATIONS		Honolulu, H		CATIONS	APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications offic NOT ACCEPTING AP						NO
APPLY PHONE	: 808-832-5961		I	FAX: 832-3461	EMAIL:	hphaishereforyou.oi	·9
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St One E	Bdrm:						
Two E Three E		0		650 817	2	6 8	YES YES
Four E	3drm:						
AGE CRITERIA:	8/2/2016***** I must be 18 years or old	der	PARKING INFO	T FOR PARKING	PET INFO:		(Months): 36 AIT LIST (Months): 60 AITLIST (Months): 12 ETS OK: YES
	ASSET LIMITS:	NONE	Included		the catego	nimals ok, but only c pries listed below: under 25 lbs) or cat	ne from each of
AN OWN RESID ASSET LIMIT INFO Cannot own a hous	-	NO	LEASE: 1 year		homeless displaced.	NCES: Domestic V in transitional shelte	ers; involuntary
2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 person - \$53, 10; 3 persons - \$68,500; 10; 5 persons - \$82,200; 10; 7 persons - \$94,350;	250;	FURNISHED: Partly furnished appliances only		All convict	ions must be 3 yrs a thamphetamine or s	ago, unless it's
-PERSON MAXIM	UM MONTHLY INCOME	E:	4570				
PERSONS MAXI	MUM MONTHLY INCOM	1E:	5220				

	Last Comple	te Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIPAHU II (HF	PHA-lee)	- NOT ACC	EPTING APF	<mark>PS (</mark>	PROJECT TYPE:	Family
ADDRESS:	94-132 Pupupuhi St.					PHONE: 808-483	-2550
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX: 483-255	2
	,	Į	,				
MANAGER	: Marcus Asami						
APPLY TO	: HPHA NOT ACCEPTING APP	LICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APP						NO
APPLY PHONE		LIOATIONO		FAX: 832-3461	EMAIL:	hphaishereforyou.o	g
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:						
Two I	Bdrm: 16	0		635	2	6	YES
Three	Bdrm: 4	0		822	3	8	YES
Four	Bdrm:			ļ			
AGE CRITERIA:	8/2/2016***** d must be 18 years or olde	ər	WAITLIS	T FOR PARKING:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 36 AIT LIST (Months): 60 AITLIST
			PARKING INFO		PET INFO:		ETS OK: YES
1	ASSET LIMITS:	NONE	Included		the catego	nimals ok, but only c ries listed below: inder 25 lbs) or_cat	ne from each of
AN OWN RESID	DENTIAL PROPERTY:	10			GENERAL	INFO:	
ASSET LIMIT INFO	-		LEASE: 1 year		homeless displaced.	ENCES: Domestic V in transitional shelte Fed Low Inc Pub Hs	ers; involuntary
INCOME CRITERI	IA:					ions must be 3 yrs a thamphetamine or s	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,29 20; 3 persons - \$68,500; 20; 5 persons - \$82,200; 20; 7 persons - \$94,350;	50;	FURNISHED: Partly furnished appliances only				
₽ 1-PERSON MAXIM	IUM MONTHLY INCOME:		4570		R.		
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

	Last Comple	ete Update:	10/16/2023			AREA	Waipahu
PROJECT NAME:	WAIPAHU TOW	/ERS				PROJECT TYPE	
ADDRESS:	94-337 Pupumomi St.					PHONE: 808-75	3-9440
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX:	
	: Sonja Tupua : Mark Development, Ind	 2.		APPLY ADI 3165 Waiala Honolulu, H	ae Avenue, Sui	te 200	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE:			F	AX: (781)295-342		nttps://www.mdiha er	waii.com/waipahutow
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One B		0		482	1	4	
Two B	Bdrm: 62	0		684	2	5	YES
Three B							
Four B	sarin:			J	J	J	YES
30% of household's	NT IS 30% OF INCOME s income		UTILITIES INCLU Electricity and wa			TOT/ MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:						TO REMAIN ON V	VAITLIST
Head of household	must be 18 years or old			FOR PARKING:		CALL EVERY	
ļ	ASSET LIMITS:		PARKING INFO: Parking included There is a charge stalls.		PET INFO:		PETS OK: NO
	ENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO):		LEASE: 1 year		Amenities: Laundry Ro	Recreation Area,	Playground,
			,			roject based Sec	8
INCOME CRITERI	A:					riminal checks	
2 persons - \$48,20	ncome: 1 person - \$42,2 0; 3 persons - \$54,350; 0; 5 persons - \$65,100	200;	FURNISHED: Partly furnished appliances only	major		:nttps://www.main k up from manag	awaii.com/waipahut er's office
I 1-PERSON MAXIMI	UM MONTHLY INCOME	E:	3516		ļ		
2-PERSONS MAXIN	MUM MONTHLY INCOM	1E:	4016				

		Last Compl	ete Update:	12/16/2021			AREA	Moilili
PROJECT NAME:	WEIN	NBERG HA	LE				PROJECT TYPE	Singles or Couple
ADDRESS:	2734 S.	King St.					PHONE: 808-94	6-6953
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX: 973-06	05
MANAGER:	Chris (Gerson			APPLY AD			
		ng Solutions, Inc				m case manage	er	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:	Chris (Gerson						NO
APPLY PHONE:	946-69	953		F	AX: 973-0605	EMAIL: (chris@hsiservices	.net
Unit ⁻	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Sti	udio:	60	1250		266	1	2	
One B	drm:							
Two B	drm:							
Three B								
Four B	drm:							
Security Deposit \$1 Section 8 accepted Shelter + Care prog or other housing vo	l gram			All utilities include	d		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 1 /AIT LIST (Months): 6
Head of household	must b	e 18 years or old	der		FOR PARKING:		CALL EVERY	
				PARKING INFO:	YES	PET INFO:		PETS OK: YES
	А	SSET LIMITS:		Tenant parking \$ pre approved by r guest parking is a between 7am to1	management, available	Under 25 p	ounds; limit 1 per	unit
AN OWN RESID		PROPERTY:	NO		opin.	GENERAL	INFO:	
				LEASE: Month to month		Funding: Shelter + C Funding: F		Section 8 100%
	۸.			ļ		Ask manag	, gement to mail it est with self-addre	ssed stamped
	4:			FURNISHED: No carpet, full siz microwave, and c cabinet, kitchener	counter top	envelope Pick up fro	m manager's offic est to maretta@h	e
I 1-PERSON MAXIMU	JM MO	NTHLY INCOME	Ē:	4230		Į		
2-PERSONS MAXIN		ONTHLY INCOM	1E:	4835				

	Las	st Complete	Update:	7/16/2020			AREA	Lanakila
PROJECT NAME:	WEINBER	RG SENI	OR RES		AT MALUHIA		PROJECT TYPE	Elderly
ADDRESS:	, 1111 Hala Dr.						PHONE: 808-84	42-1082
CITY:	l Honolulu	S.	TATE: HI	ZIP:	96817		FAX: 843-01	157
	R: Canary McCli		nt Manager		APPLY AD 1055 Kalo I Honolulu, H	Place, Suite 10	03	OUT-OF-STATE APPLICATION
): Bob Tanaka,	inc.						ACCEPTED: YES
APPLY ATTN	l:					EMAIL:		
APPLY PHONE	: 808-949-411 ²	1			FAX: 949-7211	EWAIL.		
			RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio:							YES
		9	0		400+	1	3	
Three	Bdrm:	¦						
		¦						
Four	Bdrm:			ļ	J	J	ļ	
RENT INFO: RE Preference is no la frail (needing help living eg: eating, d rent is \$25. Depo (whichever is high	onger given to a with at least 3 Iressing, shoppi sit equal to 1 m	applicants whe activities of dation ing, etc.) Min	o are aily imum	UTILITIES INC Water, \$81 uti	-	_	MINIMUM V ESTIMATE MAXIMUM V	E (Months): 12
AGE CRITERIA:				lt.				E (Months): 36
Head of household							TO REMAIN ON CALL EVER	
or older at time of	application. Ca	regiver must	be 18+		IST FOR PARKING: O: YES	PET INFO):	PETS OK: NO
				Parking includ	led but limited			
	ASSET	LIMITS: NO	NE			J		
AN OWN RESI		PERTY: NO		ļ		GENERAL	-	
ASSET LIMIT INF		terest in resid	lential	LEASE:		accessibl	hower and closet, ve e, community center	er. Lounge, trash
real estate.				1 year		lanai area allowed w	as, storage lockers.	work outside home
INCOME CRITER							ager, interior lands Activity Coordinato	
MUST BE LESS T (Project follows HI						Funding:	HUD PRAC 202	
I 1-PERSON MAXIN	IUM MONTHLY	INCOME:		3821		J		
2-PERSONS MAXI	IMUM MONTHL	Y INCOME:		4367				

	T LOCH E					PROJECT TYPE:	Elderlv
ADDRESS: 91-147						PHONE: 808-681	
	2 Romon Rd.					FAX: 681-414	
CITY: Ewa Be	each	STATE: HI	ZIP:	96706		FAA. [001-414	10
MANAGER: Koane Lisa C	eti Lauaki - Resi Dasay - Project A			APPLY AD 91-1472 Re	DRESS: Inton Road, Ewa	Beach. Hi	OUT-OF-STAT
APPLY TO: Hawa	ii Affordable Pro	perties, Inc		96706		2000.1,11	APPLICATIO ACCEPTED
APPLY ATTN:							YES
APPLY PHONE: 808-6	81-0562			FAX: 681-4140	EMAIL: k	oanetil@hawaiiaffo	ordable.com
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	90	865	2x rent	556	1	2	YES
One Bdrm:	60	940	2x rent	686	1	3	YES
Two Bdrm:							
Three Bdrm:							
Four Bdrm:							NO
	es available (ma	ax of \$170)	Gas (for stove a water	UDED: nd water heater) ar	nd	MINIMUM W	
application fee. mited number of subsidi teck with management of aitlist purged every 6 mo spond or will be remove	company. onths; applicants		· ·		nd	MINIMUM WA ESTIMATE MAXIMUM WA	AIT LIST (Months): 12
nited number of subsidi eck with management of aitlist purged every 6 mo spond or will be remove	company. onths; applicants		· ·			MINIMUM W	AIT LIST (Months): 12 AIT LIST (Months):
nited number of subsidi eck with management of aitlist purged every 6 mos spond or will be remove BE CRITERIA: residents must be 62 y	company. onths; applicants d from list rears or older, sp	s must	water	nd water heater) ar		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	AIT LIST (Months): 12 AIT LIST (Months): 12 /AITLIST
nited number of subsidi eck with management of aitlist purged every 6 mo spond or will be remove EE CRITERIA: residents must be 62 y 55+. Handicap or disa	company. onths; applicants d from list rears or older, sp	s must	water	nd water heater) ar T FOR PARKING:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	AIT LIST (Months): 12 AIT LIST (Months): 12 /AITLIST
nited number of subsidi eck with management of aitlist purged every 6 more spond or will be remove E CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement.	company. onths; applicants d from list rears or older, sp bled persons ne	s must pouse must red to meet	WAITLIS PARKING INFO: \$10/month are total of 53 pa	nd water heater) an T FOR PARKING: FOR PARKING: There arking stalls.	T PET INFO: 1 cat, birds,	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	AIT LIST (Months): 12 AIT LIST (Months): 7 (AITLIST (Months): 7 PETS OK: YES er 30 pounds.
nited number of subsidi eck with management of aitlist purged every 6 mo spond or will be remove EE CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement.	company. onths; applicants d from list rears or older, sp bled persons ne	s must pouse must red to meet	WAITLIS PARKING INFO: \$10/month	nd water heater) an T FOR PARKING: <u>YES</u> There arking stalls. on first come	T PET INFO: 1 cat, birds, Reg. w/ mgr	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY Fish, or 1 dog und mt & vets "clean bi	AIT LIST (Months): 12 AIT LIST (Months): 7 (AITLIST (Months): 7 PETS OK: YES er 30 pounds.
nited number of subsidi eck with management of aitlist purged every 6 mos spond or will be remove GE CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement.	company. onths; applicants d from list rears or older, sp bled persons ne	s must pouse must red to meet	WAITLIS PARKING INFO: \$10/month are total of 53 pi Stalls assigned first serve and w	nd water heater) an T FOR PARKING: <u>YES</u> There arking stalls. on first come	T PET INFO: 1 cat, birds, Reg. w/ mgr GENERAL II	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY Fish, or 1 dog und mt & vets "clean bi	AIT LIST (Months): 12 (Months): // (Months): // (Months): // (Months): // PETS OK: YES er 30 pounds. ill of health"
nited number of subsidi eck with management of aitlist purged every 6 mos spond or will be remove BE CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement. AN OWN RESIDENTIA SET LIMIT INFO: ly if income from assets come.	company. onths; applicants d from list rears or older, sp bled persons ne ASSET LIMITS: L PROPERTY:	s must pouse must red to meet YES NO	WAITLIS PARKING INFO: \$10/month are total of 53 pa Stalls assigned	nd water heater) an T FOR PARKING: <u>YES</u> There arking stalls. on first come	T PET INFO: 1 cat, birds, Reg. w/ mgr GENERAL II Caregivers has a separ Funding: Pa Asst Prgm a Recreation	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W CALL EVERY fish, or 1 dog und mt & vets "clean bi NFO: are allowed with M articipating in the C and Sec. 8 and Re hall with tv, 24/7 S	AIT LIST (Months): 12 AIT LIST (Months): 7 (AITLIST (Months): 7 ETS OK: YES er 30 pounds. ill of health" 1D letter. Studio sliding door. Dity Housing Rntl ent Supplmnt Prgm ecurity; Resident
nited number of subsidi eck with management of aitlist purged every 6 mos spond or will be remove E CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement. A AN OWN RESIDENTIA SET LIMIT INFO: ly if income from assets come. ental unit must be prima	company. onths; applicants d from list rears or older, sp bled persons ne ASSET LIMITS: L PROPERTY:	s must pouse must red to meet YES NO	WAITLIS PARKING INFO: \$10/month are total of 53 pr Stalls assigned first serve and w LEASE:	nd water heater) an T FOR PARKING: <u>YES</u> There arking stalls. on first come	T PET INFO: 1 cat, birds, Reg. w/ mgr GENERAL II Caregivers has a separ Funding: Pa Asst Prgm a Recreation Services Co Shopping a	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W CALL EVERY fish, or 1 dog und mt & vets "clean bi NFO: are allowed with M articipating in the C and Sec. 8 and Re hall with tv, 24/7 S pordinator; Transporvailable through C	AIT LIST (Months): 1; AIT LIST (Months): 7 (AITLIST (Months): 7 (Months): 7 (M
nited number of subsidi eck with management of aitlist purged every 6 me spond or will be remove EE CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement. AN OWN RESIDENTIA SET LIMIT INFO: ly if income from assets come. ental unit must be prima COME CRITERIA: aximum Annual Income:	company. onths; applicants d from list rears or older, sp bled persons ne ASSET LIMITS: L PROPERTY: s puts applicant of ry residence.	s must pouse must red to meet YES NO	WAITLIS PARKING INFO: \$10/month are total of 53 pr Stalls assigned first serve and w LEASE:	nd water heater) an T FOR PARKING: <u>YES</u> There arking stalls. on first come	T PET INFO: 1 cat, birds, Reg. w/ mgr GENERAL II Caregivers has a separ Funding: Pa Asst Prgm a Recreation Services Co Shopping a Hawaii; ope walk-up, lar	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W CALL EVERY F fish, or 1 dog und mt & vets "clean bi NFO: are allowed with M atte bedroom, with articipating in the C and Sec. 8 and Re hall with tv, 24/7 S oordinator; Transpov vailable through C. ned 1993; no elev nais	AIT LIST (Months): 12 AIT LIST (Months): 7 (AITLIST (Months): 7 (Months): 7 (M
nited number of subsidi eck with management of aitlist purged every 6 m spond or will be remove BE CRITERIA: residents must be 62 y 55+. Handicap or disa e requirement.	company. onths; applicants d from list rears or older, sp bled persons ne ASSET LIMITS: L PROPERTY: s puts applicant of ry residence.	s must pouse must red to meet YES NO	WAITLIS PARKING INFO: \$10/month are total of 53 pi Stalls assigned first serve and w LEASE: 1 year	nd water heater) ar T FOR PARKING: YES There arking stalls. on first come vaitlist.	T PET INFO: 1 cat, birds, Reg. w/ mgr GENERAL II Caregivers has a separ Funding: Pa Asst Prgm a Recreation Services Co Shopping a Hawaii; ope walk-up, lar	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W CALL EVERY F fish, or 1 dog und mt & vets "clean bi NFO: are allowed with M ate bedroom, with articipating in the C and Sec. 8 and Re hall with tv, 24/7 S oordinator; Transpov vailable through C ned 1993; no elev	AIT LIST (Months): 12 AIT LIST (Months): 7 (AITLIST (Months): 7 (Months): 7 (M

	Last Compl	ete Update:	7/16/2020			AREA:	Salt Lake
PROJECT NAME:	WESTLAKE AF	PARTMENT	S			PROJECT TYPE:	Family
ADDRESS:	3139 Ala Ilima St.					PHONE: 808-839	9-2027
CITY:	Honolulu	STATE: HI	ZIP:	96818		FAX: 834-710	07
	2: Dana Montero, Reside D: Hawaiian Properties L	-		APPLY AD 1165 Bethe Honolulu, H	I St., 2nd Fl.		OUT-OF-STATE APPLICATION ACCEPTED:
	ŀ						YES
	: 808-839-2027		F	AX: 521-2714	EMAIL:	None	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm: 96	0		872	3	6	
Three				072			
Four	Bdrm:						
RENT INFO: RE section 8 (project	NT IS 30% OF INCOME based)		JTILITIES INCLL Water	JDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 12 AIT LIST (Months): 48
	d must be 18 years or ol	der	WAITUST	FOR PARKING:		CALL EVERY	
ļ			PARKING INFO: \$40 per stall; ma		PET INFO	: F	PETS OK: NO
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY: O:		EASE:		GENERAL	INFO: g pool, picnic area, I	aundry area
						Section 8 100% PONSE IN 2021	
INCOME CRITER	IA:						
50% AMI 5 persons - \$63,00 6 persons - \$67,69			URNISHED:				

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	11/2/2023			AREA:	Wahiawa
OJECT NAME: WH	IITMORE CI	RCLE APA	RTMENTS			PROJECT TYPE:	Elderly
ADDRESS: 111 M	N Circle Makai St.					PHONE: 0: 808-	753-8474, C: 808-
CITY: Wahi	awa	STATE: HI	ZIP:	96786		FAX: eFax: 3	23-648-8212
	ra Lynn Daniels - I k Development, Ir		r	APPLY AD 3165 Waial Hawaii 968	lae Ave. #200,	Honolulu,	OUT-OF-STA APPLICATIC ACCEPTEL
APPLY ATTN: Mar	·	735-9099	F	AX: (781)295-34		http://www.mdihawa laurad.mdihawaiic	
			Minimum		MINIMUM	MAXIMUM	
Unit Type	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
Studio: One Bdrm							YES
Two Bdrm		0		516		2	YES
Three Bdrm		0		645	1	3	
Four Bdrm							YES
				ļ	J	p	TES
bosit 155 - 1 bedroom 355 - 2 bedroom E CRITERIA: ad of household mus				FOR PARKING:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months):
abled. Other member age, including child	ren if head of hous	sehold is	PARKING INFO:	N/A	PET INFO:	F	PETS OK: YES
al guardian.	ASSET LIMITS:		Parking included			llowed with restriction	ons
N OWN RESIDENT	IAL PROPERTY:	YES	LEASE:			s are allowed with M	
			1 year		eligibility.3 Built in 19 Pictures a	me. Caregiver inco handicapped acce 90 vailable on shiconsulting.com/v	ssable units.
OME CRITERIA:					Smoke Fre	ee; Coin Operated	laundry facility
% of Honolulu Mediar	n Income		FURNISHED: Partly furnished- appliances only	-major	television Education Open gaze Application	and computers with al and social activiti ebo and outside lou n:Download from m om manager's office	i printer ies nge area dihawaii.com
ERSON MAXIMUM M	IONTHLY INCOM	E:	3004		<u> </u>		
ERSONS MAXIMUM	MONTHLY INCO	ME:	3433				

		Last Comp	lete Update:	12/26/2023			AREA:	Makiki
ROJECT NAME:	WILD	DER VISTA	4				PROJECT TYPE:	Family
ADDRESS:	1618 Pi	unahou St.					PHONE: 808-947	-4846
CITY:	Honolul	u		ZIP:	96822		FAX: 956-144	6
MANAGER	: Yvette	James, Reside	ent Manager		APPLY AD P.O. Box 22			OUT-OF-STAT
APPLY TO	: Locatio	ons			Honolulu, H	II 96823		APPLICATIO
APPLY ATTN	I: Proper	rty Managemen	t Division					YES
APPLY PHONE	: 808-73	38-3100			FAX: 735-1978	EMAIL:	http://www.locations ble-rentals.aspx	srentals.com/afford
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
I	Bdrm:	6	500	2.5x rent	525			
I	Bdrm:	48	1260	2.5x rent	600			
Three	Bdrm:							
Four	Bdrm:							YES
ENT INFO: RE HTC property ection 8 certifica oss income requ	te holder	rs need not mee		UTILITIES INC Water & Sewer			MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 2
GE CRITERIA:							TO REMAIN ON W	
ead of household	d must b	e 18 years or o	der	WAITLI	ST FOR PARKING:		CALL EVERY	
				PARKING INFO		PET INFO	: F	ETS OK: NO
				61 parking stal	lls			
		SSET LIMITS:						
AN OWN RESIE		PROPERTY:	YES			GENERAL		
l income from as gibility.	ssets is v	verified to detern	mine	LEASE: 6 months; ther	n month-to-month	bathroom units	has linen closet and	
	IA:			J				
ood stamps acce iteria. 0% of AMI: 1 Per 0% of AMI: 1 Per	epted to I rson \$27	,510, 2 persons	\$31,440	FURNISHED: Partly furnishe appliances only				
ERSON MAXIM	IUM MO	NTHLY INCOM	E:	3820		ļ		
PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	4366				

		lete Update:	7/16/2020			AREA:	Wahiawa
DJECT NAME: WILI	<mark>KINA PAR</mark>	K				PROJECT TYPE:	Elderly
ADDRESS: 298 Wili	kina Dr.					PHONE: 808-622	-6125
CITY: Wahiaw	а	STATE: HI	ZIP:	96786		FAX: 622-612	7
MANAGER: Debra	Fong			APPLY AD	DRESS:		OUT-OF-ST/
APPLY TO: Wilikin	a Park Apartmo	ents					APPLICATIO ACCEPTE
APPLY ATTN:							YES
PPLY PHONE: 808-62	2-6125		F	AX: 622-6127	EMAIL: w	ilikinapark@sanda	lwoodmgt.com
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	45	800	2xrent	479	1	2	YES
One Bdrm:	19	875	2xrent	627	1	2	YES
Two Bdrm:							
Three Bdrm:							
Four Bdrm:				J			NO
ger waits for one bedro nove in: must pay ONE ivalent deposit . Not pr E CRITERIA:	full month's re					ESTIMATE (MAXIMUM W/ ESTIMATE (TO REMAIN ON W	AIT LIST (Months):
e member must be 55 o -, roommate can be 55 o			WAITLIST	FOR PARKING:		CALL EVERY	(Months):
owed over 18yrs old. Ch			PARKING INFO:	YES	PET INFO:		ETS OK: YES v
			Long w/l for park is included	ing, but parking	Birds, fish, a note.	and small dogs OK	with doctor's
A: N OWN RESIDENTIAL	SSET LIMITS:				J GENERAL I	NFO [.]	
SET LIMIT INFO:			LEASE:		Opened 19	94	
			1 year		clubhouse, maintenanc 5 handicapp	CCH shopping van, trash chute on eve e person lives on s bed units (3 for mo	ry floor, site.
COME CRITERIA:					impairment Funding: Lo Rental Assi) w Income Housing stance Program	g Tax Credit &
XIMUM income: erson - \$43,980 eople - \$50,220			FURNISHED: Partly furnished- appliances only. Bathtubs in all ur ground floor.	Carpet.	.	DNSE IN 2021	
			I				

		Last Comp	lete Update:	5/8/2023			AREA:	Chinatown
PROJECT NAME:	WINS	STON HAI	E				PROJECT TYPE:	Family
ADDRESS:	1055 R	iver St.					PHONE: 808-744	4-1307
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX: 744-130	08
		Gonsalves, Site	-		APPLY ADI 1055 River S Honolulu, H	St.		OUT-OF-STATE APPLICATION
								ACCEPTED:
APPLY ATTN	-	-		F	AX: 744-1308	EMAIL:	None	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	97	850	2x Rent	310	1	2	YES
	Bdrm:							
Three	Bdrm: Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE Timely reponses to required				UTILITIES INCLU Gas, electricity an			MINIMUM W ESTIMATE MAXIMUM W	(Months):
AGE CRITERIA:				μ.			ESTIMATE TO REMAIN ON V	
Head of household	d must b	e 18 years or o	lder	WAITLIST	FOR PARKING:		CALL EVERY	
				PARKING INFO: Parking not avail	NO	PET INFC	e: Finable accomodation	PETS OK: NO
	A	SSET LIMITS:	NONE	Parking not avail	able	managem		i irom
AN OWN RESI	DENTIAL	PROPERTY:	YES			GENERAI	_ INFO:	
ASSET LIMIT INF	0:			LEASE: 1 year		Funding:	unknown	
Maximum Annual 1 person - \$54,900 2 persons - \$62,70	0;			FURNISHED: Partly furnished allpiances only	-major			
I 1-PERSON MAXIN	IUM MO	NTHLY INCOM	E:	4220		Į		
2-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	4820				

JECT NAME:	WIST	ERIA VIS	TA				PROJECT TYPE:	Elderly
ADDRESS:	1239 So	outh King St.					PHONE: 808-808	-597-8963
CITY:	Honolul	u	STATE: HI	ZIP:	96814		FAX: 735-197	8
	-		,	,				
MANAGE	R: Kayla	Kedro, Resident	Manager		APPLY ADD 1239 S King	St		OUT-OF-STA
APPLY TO	D: Wister	ia Vista			Honolulu, H	96814		
	N: Reside	ent Manager						YES
	E: 808-59	97-8963			FAX: 808-735-1978	3	http://www.locations ble-rentals.aspx	
Uni	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:							
	Bdrm: Bdrm:	91	805	2xrent	384			YES
	Barm: Bdrm:							
	Bdrm:							YES
ome requireme	ent. Secti	uded to meet m on 8 certificate l ss income requi	nolders	Water & Sewer			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
E CRITERIA:				-			TO REMAIN ON W	· •
residents mus	t be 62 o	rolder					CALL EVERY	
				PARKING INFO	stalls; once all	PET INFO:	F	ETS OK: NO
	A	SSET LIMITS:	NONE		gned, occupancy enants without a	ļ		
N OWN RESI		PROPERTY:	YES			GENERAL	-	A '
	0.			LEASE: 1 Year		conditione and multi-	able and phone sep d units. Coin-opera purpose room on sit ker available on site	ted laundry room e. Library. CCH
						Walking d	istance to grocery s ts. Has emergency	tore, bus line and
OME CRITER		50% AMI:		FURNISHED:			.IHTC - 50% AMI, R	HTF
erson - \$45,8 ersons - \$52,4	350			Partly furnished appliances, viny window mini blin bathtub.	/l flooring,		ation to Shopping av harities Hawai'l	vailable through
				3820		ļ		
ERSON MAXIN		NTHLY INCOM	=.	3020				