	Last Comp	lete Update:	4/16/2024			AREA	: Makiki
PROJECT NAME:	1506 P'IKOI AI	PARTMENT	ΓS			PROJECT TYPE	Family
ADDRESS:	1506 Piikoi St.					PHONE: 808-53	86-1506
CITY:	Honolulu	STATE: HI	ZIP:	96822		FAX:	
MANAGER	R: Pam Sakai			APPLY AD	DDRESS:		OUT-OF-STATE APPLICATION
APPLY TO	D: Contact Pam Sakai fo	or an application					ACCEPTED:
APPLY ATTN	l:				EMAIL.	nama@haisaniaa	a not
APPLY PHONE	E: 808-536-1506			FAX: 973-0605	EWAIL:	pams@hsiservice	s.net
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	800			1	2	
One	Bdrm:	900			1	3	
Two	Bdrm:	1200			4	5	
Three	Bdrm:	1500			5	7	
Four	Bdrm:						
RENT INFO: RE	NT IS 30% OF INCOME	E: NO	UTILITIES INC Electricity, wat	CLUDED: er, sewer, and refus	se	MINIMUM V ESTIMATE MAXIMUM V	(Months): 3
AGE CRITERIA:						TO REMAIN ON	
18 and older			WAITL PARKING INF	IST FOR PARKING O: YES	: PET INFO	CALL EVERY	PETS OK: NO
J.	ASSET LIMITS:						
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:		Call for ap office Two 3 & 2 All applica homeless	story walk up buil ints must be exper ness, sheltered or	up from manager's dings. iencing unsheltered, prior
\$45,850; 2 person	IA: 50% of HUD Oahu AMI; ns - \$52,400; 3 - \$58,950 750; 6 - 76,000; 7 - \$81,2); 4 -	FURNISHED:		conviction offender.	two years prior; no Must show legal re lust be able to pay	esidency if not a
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	3821		II.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	4367				

ſ		omplete Update:	4/12/2024			AREA:	
	1727 SOUT		IA STREET			PROJECT TYPE:	J. 4
ADDRESS:	1727 S. Beretania	St.				PHONE: 808-94	
CITY:	Honolulu	STATE: H	ZIP:	96826		1700 330 33	10
MANAGER	R: Josephine Michae	el		APPLY AD	DRESS:		OUT-OF-STA
APPLY TO	: Housing Solution	s, Inc.					APPLICATIO ACCEPTEI
APPLY ATTN	l:						
APPLY PHONE	E: 808-944-5020			FAX: 955-5915		Website: https://wv Email: josephine@	
	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 0	0					
	Bdrm: 18	942		600	2	4	
Three E		1131		700	5	7	
	Bdrm: 0						
			,	,	,	,	
	NT IS 30% OF INC		UTILITIES INCL	LUDED:	_	TOTA	AL UNITS: 23
meless and hav	e homeless or at ris re at least one child red every 6 months	under age 18.	Water/sewer			MINIMUM W ESTIMATE	
e waitiist.						MAXIMUM W ESTIMATE	
E CRITERIA:						TO REMAIN ON V	_
or older.				ST FOR PARKING:	-	CALL EVERY	
			PARKING INFO): YES	PET INFO:		PETS OK:
	ASSET LIMI	TS:					
	DENTIAL PROPER	TY:			GENERAL		
SET LIMIT INFO	<u>0:</u>		LEASE:		one-and tv	ne permanent hous vo-bedroom apartn	nents for family
			Month-to-month	1	risk of bei	. Applicants must to ng homeless and h r 18. Laundry facili	ave at least one
COME CRITERI	IA:		,		fee.		
ax \$25,260 1 bdi ax \$33,930 2 bdi	rm		FURNISHED:				
ERSON MAXIM	IUM MONTHLY INC	COME:	0				

	Last Com	plete Update:	4/11/2024			AREA:	Wahiawa		
PROJECT NAME:	220 California	1				PROJECT TYPE:	Elderly		
ADDRESS:	220 California Ave.					PHONE: 808-220	0-7671		
CITY:	Wahiawa	STATE: HI	ZIP:	96786	FAX : 808-484-4051				
MANAGER:	: Darlene Higa				aha Street #26		OUT-OF-STATE		
APPLY TO:	: Property Profiles Inc Attn: Darlene Higa	;.		Aiea, Hawaii	96701		APPLICATION ACCEPTED:		
APPLY ATTN:	: Property Manageme	ent Division					YES		
APPLY PHONE:	: 808-220-7671		F/	AX : 808-484-4051		darlene@pro808.co	om		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
	udio:								
One B		925	1470	403	1	2			
Two B									
Three B									
Four B	Bdrm:						NO		
Fixed rent of \$925; ertificate holders no income requirement *Confirmation letter	eed not meet the min nt. r is sent after applicat nanagement if contac	mum gross	UTILITIES INCLU All utilities include phone (\$25 per month)			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 1 VAIT LIST (Months): 3		
All residents must l	be 55 or older		WAITLIST	FOR PARKING:		CALL EVERY	(Months):		
			PARKING INFO:		PET INFO:	F	PETS OK: YES		
J	ASSET LIMITS	: NONE	1 stall for each un	iit					
AN OWN RESID	ENTIAL PROPERTY	: YES			GENERAL		Domanumit.		
ACCET EINIT IN	<i>.</i>		LEASE: 1 year		meeting ro area, victo manager. 2 handicar	007. Picnic Area, Com, elevator, priva ry garden, visitor poped accessible un	te park with BBQ arking, on-site its.		
INCOME CRITERIA	A:		,		*Failure to	nted laundry on each respond to commu	unication from		
50% AMI: 1 persor	n \$45,850; 2 persons pted to help meet mir		FURNISHED: Partly furnished appliances; vinyl i garbage disposal, shower.	flooring,		ent in a timely man oved from the waitl			
 1-PERSON MAXIMU	UM MONTHLY INCO	ME:	3820]				

	Last Complet	e Update:	4/12/2024			AREA:	Waikiki
PROJECT NAME:	436 ENA ROAD	- CLOSED				PROJECT TYPE:	1
	436 Ena Rd.	OLOGED				PHONE:	J,
	<u> </u>					FAX:	
CITY:	Honolulu	STATE: HI	ZIP:	96815		,	
MANAGER	: UNDER CONSTRUCTION	ON		APPLY ADD			OUT-OF-STATE
APPLY TO):			дрропштеп	Corny		APPLICATION ACCEPTED:
APPLY ATTN	l:				EMAIL:		
APPLY PHONE	i:			FAX:	EWAIL.		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:				1	2	
	Bdrm:						
	Bdrm:						
Three E							
Four I	Bdrm:]	
RENT INFO: RE	NT IS 30% OF INCOME:		JTILITIES INCL	UDED:		TOTA	AL UNITS: 32
			Electric and wat			MINIMUM W	
						ESTIMATE	(Months): 0
						MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	
				T FOR PARKING:		CALL EVERY	Į.
		F	PARKING INFO	:	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:						
AN OWN RESID	DENTIAL PROPERTY:				" GENERAL	INFO:	
ASSET LIMIT INFO			.EASE:				
		Г					
INCOME CRITERI	IA:	,					
		F	URNISHED:				
-PERSON MAXIM	IUM MONTHLY INCOME:		0		Į.		
P-PERSONS MAXI	MUM MONTHLY INCOME	<u>:</u> :	0				

		Last Comp	lete Update:	6/5/2024			AREA:	Waikiki	
PROJECT NAME:	AINA	HAU VIS	ГА				PROJECT TYPE:	Elderly	
ADDRESS:	2428 Tu	ısitala St.					PHONE: 808-926-6700		
CITY:	Honolul	u	STATE: HI	ZIP:	96815		FAX:		
MANAGER APPLY TO					APPLY ADE 2428 Tusital Honolulu, HI	a St		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN: Resident Manager's Office APPLY PHONE: 808-738-3100						EMAIL:	•	YES nsrentals.com/afford	
APPLY PHONE	: 808-73	38-3100			FAX : 735-1978		able-rentals		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm:	99	1225	2xrent	403				
Two	Bdrm:	7	1470	2xrent	607				
Three	Bdrm:								
Four	Bdrm:							YES	
11 Units - 30%AM 88 Units - 50% AM 7 Units - 50%AM Section 8 certifical Grass income room AGE CRITERIA: All residents must	MI 1 Bedrill 2 B	room - \$1053.0 com - \$1195.0 rs need not me	et the min	PARKING INF 18 tenant/ 5 h \$40/mo. Once assigned, occ	IST FOR PARKING: O: YES andicap stalls all stalls upancy to be enants who do not	PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY : F	/AIT LIST (Months): 60 VAITLIST (Months): 60 VAITLIST (Months): PETS OK: NO	
INCOME CRITERIA: 30% of AMI: 1 person \$27,450; 2 persons \$31,350 50% of AMI: 1 person \$45,750; 2 persons \$52,250 Food stamps accepted to help meet min. income criteria. Sect 8 certificate holders need not meet min. income requirements.			EASE: 1 year FURNISHED: Partly furnishedmajor appliances only; has A/C, window blinds, disposal, vinyl flooring, walkin shower		Opened 2007. Has Social Worker on site p time. 6 handicapped units. Community roc with kitchen; picnic area, transportation, priv park/Victory Garden 6 visitor parking stalls, coin laundry on grou floor. Funding: Low Income Housing Tax Credits (50 % of AMI)				
1-PERSON MAXIM				3675		ļi.			
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	4200					

Las	st Complete Update:	6/5/2024			AREA:	Waikiki
ROJECT NAME: AINAHAU	J VISTA II				PROJECT TYPE:	Elderly
ADDRESS: 2426 Tusitala	St.				PHONE: 808-926	6-6700
CITY: Honolulu	STATE: HI	ZIP:	96815		FAX:	
MANAGER: Bernadette T	ai		APPLY ADD	a St		OUT-OF-STA
APPLY TO: Ainahau Vista	a II		Honolulu, H	96815		APPLICATIO ACCEPTED
APPLY ATTN: Resident Mar	nager's Office					
APPLY PHONE: 808-738-3100	0	F	FAX:		https://www.locatio able-rentals	nsrentals.com/affo
Unit Type: Num of UN	nber NITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 1	5 1140	2x rent	377			
One Bdrm: 4	7 1225	2x rent	420			
Two Bdrm:						
Three Bdrm:						
Four Bdrm:						YES
6 units - 30% AMI studio - \$574 9 units - 50% AMI studio - \$901 41 units - 50% AMI 1 bedrroom - 6 units - 60% AMI 1 bedroom - \$	per month \$966 per month	Electricity, Water	r, Sewer		MINIMUM W ESTIMATE MAXIMUM W	(Months):
AGE CRITERIA:					ESTIMATE	, ,
55+		MAITH IO	F FOR RADIVING		TO REMAIN ON W CALL EVERY	
		PARKING INFO:	FOR PARKING:	PET INFO:	F	PETS OK: NO
ASSET	LIMITS:	22 parking stalls to 50% and 60% month				·
AN OWN RESIDENTIAL PROF				GENERAL	INFO:	
ASSET LIMIT INFO:		LEASE:		Locked en Communit	y room for recreational activities	onal and
NCOME CRITERIA:		,				
Maximum Income 1 Person 2 30% AMI \$27,450/yr \$ 50% AMI \$45,750/yr \$	2 Persons 31,350/yr 52,250/yr 62,700/yr	FURNISHED: Range/Oven, Ga Refrigerator/Free floor covering, W Coverings, walking	ezer, Resilient Indow			
-PERSON MAXIMUM MONTHLY		4410]		

		Last Comp	lete Update:	6/19/2024			AREA	. McCully
PROJECT NAME:	ARTES	SIAN VIS	TA				PROJECT TYPE	: Elderly
ADDRESS:	1828 Your	ng St.					PHONE: 808-94	9-5936; 808-947-4
CITY:	CITY: Honolulu STATE:			ZIP:	96826		FAX: 949-5238	
MANAGER	t: Joshua S	Smith, Interim	ı Manager		APPLY ADI 1828 Young	g St		OUT-OF-STATE
APPLY TO	: Artesian	Vista			Honolulu, H	II 96826		APPLICATION ACCEPTED:
APPLY ATTN	I: Resident	Manager's C	Office					YES
APPLY PHONE	: 808-738-	3100			FAX: 735-1978	EMAIL:	http://www.location ble-rentals.aspx	nsrentals.com/afforda
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	53	1100	2xrent	420			
Two	Bdrm:							
Three I								
Four	Bdrm:			<u> </u>		J		YES
RENT INFO: RE 6 units at 30% AM 47 units at 50% AI 2 handicapped un to meet min incomholders are not rec	MI rent \$619 MI rent \$11 its; food sta ne requirem	5 00 amp benefit onent and Sec	can be used	UTILITIES INC			MINIMUM V ESTIMATE MAXIMUM V	VAIT LIST
AGE CRITERIA:				r.			TO REMAIN ON	(Months): 60
All residents must	be 55 or o	lder		WAITL PARKING INF	IST FOR PARKING: O: NO	PET INFO	CALL EVERY	
					lls; \$40/ month		•	7 2 10 GIV. NO
		SET LIMITS:						
AN OWN RESIDE		ROPERTY:	YES	LEASE:		*Confirma	. INFO: ution letter is mailed	d once application
none				LEASE.		closet in b bars, no to on every f	outer area and com pathroom, walk in s ub, has kitchen par loor.	
INCOME CRITERIA: 30% of AMI: 1 person \$29,250; 2 persons \$33,420 50% of AMI: 1 person \$48,750; 2 persons \$55,700 preference for 30% units given to lowest income (<20%AMI) minimum income is 2x rent				ces, vinyl flooring, linds, a/c. garbage	OPEN ap	ocial worker prox. 9/2006 LIHTC, RHTF, Sec	tion 8	
						NO RESF	PONSE IN 2020. LA	AST UPDATE 2019

1-PERSON MAXIMUM MONTHLY INCOME:

Last Complete Update:	10/15/2021	AREA: Palama
PROJECT NAME: BANYAN STREET MAN	IOR	PROJECT TYPE: Family
ADDRESS: 1122 Banyan St.		PHONE: 808-843-0021
CITY: Honolulu STATE:	H 2IP: 96817	FAX: 376-0042
MANAGER: Jodie Sakai APPLY TO: Banyan Street Manor	APPLY ADD 1122 Banyan Honolulu HI	St. OUT-OF-STATE
APPLY ATTN: Jodie Sakai		YES
APPLY PHONE: 808-843-0021	FAX : 376-0042	EMAIL: manager@banyanstreetmanor.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: 12 Two Bdrm: 42		1 6
Three Bdrm:		
Four Bdrm:		
RENT INFO: RENT IS 30% OF INCOME: YES 30% of adjusted monthly gross income. Must respond to communication from management in a timely manner or be removed from waitlist.	UTILITIES INCLUDED: Hot and cold water, Trash, Sewer	MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): 84
AGE CRITERIA:		TO REMAIN ON WAITLIST CALL EVERY (Months):
Head of household must be 18 years or older at the time of application.	WAITLIST FOR PARKING: PARKING INFO: NO	PET INFO: PETS OK: NO
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY:		GENERAL INFO:
ASSET LIMIT INFO:	LEASE:	Application: Ask management to mail it or email it Send request with self-addressed stamped envelope Pick up from manager's office
INCOME CRITERIA:	FURNISHED: Partly furnishedmajor appliances only	NO RESPONSE IN 2023.
1-PERSON MAXIMUM MONTHLY INCOME:	3525	

			lete Update:	6/30/2023			AREA:	,
ROJECT NAME:			T APARTME	ENTS			PROJECT TYPE:	
ADDRESS:	916 Birch	n St.					PHONE : 808-597	
CITY:	CITY: Honolulu STATE			ZIP:	96814		FAX : 589-289	97
MANAGER:	Kayla K	edro, Residen	t Manager		APPLY AD P.O. Box 2			OUT-OF-STATI
APPLY TO: Locations					Honolulu, F	H 96823		APPLICATION ACCEPTED:
APPLY ATTN:	Property	y Managemen	t Division					YES
APPLY PHONE:	808-738	3-3100			FAX: 735-1978		http://www.location ble-rentals.aspx	srentals.com/afforda
Unit 7	ype:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bo	!							
Two B	!	52	1450	2	600			YES
Four B	!							YES
RENT INFO: REN Units are advertised Section 8 certificate gross income requi	d in the r holders	newspaper who	en available.	TILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:			ĮĮ.				ESTIMATE TO REMAIN ON W	
Head of household	must be	18 years or o	lder	WAITI	IST FOR PARKING:		CALL EVERY	
			P	ARKING INF		PET INFO:	F	PETS OK: NO
				ree	ŕ			
AN OWN RESIDE		SET LIMITS: PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO	:			EASE:		Funding: L	IHTC, RHTF	
			1	year		Ask manag	s: from website gement to mail it m Locations ofifice	;
NCOME CRITERIA	۸:							
Maximum Yearly In: 1 person \$50,640 2 persons \$57,840 3 persons \$65,100 4 persons \$72,300	come		F	URNISHED: Partly furnisheappliances on				

		Last Compl	ete Update:	10/18/2021			AREA:	Chinatown
PROJECT NAME:	CHIN	IATOWN C	ATEWAY	' PLAZA			PROJECT TYPE:	Family
ADDRESS:	1031 No	uanu Ave.					PHONE: 808-524	1-3737
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 528-529	99
	Rande : Hawaii	Huang, Residen atte McEnroe P an Affordable P s Ma	roperty Manage	er	APPLY ADI Chinatown 0 1031 Nuuan Honolulu, Ha	Gateway Plaz	a	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 808-52	24-3737		F	FAX: 528-5299	EMAIL:		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	1	1100	2050	500	1	2	YES
One	Bdrm:	199	1200	2160	555	1	3	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE Rent posted is the 1 Bedroom - 60% AMI - \$1200; \$1400; 140% AMI accept section 8 GRAPPIN OVER IT AGE CRITERIA: Head of household time of application AN OWN RESID ASSET LIMIT INF	80% AM - (Market rooidoot d must be	of a range. II - \$1300; 1209 II) \$1500. III biotopuis not III Biotopuis not	6 AMI - Varifiable der at the	PARKING INFO: Parking starts at depends on rent	T FOR PARKING: NO \$40 mo. and	PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY : F	(Months): 6 AIT LIST (Months): 36 /AITLIST (Months): 12 PETS OK: NO
INCOME CRITER Maximum income 60% AMI 80% AMI 120% AMI 140% AMI	IA:	20 \$60,480 500 80,600 800 120,900	\$68,040 90,650	FURNISHED: Partly furnished-appliances only. Washer/dryer in	Carpet or tile.	Rental As	sistance Program. In deck with bbq grill	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	4/12/2024			AREA:	Chinatown
ROJECT NAME:	CHIN	IATOWN I	MANOR				PROJECT TYPE:	Family
ADDRESS:	175 Noi	rth 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						APPLICATION ACCEPTED:
APPLY ATTN	: Winnie	e Louie						YES
APPLY PHONE	: 808-54	15-1996			FAX: 536-6808	EMAIL: \	winniel@hawaiiaffc	ordable.com
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:	89	612	2.5x rent	310	1	2	YES
One E	3drm:							
Two E								
Three E								
Four E	3drm:							NO
RENT INFO: REI 310 sq ft \$612 330 sq ft \$636 450 sq ft \$646 Must respond to co in a timely manner	ommunio	cation from mar	nagement	UTILITIES INCI Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
AGE CRITERIA:							TO REMAIN ON V CALL EVERY	
Head of household time of application		e 18 years or o		WAITLIS PARKING INFO		PET INFO:		PETS OK: NO
	A	SSET LIMITS:	NONE					
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO) :			LEASE:		Waitlist is	open until decision	to close.
				1 year			indry facility and co 2 adults only	ommunity room
NCOME CRITERI	A:			,				
Maximum Annual 2 persons - \$66,84		1 person - 58,	500	FURNISHED: Partly furnished appliances only				
-PERSON MAXIM	им моі	NTHLY INCOM	IE:	4875]		
-PERSONS MAXII	мим мо	ONTHLY INCO	ME:	5570				

	Last Comple	ete Update:	7/27/2023			AREA:	Ewa
PROJECT NAME:	D.E. THOMPSO	N VILLA	SE (EWA '	VILLAGE ELD	ERL	PROJECT TYPE:	Elderly
ADDRESS:	91-1295 Renton Rd.		•			PHONE: 808-681	-4960
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		FAX : 681-496	60
	Lwa Deach	0171121 111		30700			
MANAGER	: Susan Lee, EAH			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO	: Closed for application						APPLICATION ACCEPTED: YES
APPLY ATTN	l:						120
APPLY PHONE	:: 808-681-4960			FAX:	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 84	0		600	1	3	YES
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						NO
rent is 30% to a m allowance = \$100° Deposit is based or responsible for up	NT IS 30% OF INCOME taximum of \$1165 minus 1 on income. **Applicants a dating any change in infomber and address.	\$68 utility	UTILITIES INC Water; \$68 ut Utility Allowan		ge	TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	` '
	spouse, must be 62 year		WAITI	IST FOR PARKING:		CALL EVERY	
provide a doctor's	(section 515). If disabled note (disability does not	need to be	PARKING INF		PET INFO		PETS OK: YES
disclosed) or copy	of SSI/SSDI benefit lette	er.	Parking include	ded	Service a	nimal only, with MD	etter, max 30 lbs.
	ASSET LIMITS:	YES]		
AN OWN RESIDE	DENTIAL PROPERTY: O·	YES			GENERAL	INFO:	7 total 5 for
	ts cannot put applicant o	ver income	1 year		wheelcha hearing in Caregiver outside he	ir w/1 for sight impa npairment. Priority g s are allowed with N ome. If elderly tenan e may rent unit, mus	irment, 2 for iven to 30% AMI. ID letter; can work t dies, under age
INCOME CRITER	IA:				eligible. F	unding: Farmers Ho ation. CCH Shopping	me
	Tenant must have adeq nt to afford own basic livi lectric, etc.)		Partly furnishe appliances or	edmajor	opened 1	992. Must respond tagement in a timely	to communication
I 1-PERSON MAXIM	IUM MONTHLY INCOME	Ē:	4575		1		

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		Last Compl	ete Update:	4/12/2024			AREA:	Ewa
PROJECT NAME:	FRAN	NCISCAN	VISTAS E	WA			PROJECT TYPE:	Elderly
ADDRESS:	91-1471	Miula St.					PHONE : 808-681	I-4000
							FAX: 681-400	
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706		,	
MANAGER	: Comm	unity Director -	Geraldine Bare	eng	APPLY A			OUT OF STATE
APPLY TO	: Francis	scan Vistas Ewa	a			/liula St, 7000 th, HI 96706		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Attn: L	easing Office						YES
APPLY PHONE	: 808-68	31-4000			FAX: 681-4001	EMAIL:	assistant@Francisc www.Franciscanvis	
Unit	Type:	Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
	tudio:							
	Bdrm:	126	1290	2Xrent	530	1	n/a	
	Bdrm:	23	1512	2Xrent	750	1	n/a	
Three F								YES
RENT INFO: RE 6 - 1 bedroom unit w/\$664 rent with m \$1176 - \$1380; Mi certif. holders. Min Stamp/Rent subsic	ts w/\$577 ninimum n. incom n income	1 rent and 2 - 2 income required e not needed fo	bedroom ment of or Sec 8	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
AGE CRITERIA:	- ,			Įt.			ESTIMATE	` , <u> 12</u>
62 years of age at	the time	of application a	and for all	WAITLI	ST FOR PARKING	:	TO REMAIN ON W CALL EVERY	
applicants.				PARKING INFO		PET INFO	: F	PETS OK: NO
]				Parking based 102 stalls total	on availability,	Service ar	nimals ok	
AN OWN RESID		SSET LIMITS: PROPERTY:	YES			GENERAL	. INFO:	
ASSET LIMIT INFO	O:			LEASE:			: Community cente	
Assets are taken income eligibility.	nto cons	ideration in dete	ermining	1 year		room, fitne laundry in	room, kitchen, activess room, salon and each building.	l lap pool. On-site
INCOME CRITERI	IA:			,			30% AMGI, 1 unit @ @ 60% AMGI	@ 50% AMGI
\$31,440	30% AMI - 1 person - max - \$27,510, 2 person max - \$31,440 60% AMI - 1 person - max - \$52,880, 2 person -			refrigerator, disposal, air Ask man			n: iciscanvistasewa.co igement to mail it om manager's office	
1-PERSON MAXIM	IOM MUI	NTHLY INCOME	≣:	4410				

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OJECT NAME:	HALAWA VIEV	N				PROJECT TYPE:	Family	
	99-009 Kalaloa St.					PHONE: 808-488	3-3613	
CITY:	Aiea	STATE: HI	STATE: HI ZIP: 96701			FAX: 486-6150		
	R: Tammy K. Lopez D: Halawa View Apts.			APPLY AD 99-009 Kal Aiea HI 96	aloa St.		OUT-OF-STA APPLICATIO	
	N: Management Office						ACCEPTEI NO	
	E: 808-488-3613		F	AX: 486-6150	EMAIL:	tammy@pacificdg.o	com	
Uni	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Studio:							
	Bdrm: 52	0		630	1	5	YES	
	Bdrm : 56 Bdrm : 12	0		1080	4	9	YES	
mited number o wo bdrm: \$948 - nree bdrm: \$105 bur bdrm: \$1147 pdates not requ	FNT IS 30% OF INCOM of Section 8 units - \$1500 maximum. 53 - \$1850 maximum. 7- \$2000- maximum ired to remain on waitlis		UTILITIES INCLU Electricity, gas an			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): AIT LIST (Months):	
GE CRITERIA: ead of househol	ld must be 18 years or c	older		FOR PARKING:	:	TO REMAIN ON W CALL EVERY		
	ASSET LIMITS:	NONE	PARKING INFO: Parking included; when asking for 2		PET INFO:	r	ZETS OK. INO	
AN OWN RESI SSET LIMIT INF	DENTIAL PROPERTY:	YES			GENERAL	INFO: R APPLICATIONS		
			LEASE: 1 year; then mont	h-to-month	- mdihawa		ce	
COME CRITER			1					
ax Income for Sec. 8 units: 2 persons: \$24,750; 3 ersons: \$27,850; 4 persons: \$30,900 MGI 30%, 50%, and 60% 2014 HHFDC income nit for LIHTC		FURNISHED: Partly furnished appliances only.	major					

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	Last	t Complet	e Update:	5/7/2024	Ī			AREA:	Kalaeloa
PROJECT NAME:	HALE HA'	I KA'C	PUA (B	uilding 37	7)			PROJECT TYPE:	Family
	Building 37, 91-							PHONE: 808-682	!-1949
CITY	<u> </u>		STATE: HI	ZIP:				FAX: 682-197	
CITT	Kapolei		STATE: HI	ZIP:		96707		·	
	: Richelle Taylo Rtaylor@Cant : 91-1078 Yorkt HI 96707	well-Ande		-	Kapolei	APPLY ADI 91-1078 Yo Kapolei HI 9	rktown St.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	l: Cloudbreak Ha	awaii, LLC	/ Attn: Leas	ing Team					TLS
APPLY PHONE	: 808-682-1949				FAX	: 682-1970	(CloudbreakCommu CloudbreakHawaii@	
Unit	Type: Numbro of UN		RENT:	Minimur INCOMI Require	≣	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 38	3	825	1.5 x rei	nt	221	1	1	
One I	Bdrm:								
Two I	Bdrm:								
Three I	Bdrm:								
Four I	Bdrm:								YES
RENT INFO: RE \$825 deposit and units are single roufor independent si	first month's ren	t with app Affordable	roval. All	UTILITIES I Water, elec				TOTA MINIMUM W ESTIMATE	
ioi independent si	rigie veteraris or	oulers.						MAXIMUM W ESTIMATE	AIT LIST
AGE CRITERIA:								TO REMAIN ON W	
Single, adult and/o	or veterans			WAI	TLIST F	OR PARKING:		CALL EVERY	
				1 stall per u		NO	PET INFO:	F	PETS OK: NO
1	400FT I	то Г		I stall per c					
AN OWN RESID	ASSET L DENTIAL PROP	=					GENERAL	INFO.	
ASSET LIMIT INF				LEASE:			Community	/ Kitchen, Commur	
					ase, mo	onth to month	Machines,	/ coin-laundry area walk-up stairway.	s, Vending
							Application Request by		
INCOME CRITERI								kHawaii@Cantwell- gement to email over	
Applicant must ma to sustain rental a		e rent and	be able	FURNISHEI Fully furnish shower and available	ned, AC,	tub, walk in hower	application		
1-PERSON MAXIM				0]		

	1		lete Update:	6/30/2023			AREA:	,
		EWAL P	O APARTI	MENTS (Clo	sed for app		PROJECT TYPE:	,
ADDRESS:	450 Piikoi St.						PHONE: 808-589	
CITY:	Honolulu		STATE: HI	ZIP:	96914		FAX : 589-18	41
MANAGER	R: Hawaii Afford	dable Pro	pperties, Inc.		APPLY AD	DRESS:		OUT-OF-ST/
APPLY TO) :							APPLICATI ACCEPTE
APPLY ATTN	N :							
APPLY PHONE	≣: 808-589-184	5 x15		ı	FAX:	EMAIL:		
Uni		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:		0					
		71	1116		530 689-712	2	5	
Three		29	1841		1071	5	7	
Four	Bdrm:		0					
ENT INFO: RE	ENT IS 30% OF	INCOME	E: NO	UTILITIES INCL	UDED:		TOTA	AL UNITS: 127
%AMI	pts); 2 Bdrm \$7			Solar Hot Water Trash Collection			MINIMUM W ESTIMATE	
% AMI	20 apts); 2 Bdrr	·	` ' /				MAXIMUM W ESTIMATE	
E CRITERIA:						Т	O REMAIN ON W	
ie person in the ler	household mu	ist de 18	years or	WAITLIS PARKING INFO:	T FOR PARKING:	PET INFO:		PETS OK: YES
	ASSET	LIMITS:			,	Choice of or weighing no	ne: (1)small to me more than 25 lbs al water fish in tan	edium sized dog s; (2) small cat; (3
AN OWN RESI	DENTIAL PRO	PERTY:				GENERAL II	NFO:	
SET LIMIT INF	·O:			LEASE:		Standford C	sed for application Carr Development olulu 96813 808-	- 1100 Alakea
COME CRITER	IA:			<u> </u>			us pay for utilities a cable, and internet	
come Limit MI 30% person \$27,4 persons \$31,3 persons \$35,2 persons \$39,1	50% 50 \$45,750 50 \$52,250 80 \$58,800	\$62,70 \$70,56	0	FURNISHED:		Rents and I	ncome are subjec	ct to change

		Last Compl	ete Update:	1/21/2022			AREA:	Waipahu
PROJECT NAME:	HALE	KUHA'O	Weinber	g			PROJECT TYPE:	Family
ADDRESS:	94-909 K	au'olu Pl.		-			PHONE: 808-678	3-0892
OITY	J		OTATE III				FAX: 678-088	37
CITY:	Waipahu		STATE: HI	ZIP:	96797		,	
MANAGER	: Marisa	Olmeda-Macias	s, Res. Mgr.		APPLY ADD			
APPLY TO		66-7722 - Trisł 702-259-1903	na Bauman, CC	OS; or Marisa Olme	St Paul MN	ity Ave. West 55114	, #330	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-678	3-0892		F	FAX: 651-209-6623		nousing@accessib	lespace.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 I	Bdrm:	18			520		2	YES
Two I	Bdrm:	6			773		4	YES
Three I	Bdrm:							
Four	Bdrm:							
RENT INFO: RE	NT IS 309	6 OF INCOME	YES	UTILITIES INCLU Water	JDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:							TO REMAIN ON V	VAITLIST
Head of household have a qualifying of		18 years or old	der and	WAITLIST	T FOR PARKING:		CALL EVERY	
liaro a quamying c				PARKING INFO:	NO	PET INFO:	F	PETS OK: YES
J.				Minimum parking	g available			
		SET LIMITS:				J		
AN OWN RESIDE		PROPERTY:	NO			GENERAL	INFO: nai w/ bbq, roll in s	howers dranes
				LEASE:		entertainm units, heigl opened in	ent center, ceiling ht-adjustable work	fan, window a/c stations
INCOME CRITERI	IA:			r			Res Manager are o	
1 person \$36,650;	NCOME CRITERIA: Maximum annual income: I person \$36,650; 2 persons \$41,850; 3 persons \$47,100; 4 persons \$52,300			FURNISHED:		1	uff = caretaker and ONSE IN 2021 - La 10/2017	
J						1		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	1/21/2022				Pearl City
DDO IECT NAME.				ACCEPTING	ADD 5	AREA: PROJECT TYPE:	
	HALE LAULIMA	-	e) - NO I	ACCEPTING A			Family
ADDRESS:	1184 Waimano Home R	d.			ı	PHONE: 808-483	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX: 483-255	2
MANAGER	R: Marcus Asami D: HPHA NOT ACCEPTING APF	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCER	School St.	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications offic NOT ACCEPTING APP						NO
APPLY PHONE	:: 808-832-5961	FLICATIONS		FAX : 832-3461	EMAIL: hp	ohaishereforyou.or	g
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Two	Bdrm: 20			771	2	6	YES
Three	Bdrm: 16			893	3	8	YES
Four	Bdrm:			J			
Minimum Rent: \$0 the waitlist are to change or check to password is needed. *********CLOSED AGE CRITERIA:	NT IS 30% OF INCOME: O. All HPHA applicants wigo to: hpha.myhousing.co heir status. A username ed to access their account	ho are on om to and it.		wance for electricity	Т	TOTAI MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (O REMAIN ON W CALL EVERY (Months): 36 AIT LIST Months): 60 AITLIST
Trodd or modeones	a made so to yours or old		WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: YES
	ASSET LIMITS:		Included	O.	multiple anin	nals ok, but only o es listed below: der 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL IN		
ASSET LIMIT INF			EASE: 1 year		homeless in displaced.	CES: Domestic Vitransitional shelted	rs; involuntary
INCOME OBITED		ļ				ns must be 3 yrs a	
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 furnishedmajor appliances only, no carpet			amphetamine or s	ex offender
1-PERSON MAXIM	IUM MONTHLY INCOME	: ·	4570		Į.		
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220				

_	Las	t Compl	lete Update:	6/30/2023			AREA	Moiliili
ROJECT NAME: F			A O MOIL	IILI			PROJECT TYPE	Elderly
ADDRESS: 2	139 Algaroba	St.					PHONE: 808-73	35-9099
CITY: H	lonolulu		STATE: HI	ZIP:	96826		FAX:	
MANAGER:					APPLY AD	DDRESS: lae Avenue, Sui	te 200	OUT-OF-STA
APPLY TO:	Mark Develop	ment, In	C.		Honolulu, I		10 200,	APPLICATIO ACCEPTED
APPLY ATTN:								
APPLY PHONE: 8	808-735-9099			F.	AX: 781-292-34:		ndihawaii.com/mo	oiliili
Unit T	of UN		RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	dio: 80)	962					
One Bd		1	1024				3	
Two Bd			0					
Three Bd			0					
Four Bd	lrm:		0			J		YES
ENT INFO: RENT 0%AMI Studio (4 units) \$962; 60% AMI 0%AMI One bdrm (10 units) \$102 1243 - Preference for the control of the	nits) \$553; 50 /II Studio (4 ur (2 units) \$587 24; 60%AMI C	% AMI \$ nits) \$11 ; 50%AN	Studio (72 66 //I One n (2 units)	UTILITIES INCLU	DED:		MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	WAIT LIST (Months):
age 55 plus for all re	esidents.			\\\ \	FOR PARKING		TO REMAIN ON ' CALL EVER	
				PARKING INFO: Parking currently		PET INFO:		PETS OK:
	ASSET L	IMITS:						
AN OWN RESIDE SSET LIMIT INFO:		ERTY:				GENERAL		
SSET LIMIT INFO.				LEASE:		on-site.	om and communi	ity resource center
NCOME CRITERIA:	:			FURNISHED:				
				Full range, refrige garbage disposal				
PERSON MAXIMUI	M MONTHLY	INCOM	E:	4575				
PERSONS MAXIMI		V INICO	. ∧ ⊏.	5225				

		Last Comple	ete Update:		2/7/2022				AREA:	Nanakuli
PROJECT NAME:	HALE	MAKANA	O'NAN	AKL	JLI				PROJECT TYPE:	Family
ADDRESS:	89-201 L	.epeka Ave.							PHONE: 808-620)-9037, 808-754-75
CITY))		STATE: L		ZID.		00700		FAX: 620-903	38
CITY:	Wai'ana	9	STATE: F	11	ZIP:		96792		-	
MANAGER	: Annie A	u Hoon, Reside	ent Manager	, Mark	Developme	nt, Inc.	APPLY ADD	RESS:		OUT-OF-STATE
APPLY TO	: Hale Ma	akana O'Nanak	uli				89-201 Lepel Waiʻanae HI		1	APPLICATION ACCEPTED: YES
APPLY ATTN	I: Applica	tion Division								123
APPLY PHONE	:: 808-73	5-9099, then 1				FAX:	781-295-3427		www.mdihawaii.cor anniea@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:									
One I	Bdrm:	15	0					1	3	
Two I	Bdrm:	8	0					2	5	
Three I	Bdrm:	24	0					3	7	
Four I	Bdrm:									YES
RENT INFO: REI	mately 30	% of income. B		E-	TILITIES INC ater; utility a				TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:									TO REMAIN ON W	
Head of household of application. Mul residents of all age	ti-family (D/	WAITL		R PARKING:	PET INFO:	CALL EVERY	(Months): 12 PETS OK: NO
lesidents of all age	. 55.			Ad	dequate par	king for	all tenants	Accomada	ation considered for	· ·
	AS	SET LIMITS:			ho can show ense, curre			animal		
AN OWN RESID			NO	sa	afety check a	and insu	urance.	GENERAL	INFO:	
ASSET LIMIT INFO	O:			LE	ASE:				RHTF, LIHTC, USD	OA RD rent assist.
					year ecertificatior	n annua	lly	Gated con 3 ground-f 1bdrm)		its (2-2-bdrm, 1-
INCOME CRITERI	IA:							Application	n available at www.i	
		0% AMI 28,160			JRNISHED:	erator			and these are on the	
2 persons \$24 3 persons \$27 4 persons \$30	2 persons \$24,120 \$32,160 3 persons \$27,150 \$36,200 4 persons \$30,150 \$40,200								ONSE in 2021. Las 27/20.	st completed
1-PERSON MAXIM	IUM MON	ITHLY INCOME	:	23	346			Į.		

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	Last Comp	lete Update:	1/4/2022			AREA:	Kapolei
ROJECT NAME:	HALE MOENA	KUPUNA			PRO	JECT TYPE:	
	1020 Wakea St.				PHO	NE: 808-466	i-0801
CITY.		STATE: HI	ZID.	20727		AX : 466-080	
CITT	Kapolei	STATE: HI	ZIP:	96707		·	
MANAGER	₹:			APPLY ADI	DRESS: a Street, Suite 110,		OUT-OF-STA
APPLY TO	D: Manager's Office			Kapolei, HI			APPLICATION ACCEPTED
APPLY ATTN	N:						
APPLY PHONE	E: 808-466-0801			FAX: 466-0802		site: www.oahu I: HMK@tmo.o	useniorrentals.con com
Unit	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:		MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:	1258					
	Bdrm:	1417					
Three	Bdrm:						
Four	Bdrm:						
ENT INFO: RE	ENT IS 30% OF INCOM	E: NO L	JTILITIES INC	LUDED:		ТОТА	L UNITS:
oney order (no d	pplication fee of \$30 in o	check or	All utilities inclu	uded.		MINIMUM W. ESTIMATE	
sh or credit card		`				MAXIMUM W. ESTIMATE	
GE CRITERIA: oplicants must b	pe 55 or older.					REMAIN ON W	
		F	WAITLI PARKING INFO	ST FOR PARKING: D: NO	PET INFO:	F	PETS OK: YES
	ASSET LIMITS:			uded on a first ved basis. There	One pet per apa fee and a weigh		\$350 one-time pe
AN OWN RESII	DENTIAL PROPERTY:		•	tra resident cars.	GENERAL INFO) :	
SSET LIMIT INF	O:		EASE:		Roll-in showers Huge windows Undercabinet lig Lobby, Trash C Covered Parkin	that open; Breadthing; hute,TV Loung	athtaking views; ge
COME CRITER					Deck, No smok High-speed ele	ing allowed on vators, walkab	the property le neighborhood;
come Maximums: 0% AMI, 55% AMI, and 60% AMI		Į į	FURNISHED: AC, window blidisposal, high		on-site mgmt, community garden, controlled building access Security cameras in common areas; on-site laundry;24-hour emergency maintenance Trash rooms on every floor Community room with public WIFI		

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	Last Comp	lete Update:				AREA	Kapolei
ROJECT 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	E :		F	AX:	EMAIL:		
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	Studio:						
One	Bdrm:						
	Bdrm:						
Three	Bdrm:						
RENT INFO: RE	ENT IS 30% OF INCOME	E:	UTILITIES INCLU	JDED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): VAIT LIST (Months): WAITLIST
			_	FOR PARKING:		CALL EVERY	
	ASSET LIMITS:		PARKING INFO:		One time 30lbs and	cet fee: \$350 cat/d breed restrictions a	PETS OK: YES og weight limit of apply
AN OWN RESII ASSET LIMIT INF	DENTIAL PROPERTY:				GENERAL Covered r	INFO: parking garage, lau	ndry room
			LEASE:		controlled communit	access, elevator, t y center, lobby, rec y garden and bike	rash chute, creational deck,
INCOME CRITER	IA:		-				
			FURNISHED:				
					ja.		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	2/7/2022			AREA	Pearl City
ROJECT NAME: H	ALE MOHAL	<mark>U II Famil</mark>	у			PROJECT TYPE	Family
ADDRESS: 781	+ 779 Kamehame	ha Hwy				PHONE: 808-45	56-9420
CITY: Pea	arl City	STATE: HI	ZIP:	96782		FAX:	
MANAGER:					DDRESS: ehameha Hwy., P	earl City	OUT-OF-STAT
APPLY TO: Lo	ocations			Hawaii 96		can ony,	APPLICATION ACCEPTED:
APPLY ATTN:							
APPLY PHONE: 80	08-456-9420			FAX: 456-9406		nttp://www.locatio ble-rentals.aspx	nsrentals.com/afford
Unit Typ	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrr	n:	050	2 Ev ront				
Three Bdrr		950	2.5x rent 2.5x rent	595 751			
Four Bdrr	n:						YES
RENT INFO: RENT I 10 2-Bdrm Units at 3 116 2-Bdrm Units at 5 42 3-Bdrm Units at 6	80% AMGI 50% AMGI	E: NO	UTILITIES INC			MINIMUM V ESTIMATE MAXIMUM V	E (Months): 24
AGE CRITERIA:						TO REMAIN ON CALL EVER	WAITLIST
			WAITLI PARKING INF \$50/month	IST FOR PARKING O:	PET INFO:		PETS OK: NO
AN OWN RESIDEN	ASSET LIMITS: TIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:		4 handicap On-site ma Landscape 2 parking s	ped units; unager ed community are stalls with 3 bdrm	ME, HMMF Bond; as units
NCOME CRITERIA:	\$25,320, 2 persons	\$28,920	FURNISHED:		Visitor park Application locationsre	s: ntals.com	
30% of AMI: 1 Person \$25,320, 2 persons \$28,920 50% of AMI: 1 Person \$42,220, 2 persons \$48,200 50% of AMI: 1 Person \$50,640, 2 persons \$57,840			Garbage dispo	osal, refrigerator, window coverings,	office entra	ance) ite - Info from We ONSE IN 2023. La	side next to rental bsite ast completed
-PERSON MAXIMUM	MONTHLY INCOM	IE:	3517				
DEDCOME MAYIMUM	M MONTHLY INCO	N/E-	4017				

		Last Compl	ete Update:	2/7/2022			AREA:	Pearl City
PROJECT NAME:	HALE	MOHAL	J II SENIO	R			PROJECT TYPE:	Elderly
ADDRESS:	785 Kan	nehameha Hwy					PHONE: 808-45	6-9420
CITY:	Pearl Ci	ty	STATE: HI	ZIP:	96782		FAX: 456-94	06
MANAGER	: Kainoa	Aitaro				DRESS: anagement Divis		OUT-OF-STATE APPLICATION
APPLY TO	: Locatio	ons			Hawaii 968		ionoidia,	ACCEPTED: YES
APPLY ATTN	:							120
APPLY PHONE	: 808-45	6-9420			FAX: 456-9406		ttp://www.location le-rentals.aspx	srentals.com/afforda
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	3drm: 3drm:	163	1470	2 x rent	432			
Three E					-			
Four I								
Four t	sarin:			1				YES
RENT INFO: RE	NT IS 30	% OF INCOME	: NO	UTILITIES INC	LUDED:		TOTA	AL UNITS: 163
9 Units - 30%AN 130 Units - 60% A				Electricity, wat	er & sewer		MINIMUM W	
Food stamp &/or h	·		may he				ESTIMATE	
used to meet min.		abolay (Geor o)	may be				MAXIMUM W ESTIMATE	
AGE CRITERIA:						Т	O REMAIN ON V	VAITLIST
All residents must Applications accep				WAITLI	ST FOR PARKING:		CALL EVERY	(Months): 0
applicant reaching				PARKING INFO		PET INFO:	l	PETS OK: NO
J	AS	SSET LIMITS:	NONE	first serve basi	ble on a first come is.			
AN OWN RESID	DENTIAL	PROPERTY:	YES			GENERAL I	NFO:	
ASSET LIMIT INFO	0:			LEASE:			s 8 handicap-acc	essible ones; multi-
				6 months - mo year - some ur		services; lo laundry; two convenient	cked entry doors; o elevators at both to bus and shopp	coin-operated n buildings; ing; on site
INCOME CRITERI	A:					HHFDC, LII	nager. Financed HTC, RHTF, HMN	
Maximum Income 1 Person 2 Persons 30% AMI \$26,460/yr \$30,340/yr 60% AMI \$52,920/yr \$60,480/yr				refrigerator/fre	garbage disposal, ezer, vinyl flooring, ngs,air conditioner	HOME/CDBG Applications: locationsrentals.com or walk in (application box outside of rental office) 2021 Update - Information from Website NO RESPONSE IN 2023. Last completed update 03/17/2019		
T-PERSON MAXIM				4410]		

	Last Compl	ete Update:	6/29/2023			AREA:	Pearl City	
PROJECT NAME:	HALE MOHALU	J SENIOR	APARTM	ENTS		PROJECT TYPE:	Elderly	
ADDRESS:	800 Third St.					PHONE: 808-456	6-0368	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX : 456-088	85	
	t: Kristine Semana, Resi	dent Manager		APPLY ADD 800 Third St Pearl City H			OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	I: :: 808-456-0368			FAX : 456-0885	EMAIL:	halemohalu@cbmg		
Unit	Type: 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	
	Bdrm: 132	898	2x rent	526	1	2	YES	
Three	Bdrm:							
	Bdrm:						YES	
132 efficiency one people, \$898mon 32 regular one bed Must respond in a	NT IS 30% OF INCOME bedroom apts, 436 sq fi droom apts \$973/mon timely manner to comm t to remain on the waitlis	t, max 2	UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 9 AIT LIST	
AGE CRITERIA:						TO REMAIN ON W	, 12	
	t be 55+; The other men	nber can	PARKING INF	LIST FOR PARKING: FO: NO ded; First come first	PET INFO	CALL EVERY	(Months): 6 PETS OK: YES	
1	ASSET LIMITS:	NONE	serve - NOt g			license. \$100 pet d		
		YES			GENERAL			
ASSET LIMIT INFO: 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			6 months; then month-to-month 12 months for studios Cal out Mu per			Funding: RHTF Caregivers are allowed with MD letter; can work outside home. Must have 5 years landlord history and 2 personal references opened 1996		
INCOME CRITERIA: Min. income = 2x rent w/some flexibility Maximum Annual Income: 50% AMI- 1 person - \$45,850, 2 persons- \$52,400 (studio) (efficiency/1bdrm) (60% AMI); \$55,020 2 persons - \$62,880;			FURNISHED: Comm Free sl 18 han >7 yrs			ty room, laundry, bb tle service ap accessible units r criminal record HOME subsidies	q area	
 1-PERSON MAXIM	IUM MONTHLY INCOME	 :	3798		J			

Printed: 7/8/2024 Page: 25

	Last Comp	olete Update:	7/27/2023			AREA:	Pearl City	
PROJECT NAME:	HALE O' HAU	OLI				PROJECT TYPE:	Elderly	
ADDRESS:	950 Luehu St.					PHONE: 808-455	5-4744	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX : 455-4384		
MANAGER APPLY TO				APPLY ADI On-Site; Ma		fice (#102)	OUT-OF-STATE APPLICATION ACCEPTED: YES	
	: 808-455-4744			FAX: 455-4384	ЕМА	IL: ohauoli@cmiweb.n www.haleohauoli.co		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMU Numbe of Peopl	r Number of	CAREGIVER Allowed:	
One I	Bdrm: 99	0		497	1	3	YES	
Four l	Bdrm:							
	NT IS 30% OF INCOM aximum rent, 30% of in		UTILITIES INC Electricity and			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST	
AGE CRITERIA: Head of household	d must be 62 years or c	older, or				TO REMAIN ON W	/AITLIST	
	can be 18 and older.		WAITLI PARKING INFO		PET IN	FO: Fosize dogs or cats, but n	PETS OK: YES	
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:		T driving mordax	od II dvallable	note sa	aying they need a pet.	000 0 000010	
ASSET LIMIT INFO	O: seed maximum income		LEASE:	onth-to-month	busline shoppi Manag tour.	or garden and activity re e, beautifully landscape ng, on-site laundry per on site - Unit #102, o	d, close to	
NCOME CRITERIA:			Fun Sec Tran			g: Low Income Housin n 8 portation to Shopping a ic Charities Hawaii	•	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	5/8/2024			AREA:	Chinatown
PROJECT NAME:	HALE	PAUAHI	TOWERS	3			PROJECT TYPE:	Family
ADDRESS:	155 Nor	th Beretania S	t.				PHONE: 808-53	2-3535
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 532-35	36
MANAGER	R: Michae	el Johnson			APPLY AD On-Site	DRESS:		OUT-OF-STATE
APPLY TO) :							APPLICATION ACCEPTED:
APPLY ATTN	1 :							NO
APPLY PHONE	E: 808-53	32-3535			FAX: 532-3536	EMAIL:	n/a	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio: Bdrm:		1010	0.5	500			YES
	Bdrm:	214	1212	2.5xrent	729 - 745	2	5	YES
Three		72	1130	2.5xrent	937 - 959	3	7	YES
Four	Bdrm:							NO
Must have verifial Must respond to common a timely manner	ole reside	ential history. cation from mar	nagement	UTILITIES INC Water Sewer Trash pick up	ACODED.		MINIMUM W ESTIMATE MAXIMUM W	(Months): 24
AGE CRITERIA:				le.			ESTIMATE TO REMAIN ON V	, , ,
Head of househol		e 18 years or o	lder at the	WAITL	IST FOR PARKING:	:	CALL EVERY	
time of application	1.			PARKING INF	O: NO	PET INFO:	j	PETS OK: NO
]	A	SSET LIMITS:	NONE					
AN OWN RESI		PROPERTY:	NO	\$40/mo		GENERAL		
ASSET LIMIT INF	<u>0.</u>			LEASE: 1 year		Send requested send requested send requested sendings.	gement to mail it est with self addressest by fax	ssed stamped
INCOME CRITER Maximum Annual person - \$67,700 \$87,000; 4 persor 6 persons - \$112, persons - \$127,60	Income f 2 persona ns - \$96,6 150; 7 pe	s - \$77,350; 3 p 650; 5 persons	persons - - \$104,400;	FURNISHED: Partly furnishe appliances on drapes, garba	ly. Tub, carpet,	Fully equip Meeting ro	om manger's office oped Laundry Roon oms, sprinkler/smo garden area	
 1-PERSON MAXIN	PERSON MAXIMUM MONTHLY INCOME:			5642				
2-PERSONS MAX	ІМИМ МО	ONTHLY INCO	ME:	6446				

		Last Compl	ete Update:	10/15/2021			AREA:	Lanakila	
PROJECT NAME:	HALE	E PO'AI - N	IOT ACCE	EPTING AP	PLICATIONS	3	PROJECT TYPE:	Elderly	
ADDRESS:	1001 No	orth School St.					PHONE: 808-83	2-3445	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 832-179	95	
MANAGER:	: Joseph	n Baxa			APPLY AD Apply On-S			OUT-OF-STATE	
APPLY TO:	: Hawaii	i Affordable Prop	perties Inc.		дрыу оп с	one		APPLICATION ACCEPTED:	
APPLY ATTN:	: Joanna	a Li						NO	
APPLY PHONE:	: 808-83	32-3445			FAX: 832-1795		ttp://hawaiiafforda roperties/	ble.com/residential-	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
St	udio:	80	170	NO	390	1	1	YES	
One B	Bdrm:	126	195	NO	544	2	2	YES	
Two B	Bdrm:								
Three B	Bdrm:								
Four B	3drm:							NO	
RENT INFO: REN Rent is 30% of inco 1bdrm \$195. All ha floor Security Deposit et *********WL CLOSE	ome with andicap	n studio minimu ped units are on I month's rent.	m of \$170,	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 60	
AGE CRITERIA:						Т	O REMAIN ON V		
One member must (Caregivers must b		; spouse must b	e 55+.		IST FOR PARKING:		CALL EVERY		
				PARKING INFO	,	PET INFO:	-	PETS OK: NO	
1	A	SSET LIMITS:	YES	parking in back					
		PROPERTY:	NO			GENERAL II	NFO:		
-	AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: 1 person: \$38,600 2 people: \$44,100			LEASE: 1 year; renewa following recer		tenant dies, move to a s the 1st floor Yearly incor	Caregivers are allowed with MD letter. If elderly tenant dies, spouse may remain, but must move to a studio unit. 18 handicap units all on the 1st floor. Yearly income recertification Has large multi-purpose room w/kitchen		
INCOME CRITERIA: Maximum Annual Income: 1 person - \$34,300 2 persons - \$39,200			FURNISHED: Tra			ion to Shopping a arities Hawai'l nd to communicat	vailable through		
1-PERSON MAXIMI	UM MOI	NTHLY INCOME	≣:	2858		Į.			
2-PERSONS MAXIN	иим мо	ONTHLY INCOM	ΛE:	3266					

		Last Compl	ete Update:	1/6/2022			AREA:	Barbers Point
PROJECT NAME:	HALE	UHIWAI	NALU (Bu	ildings 34	and 35)		PROJECT TYPE:	Single Veterans
		Yorktown St.			,		PHONE: 808-682	2-1949
							FAX: 682-197	
CITY:	Kapolei		STATE: HI	ZIP:	96707		,	
	RTaylo : 91-107	e Taylor, Direct r@Cantwell-An 8 Yorktown St. i HI 96707		lanagement	APPLY AD 91-1078 Yo Kapolei HI 9	orktown St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	•	reak Hawaii LL	C / Leasing Tea	am				YES
APPLY PHONE	: 682-19	49			FAX: 682-1970		CloudbreakCommu CloudbreakHawaii@	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	80 / 50	1350	1.5 x rent	208-374	1	1	
One I	Bdrm:							
	Bdrm:							
Three I								
Four I	Bdrm:			1		J		NO
RENT INFO: RE	NT IS 30	% OF INCOME	: NO	UTILITIES INC	CLUDED:		TOTA	L UNITS: 130
A clean + sober er \$1200 - \$1350 Bldg 34 - 80 units;				Electric, water	, sewer, trash		MINIMUM W ESTIMATE	
Accept HUD VASH subsidies. All unit	H vouche	r and other rent					MAXIMUM W ESTIMATE	
AGE CRITERIA:							TO REMAIN ON W	/AITLIST
SINGLE ADULT V	ETERAN	IS			IST FOR PARKING:		CALL EVERY	
				PARKING INF	. = 0	PET INFO:	F	PETS OK: NO
1	۸٥	SSET LIMITS:		T Stall per unit				
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO	O:			LEASE:			RHTF, Formerly US August 2001	S Vets
				1 year		5 handicar Case Man		Coin laundry,
INCOME CRITERI	IA:			r		Application	n: udbreakHawaii@Ca	ontwoll
Affordable housing \$250 - \$84,600 pe				FURNISHED: Anderso				ai itweii-

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	6/19/2024			AREA:	Waianae	
PROJECT NAME:	HALE WAI VIST	ΓΑΙ				PROJECT TYPE:	Family	
ADDRESS:	86-084 Farrington Hwy.					PHONE : 808-696	6-8258	
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX: 696-825	58	
	2: Marisela Mora 9: Hale Wai Vista			APPLY ADI 86-084 Farr Waianae, H	ington Hwy		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	: Resident Manager's Of	ffice		FAX: 696-8259	EMAIL:	http://www.locationsrentals.com/afforda ble-rentals.aspx		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Two I	Bdrm: 63 Bdrm: 21 Bdrm:	1250	1.5 x rent 1.5 x rent	595 751			YES	
5 Two Bdrm (30% 51 Two Bdrm (50 handicap accessib 7 Two Bdrm, end	% AMÍ*) = \$1177 (3 two ble) unit (50% AMI*) = \$1202 AMI*) = \$1374 (1 three b	bdrms are	UTILITIES INC Water and sew own electricity.	ver included; Must pa	ay	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1	
AGE CRITERIA: Head of household	d must be 18 years or old		WAITLI PARKING INFO		PET INFO	TO REMAIN ON W CALL EVERY : F		
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:			ation & insurance additional stalls	GENERAL	. INFO: lawai'i Housing Dev	planment Corn	
			LEASE: 12 months		Funding: RHTF Application	Low Income Housing n: locationsrental.co om manager's office	g Tax Credits;	
INCOME CRITERIA: 30% of AMI: 1person: \$29,250; 2persons \$33,420; 3persons \$37,590; 4persons\$41,760 50% of AMI: 1person \$48,750; 2persons \$55,700; 3persons \$62,650; 4\$69,600 60% of AMI: 1person \$58,500; 2 persons\$66,840; 3persons \$75,180; 4persons \$83,520;					Waitlist applicants are contacted via mail when renewing interest is needed. Locked lobby doors, security cameras, visitor parking, coin-op laundry facility on each floor. Onsite manager's office.			

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	10/18/2021			AF	REA: V	Vaianae
PROJECT NAME:	HALE	WAI VIS	TA II				PROJECT TY	YPE:	amily
ADDRESS:	86-086	Farrington Hwy	/.				PHONE: 80	8-696-8	258
CITY:	Waiana	е	STATE: HI	ZIP:	96792		FAX: 69	6-8259	
MANAGER	R: Barbar	a Ramos				ADDRESS:	W		OUT-OF-STATE
APPLY TO): Location	ons LLC				e, HI 96792	у		APPLICATION ACCEPTED:
APPLY ATTN	1 :								YES
APPLY PHONE	E: 808-69	6-8258			FAX: 696-8259		http://www.locable-rentals.asp		ntals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMU Number o People	of	CAREGIVER Allowed:
	Bdrm:			ļ					
Two	Bdrm:	99	1177	2.5 x rent	595				
Three		33	1374	2.5 x rent	751				
Four	Bdrm:				J	J	J		YES
RENT INFO: RE 7 Two Bdrm (30% 83 Two Bdrm (50) (60% AMI) end un	% AMI*) = 9% AMI*) nits -= \$12	: \$677 = \$1177; 11 T 202; 33;		UTILITIES INC			MINIMU		
33 3 Bdrm (60% A * AMI- see income							MAXIMU ESTIM	JM WAIT IATE (M	
AGE CRITERIA:	d must be	0 19 voors or o	ldor				TO REMAIN (-	
lieau oi riouserioi	u must be	e to years or o	iidei	WAITLI PARKING INF	IST FOR PARKIN O: NO	IG: PET INFO:			rs ok: NO
]					additional stalls	fish ok			i i i i i i i i i i i i i i i i i i i
AN OWN RESI		SSET LIMITS:				GENERAL	INFO		
ASSET LIMIT INF		. PROPERTY:	TES	LEASE:		Owner: H	awaiʻi Housing		
				12 months		RHTF	Low Income Ho	ŭ	·
INCOME CRITERIA: 30% of AMI: 1 person \$26,460; 2 persons \$30,240; 50% of AMI: 1 person \$44,100; 2 persons \$50,400; 60% AMI: 1 person 52,920; 2 person \$60,480			FURNISHED: Stove, Oven, Refrigerator only, Waitlist a			ental.com om manager's o	ontacted	l via mail when	
I 1-PERSON MAXIM	NOM MUN	NTHLY INCOM	IE:	4410					
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	5040					

Last Complete Update	,			AREA	,
PROJECT NAME: HALEIWA SENIOR CI	TIZEN HOUS	ING CENTER		PROJECT TYPE	J .
ADDRESS: 66-477 Paalaa Rd.				PHONE: 808-63	7-6455
CITY: Haleiwa STATE:	HI ZIP:	96712		FAX:	
MANAGER: Thomas Dulan, Resident Manage	er	APPLY ADD			OUT-OF-STATE
APPLY TO: Hawaiian Properties		Honolulu, HI	96813		APPLICATION ACCEPTED:
APPLY ATTN:					
APPLY PHONE: 808-637-6455		FAX : 637-7044	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: 63 0					
Two Bdrm:					
Three Bdrm:					
Four Bdrm:		J	J		
RENT INFO: RENT IS 30% OF INCOME: YES	UTILITIES INC	CLUDED:		тот	AL UNITS:
Deposit of market rent - \$885	Water, \$85 uti			MINIMUM V	
				ESTIMATE	(Months): 12
				MAXIMUM V ESTIMATE	
AGE CRITERIA:	_			TO REMAIN ON V	
Head of household OR spouse must be 62 years old or mobility-disabled. Family members can be		IST FOR PARKING:		CALL EVERY	
children. Roommate must be 18+, caregiver must be 18+	PARKING INF		PET INFO	:	PETS OK: NO
ASSET LIMITS: NONE	limited.	ciuueu ariu is			
AN OWN RESIDENTIAL PROPERTY:	-		" GENERAL	. INFO:	
ASSET LIMIT INFO:	LEASE:			100% Section 8 bu	iilding
			o Hariuica	ppea units	
NCOME CRITERIA: Follows HUD guidelines.	FURNISHED:				
g	Partly furnishe	edmajor ly, tub or walk in			
-PERSON MAXIMUM MONTHLY INCOME:	4254]		
-PERSONS MAXIMUM MONTHLY INCOME:	4354				

		Last Comple	ete Update:	5/23/2024					Kakaako
DDO IECT NAME.	LIALE	· I / A I I\ A / II / A	DLACE	AD AD TRAI	TNITO			AREA: PROJECT TYPE:	
PROJECT NAME:			PLACE	APARTIVI	EN12				<u> </u>
ADDRESS:	665 Hale	ekauwila St.						PHONE: 808-537	7-9000
CITY:	Honolulu	ı	STATE: HI	ZIP:		96813		FAX:	
MANAGER	: Danielle	e Delgado				APPLY AD	DDRESS:		
APPLY TO	: Indigo I	Real Estate Ser	vices, Inc.				enter, 665 Haleka nolulu, Hi. 96813	uwila	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Live@h	nalekauwilaplace	eapts.com						
APPLY PHONE	: 808-53	7-9000			FAX:	728-0985	EMAIL: w	ww.halekauwilapla	aceapts.com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	26	1329	2 x Rent		396	1	2	
One I	3drm:	72	1410	2 x Rent		535	1	3	
Two E	3drm:	82	1660	2 x Rent		684	2	5	
Three I	3drm:	18	1889	2 x Rent		1511	4	7	
Four I	Bdrm:	0	0						YES
RENT INFO: REI Call for availability Based on 60% AM may be approved score of 774 & ear	Mon-Fri; II; Credit with cosig	no waitlist is ma score between a gner (who has m nt) or increased	aitained. 350 - 624 nin. credit deposit;	UTILITIES IN \$60 - Interne water/sewer/	t/Wi-Fi/T	//phone		TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
score 625 - 900 ha	ave uncor	nditional approv	al.	ļ				ESTIMATE	
AGE CRITERIA:							Т	O REMAIN ON W CALL EVERY	
				WAIT PARKING IN		R PARKING	: PET INFO:		PETS OK: YES
	AS	SSET LIMITS:		1 free parkin Contact Diar additional sta	g stall pe nond Par		PET INFO.	·	LTO OK. ITES
AN OWN RESID		PROPERTY:					GENERAL II	NFO:	
ASSET LIMIT INFO	O:			LEASE:			Square foot	age range - Studio 35 - 597; 2 bdrm	
INCOME CRITERI	A:							g building, laundr ccess building	y on site,
Maximum annual i 1 peson: \$58,500 2 persons: \$66,85 3 persons: \$75,10 4 persons: \$83,52	0	5 persons: \$ 6 persons: \$ 7 persons: \$	96,900	FURNISHED Tub, ceiliing carpeting in l	fans & A.			uwilapalceapartm n manager's office	
1-PERSON MAXIM	UM MON	ITHLY INCOME	:	4875			-		
2-PERSONS MAXI	мим мс	NTHLY INCOM	IE:	5570					

	Last Comp	lete Update:	7/16/2020			AREA	- Chinatown
PROJECT NAME:	HALEWAI'OLU	SENIOR F	RESIDENCE	S		PROJECT TYPE	
	1331 River St.					PHONE: 808-80	8-1331
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
•	lionolala	· · · · · · · · · · · · · · · · · · ·		30017			
MANAGER	R: Michaels Managemer	t; Resident Mana	ager - Cheryl-Anne	APPLY AD	DRESS:		
APPLY TO	Fautanu D: drop by			https://info.t	tmo.com/hsr		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	E: 808-439-6490		F	AX:		nttps://info.tmo.co _iveAtHSR.com	m/hsr
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One	Bdrm:	1304	2 X Rent				
Two	Bdrm:	1627	2 X Rent				
Three	Bdrm:						
Four	Bdrm:						
3/2023 - \$99 depo free rent.		one month	UTILITIES INCLU Water, sewer & tr			MINIMUM V ESTIMATE MAXIMUM V	(Months): 0
AGE CRITERIA:	·					ESTIMATE	
All residents mus	t be 55 and older.		MAITH ICT	TOD DADIZING		TO REMAIN ON \ CALL EVERY	
			PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: YES
	ACCET LIMITO		unreserved garaç	ge parking	1 per perso service ani	on, 30 lb. limit unle mal.	ess a certified
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				general	INFO:	
ASSET LIMIT INF			LEASE:		private dog room with		
INCOME CRITER							
60% AMI - 1 perso	0, 60 & 80% AMI. on - \$27,450; 2 person - on -\$54,900; 2 person - on - \$73,200; 2 person -	\$62,700	FURNISHED: A.C.				
-PERSON MAXIM	IUM MONTHLY INCOM	E:	6100]		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	6967				

		Last Comp	lete Update:	7/15/2020			AREA	_ Lanakila
PROJECT NAME:	HALI'	A HALE -	NOT ACC	EPTING A	APPLICATI	ONS	PROJECT TYPE	: Elderly
ADDRESS:	851 Nort	th School St.					PHONE: 808-58	6-7595
CITY:	Honolulu		STATE: HI	ZIP:	96817	ī	FAX: 586-75	26
	lionolaic	4	0.7.12.		90017			
MANAGER	R: Thoma	s Ling			APPLY Apply o	/ ADDRESS:		OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	pperties Inc.		дрру с	on-site		APPLICATION ACCEPTED:
APPLY ATTN	I: Joanna	ı Li						NO
APPLY PHONE	E: 808-58	6-7595			FAX:	EMA	IL: http://hawaiiafforda properties/	able.com/residential-
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUI Number of Peopl	r Number of	CAREGIVER Allowed:
s	tudio:	31	170	NO	408	1	1	YES
One I	Bdrm:	10	195	NO	540	2	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE				UTILITIES IN				AL UNITS: 41
\$195. Security deposit e					a		MINIMUM V ESTIMATE	
Wait time for 1 bd Wait time for 2bdr	drm 72 m	onths		Į			MAXIMUM V ESTIMATE	
AGE CRITERIA:							TO REMAIN ON \	
One member mus Caregivers must b		spouse must	be 55+;	WAITI	LIST FOR PARKI	ING:	CALL EVERY	(Months): 12
				PARKING INF	1	PET INI	FO:	PETS OK: NO
1	۸۵	CET LIMITO	VEC	Parking inclu	aea			
AN OWN RESI		SSET LIMITS:				GENER	AL INFO:	
ASSET LIMIT INF	O:		110	LEASE:		Caregiv	vers are allowed with	
Asset Limit: 1 pers 2 persons - \$44,10		,600		1 year; renew			dies, spouse must tra	nsfer to studio unit.
				following rece	ertification	Opened same v	d 1995 v/l as Hale Po'ai	
INCOME CRITER	IΔ·					Meeting	perated laundry g room w/kitchen and	wheelchair
Maximum Annual	Income:	1 person - \$34	,300;	FURNISHED:	:		ible restroom g: Unknown	
2 persons - \$39,20	00.			Partly furnish appliances or	edmajor nly. No carpet		SPONSE IN 2021. La 3/17/2019	ast completed
1-PERSON MAXIM	1UM MON	ITHLY INCOM	IE:	2858				
2-PERSONS MAXI	INALINA NAC		ME:	3266				

		Last Comp	lete Update:	2/7/2022			AREA:	Chinatown	
PROJECT NAME:	HARI	BOR VILL	.AGE				PROJECT TYPE:	Family	
ADDRESS:	901 Rive	er St.					PHONE: 808-528	3-2753	
CITY:	Honoluli	J	STATE: HI	ZIP:	96817		FAX : 566-091	4	
MANAGER APPLY TO	·				APPLY ADI 901 River S Honolulu, H	it.		OUT-OF-STATE APPLICATION	
		able Housing D	ept.					ACCEPTED: YES	
APPLY PHONE			opt.	EMAI FAX : 521-2714			L: locationsrentals.com/affordable- rentals.aspx		
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required	SO ET:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:								
	Bdrm:	60	1495		575	1	3		
	Bdrm:	30	1990		750	2	5		
Three									
Four	Bdrm:			<u> </u>				YES	
RENT INFO: RE 60% AMI: 1 Bdrm 1 Bdrm \$1,270; 2 120% AMI: 1 Bdrr 140% AMI: 1 Bdrr AGE CRITERIA: Head of househol	\$1,190 Bdrm \$1; n \$1410; n \$1495;	; 2 Bdrm \$1,29 355; 2 Bdrm \$1710 2 Bdrm \$1990	0; 80%AMI: ;	Water + Sew WAIT PARKING IN	er LIST FOR PARKING:	PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 6 AIT LIST (Months): 36 /AITLIST	
				Parking inclu		PETINFO	Г	L13 OK. INO	
AN OWN RESII ASSET LIMIT INF	DENTIAL	SSET LIMITS: PROPERTY:		LEASE:		NO RESP	OATE - Info from we		
						Completed	I - prior to 2020.		
160% \$49,020 \$55 80% \$65,360 \$74 120%\$98,040 \$11 \$151,200 (5 perso	2 5,980 \$63 1,640 \$84 11,960 \$1	,000 \$93,280 \$	\$100,800	FURNISHED Partly furnish appliances o	nedmajor				
1-PERSON MAXIN	10M MUI	NTHLY INCOM	IE:	8170		F			
2-PERSONS MAX	IMUM MC	NTHLY INCO	ME:	9330					

		Last Comple	ete Update:	1/21/2	2022			AREA:	Kalihi	
PROJECT NAME:	HAUI	KI HOMES	S (HPHA-	hon) -	NOT	ACCEPTING	APP	PROJECT TYPE:	Family	
	,	73 Meyers St.						PHONE: 808-832	-3336	
01774			07475					FAX: 832-3385		
CITY:	Honolulu	I	STATE: HI		IP:	96819		,		
MANAGER	t: Julie W	iggett , Acting N	Manager			APPLY ADD	RESS:			
APPLY TO		CCEPTING AP	PLICATIONS	1002 North School St. Honolulu, HI 96817 NOT ACCEPTING APF			96817	ICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN		pplications offic							NO	
APPLY PHONE			FLICATONS			FAX: 832-3461	EMAIL:	hphaishereforyou.or	g	
Unit	Type:	Number of UNITS:	RENT:	INC	mum OME juired:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm:									
	Bdrm:	20	0	<u> </u>		786	2	6	YES	
Three I	Bdrm:	16	0			1034	3	8	YES	
Four I	Bdrm:	10	0			1110	4	10	YES	
RENT INFO: RE	NT IS 309	% OF INCOME	: YES	UTILITII	ES INCL	LUDED:		ТОТА	L UNITS: 46	
Minimum Rent: Or Three Bdrm - \$152 applicants who are hpha.myhousing.c status. A usernam	2; Four Book on the work on to character on the come to character on the come and particles.	drm - \$180. All vaitlist are to go ange or check t	HPHA to: heir	Water a	and allow	vance for electricity		MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (AIT LIST Months): 36	
AGE CRITERIA:	int							TO REMAIN ON W	, 1	
Head of household	d must be	18 years or		\	NAITI IS	ST FOR PARKING:		CALL EVERY		
older ********* CLOSED	8/2/2016	S*****		PARKIN): NO	PET INFO	: Р	ETS OK: NO	
ı	AS	SSET LIMITS:	YES	liist coi	ile ilist s	serve				
AN OWN RESIDE		PROPERTY:	NO				GENERAL		NOFO	
Cannot own a hou times the applicab times that limit for	ise on Oa ole income	e for admission		LEASE:			1.)The Electric Veterans Families was determined to the control of	OUSING PREFERE derly 2.) The Displac w/ service connected deceased veterans mined to be service terans 6.) Families re	ed 3.) Disabled d disabilities 4.) s whose death connected. 5.)	
	INCOME CRITERIA:							nal Shelters 7.) All ot		
50% AMI: 1 person persons \$42,800; must be <50% are government action	4 person ea AMI un	\$47,550. Famil less displaced	y income by	FURNISHED: Partly furnishedmajor appliances only			Funding: All convic			
1-PERSON MAXIM	IUM MON	ITHLY INCOME	<u>:</u>	3450]			

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Last Complete Update:	10/20/2021	AREA	. Moiliili
PROJECT NAME: HAUSTEN GARDENS		PROJECT TYPE	Elderly
ADDRESS: 808 Hausten St. CITY: Honolulu STATE: H	II ZIP : 96826	PHONE: 808-94 FAX: 955-61	
MANAGER: Geraldine D. Bareng, Business Man Indigo Real Estate Services, Inc.	808 Ha	Y ADDRESS: austen St. Julu HI 96826	OUT-OF-STATE APPLICATION
APPLY TO: Manager's Office APPLY ATTN: Business Manager			ACCEPTED: YES
APPLY PHONE: 808-947-3423	FAX: 955-610	EMAIL: manager@hauster www.indigorealest	
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	MINIMUM MAXIMUM Number of of People People:	CAREGIVER Allowed:
One Bdrm: 49 0	550	1 2	YES
Three Bdrm:			NO
RENT INFO: RENT IS 30% OF INCOME: YES All rents are 30% of income. Contact information for applicant must be kept current.	UTILITIES INCLUDED: \$47 allowance for electricity ar water, sewer and gas	nd all MINIMUM V ESTIMATE MAXIMUM V	(Months): 48
AGE CRITERIA: Head of household must be 62+. All other members		TO REMAIN ON \ CALL EVERY	WAITLIST
must be 62+. Caregiver over 18 allowed. Must show proof of caregiving.	Parking included; Only if available		PETS OK: YES
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO		GENERAL INFO:	
ASSET LIMIT INFO:	LEASE:	Common "lanai" area in front courtyard area on each floor Funding: Section 8 100% Onsite laundry facilities Application:	
INCOME CRITERIA:	,	Send request with self addre	
Maximum Annual Income: 50% Income Limits 1 person \$42,200 2 persons \$48,200	FURNISHED: Partly furnishedstove, refrigerator, microwave. Vinyl wood floors and blinds	Pick up from manager's offic	e
1-PERSON MAXIMUM MONTHLY INCOME:	3517		

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Last Complete	Update: 6/1/202	0		AREA:	,
JECT NAME: HIBISCUS HILLS	APARTMENTS			PROJECT TYPE:	Family
ADDRESS: 94-1121 Ka Uka Blvd.				PHONE: 808-676	
CITY: Waipahu S	TATE: HI ZIP:	96797		FAX : 808-676	6-3533
MANAGER: Tashan Pacheco, Resider	nt Manager	APPLY AI	DDRESS:		OUT-OF-S
APPLY TO:					APPLICAT ACCEPT
APPLY ATTN:					
PPLY PHONE: 808-676-3533		FAX: 676-3533		www.EAHHousing. hi-management@e	
Unit Type: Number of UNITS:	RENT: Minimu INCOM Require	IE SO ET:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVEI Allowed:
Studio: One Bdrm:					
Two Bdrm: 80	1650 2.5x re	ent 588	1		
Three Bdrm:					
Four Bdrm:					YES
T INFO: RENT IS 30% OF INCOME:	NO UTILITIES	INCLUDED:		TOTA	AL UNITS: 80
50 - \$1650	Water, sev	ver, trash		MINIMUM W ESTIMATE	
				MAXIMUM W ESTIMATE	
CRITERIA:				TO REMAIN ON W	
d of Household 18+	WA PARKING	ITLIST FOR PARKING INFO: NO	: PET INFO:		PETS OK: NO
		all, \$75 2nd stall	121 1111 01		2.0 0 110
ASSET LIMITS:					
NOWN RESIDENTIAL PROPERTY: YE ET LIMIT INFO:	S LEASE:		GENERAL On-site ma	anager	
	1 year			undry facilities	
			Accepts S	ection 8 ail to request applic	cation
OME CRITERIA:				om manager's office	
income for 50 units is 80% AMI ncome limits on 30 units		ED: ishedmajor only; ceiling fans; air	_ www.EAH	Housing.org	
RSON MAXIMUM MONTHLY INCOME:	0				

		Last Compl	ete Update:	4/17/2024			AREA:	Kakaako
PROJECT NAME:	HON	UAKAHA				F	ROJECT TYPE:	
ADDRESS:						F	PHONE: 808-272	2-5937
CITY	Honolul		STATE: HI	ZIP:	96813		FAX: 781-295	5-3427
	riorioidi	u	0171121 111		90013			
MANAGER	R: Helen	Taaga - Senior I	Property Manage	er	APPLY ADI Attn: Manag			OUT-OF-STATE
APPLY TO): Mark D	Development Inc	:.		545 Queen	Street, Honolulu	, HI 96813	APPLICATION ACCEPTED:
APPLY ATTN	l: Afforda	able Housing De	pt.					YES
APPLY PHONE	E: 808-40	04-9260			FAX:	EMAIL: he	elent@mdihawaii.	com
Unit	Type:	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 I	Bdrm:	9	1300	2x rent	488	1	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
No Waitlist, studio	os open a	ind ready for mo	ove in.	Electricity, sew	er and water	T	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W	(Months): 0 AIT LIST (Months): 8
All persons in hou	sehold m	nust be 62 years	or older.	WAITI I	ST FOR PARKING:	į,	CALL EVERY	
				PARKING INFO	O: YES	PET INFO:		PETS OK: NO
1	AS	SSET LIMITS:	NONE	mo; requests a	ooter stall is \$80 are accepted on a	Service anim	nals ok	
AN OWN RESID		. PROPERTY:	YES	wait list, stalls	avallable.	GENERAL IN		
ASSET LIMIT INF	O:			LEASE: 12 months		conditioning Transportati Catholic Cha opened 199	on to shopping av arities Hawaii 5	
INCOME CRITER	IA:			,			its-1 one bed, 7 s	tudios
Must be below 60 ^o 1 person: \$55,020 2 persons: \$62,88)			FURNISHED: Major applianc tiles, walk in sh	es, carpet or vinyl nower.	3 for vision/l Accepts Sec	nearing tion 8 & Rent Su	pplement
1-PERSON MAXIM				4585]		

		Last Compl	ete Update:	1/21/2022			AREA:	Kahaluu
PROJECT NAME:	ноо	ΚΙΡΔ ΚΔΗ	ΔΙ ΙΙΊΙ (Η	PHA-wind) - NOT ACCE	PTIN	7 U L Z 7 U	
		Ahuimanu Rd.	ALO O (III	I HA-WIIIU) - NOT ACCL	1 1114	PHONE: 808-233	J
		Trainiana rta.					FAX: 233-376	
CITY:	Kaneoh	е	STATE: HI	ZIP:	96744		200 070	
MANAGER	: Robert	a Kahele			APPLY ADD	School St.		OUT-OF-STATE
APPLY TO	NOT A	CCEPTING AP			Honolulu, HI NOT ACCEF	PTING APPLIC	CATIONS	APPLICATION ACCEPTED: NO
	NOT A	applications offic CCEPTING AP		EMAIL: hphaishereforyou.org				·g
APPLY PHONE	:: 808-83	32-5961			FAX : 832-3461			
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	8	0		549	1	4	YES
Two I	Bdrm:	32	0		697	2	6	YES
Three I	Bdrm:	16	0		891	3	8	YES
Four I	Bdrm:							
Minimum Rent: \$0 the waitlist are to g change or check the password is needed.), All HPH go to: hpl heir statu ed to acc	HA applicants w ha.myhousing.c us. A username ess their accou	no are on om to and	UTILITIES INC Water and allo	CLUDED: owance for electricity		MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:							TO REMAIN ON W CALL EVERY (
Head of household	d must be	e 18 years or old	der		IST FOR PARKING:			
	AS	SSET LIMITS:	NONE	Included	O:	the categor	imals ok, but only c ries listed below: nder 25 lbs) or cat	ETS OK: YES
AN OWN RESID		PROPERTY:	NO			GENERAL		
Cannot own a hou		ahu		LEASE: 1 year			NCES: Domestic V n transitional shelte	
							ed Low Inc Pub Hs	
INCOME CRITERIA: ncome Eligibility = 80% of AMI				FURNISHED:			ons must be 3 yrs a hamphetamine or s	
Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 per: 00; 5 per: 00; 7 per:	1 person - \$53,2 sons - \$68,500; sons - \$82,200;	250;	Partly furnishe appliances on			DNSE IN 2019 eted update 10/05/	2017
1-PERSON MAXIM				4570		-		

		Last Comp	ete Update:	11/2/2021			AREA:	Kalihi
PROJECT NAME:	ISLA	ND WEST	1				PROJECT TYPE:	Family
ADDRESS:	607 Nor	th King St.					PHONE: 808-84	7-8465
CITY	Honoluli		STATE: HI	ZIP:	96817		FAX: 808-44	2-0407
5 1111	rionoluit	u	OTATE: III	2	90017			
	Manag	er	ling Manager;	Linda West, Office	APPLY AD On-Site 9a	DRESS: am - 5pm M - F	=	OUT-OF-STATE APPLICATION
APPLY TO								ACCEPTED: NO
APPLY ATTN	I: Linda v	West				FMAII ·	Linda@HSIservice	s net
APPLY PHONE	: 808-84	7-8465		F	AX:	LIIIAIL.	Linda en 1013ci vice	3.1101
Unit	Туре:	Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:	400	750	1400	144	1	2adlt,1kid	YES
One	Bdrm:	3	1565	2750	300	1	3adlt,1kid	
Two	Bdrm:	1	1800	3050	400	2	4adlt,1kid	
Three	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE Building A - rent is Building B - rent is [169 sq. ft] Min Income requir Plus \$100 for extra	s \$700 - M s \$750 - M rement wa a person.	Min income = \$' Min income = \$' aived if have re . Respond to m	1400 1600 p payee;	UTILITIES INCLU			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1
AGE CRITERIA:	omain or	a waithet					TO REMAIN ON V	` / [
Head of household time of application		e 18 years or ol	der at the	WAITLIST	FOR PARKING:		CALL EVERY	(Months): 0
''				PARKING INFO:	YES	PET INFO:		PETS OK: NO
J.	AS	SSET LIMITS:	NONE	\$35/month (first of served basis)	come - mst			
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INF	O:			LEASE:		back. Sm	ed access is from all rooms with no k	itchen. Can bring
				Month-to-month; Section 8 vouche			igerator and hot place unfurnished.	ate.
INCOME CRITER	IA:			,				
No maximum ann	ual incom	ne.		FURNISHED: No carpet. Not for	urniched	.		
				No carpet. Not in	umisneu.			
II 1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	,		Į.		

	La	st Comple	te Update:	1/4/2022			AREA	. Waipahu
PROJECT NAME:	JACK HA	\LL	r				PROJECT TYPE	-
	94-827 Kuhau						PHONE:	, .
CITY:	Mainah		STATE: HI	ZIP:	00707		FAX:	
CITT.	Waipahu		STATE. HI	ZIF.	96797			
MANAGER	R: Jesse Johna	sen			APPLY ADI	DRESS:		OUT OF STATE
APPLY TO): https://www.j	jackhallwai _l	pahu.com/					OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	≣: 808-468-510	2			FAX: 949-7211		https://www.jackha hello@indigoreale	
		mber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
		04	0	NO	559			YES
		40	0	NO	793			YES
Three		10		110	733			
	Bdrm:							NO
RENT INFO: RE 30% to a max of \$ (minus \$103 util. a for two bedrooms Maximum amount	6877 for one be allowance) 30% (minus \$250 u	edroom 6 to a max til. allowand	of \$1022	bedrm; \$250 fo	llowance \$103 for 1	ge	MINIMUM V ESTIMATE MAXIMUM V	(Months): 12
<u> </u>	o are subject to	o onango		Į.				(Months): 24
AGE CRITERIA: Head of househole	d must be 18 y	ears or old	er		07 F00 D40440		TO REMAIN ON CALL EVERY	
				PARKING INF	ST FOR PARKING: O:	PET INFO:		PETS OK: NO
]				Parking includ	ed			
		LIMITS:]		
AN OWN RESIDENCE ASSET LIMIT INF		PERTY:	/ES			GENERAL Section 8	INFO: Project Based Sul	osidy
Income from asse income limit.	ets cannot mak	e tenant go	over	LEASE: 1 year; then m	onth-to-month	5 accessib	ole 1 bdrm units. ts on waitlist MUS as change in phon	T call to update
INCOME CRITER max income: 1 be); 2 bedroo	m \$50,880	FURNISHED: Partly furnishe appliances onl				
I 1-PERSON MAXIM	IUM MONTHL	Y INCOME	:	4475		1		
2-PERSONS MAXI	IMUM MONTH	LY INCOM	E:	5113				

	Last Comp	lete Update:	10/6/2023				Ohioatana
				NOT AGOS	DTIN	AREA:	Chinatown
	KAAHUMANU	•		- NOT ACCE		PROJECT TYPE:	Family
ADDRESS:	Alokele & Kaiwiula St.,	Waiakamilo Rd.	d. & McNeill St.			PHONE: 808-832	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 832-318	8
MANAGER APPLY TO	R: Cynthia Yoshida - Ma D: HPHA NOT ACCEPTING AF	·	APPLY ADDRESS: 1002 North School St. Honolulu, HI 96817 NOT ACCEPTING APP			ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications offi	ce					NO
APPLY PHONE	NOT ACCEPTING AF :: 808-832-5961	PPLICATIONS		FAX: 832-3461	EMAIL: h	ohaishereforyou.oı	rg
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm:						YES
	116	0		714 888	3	8	YES
Three I	Bdrm: 36	0					
Minimum Rent: \$0 the waitlist are to general change or check to password is needed.	O. All HPHA applicants of go to: hpha.myhousing.of heir status. A usernamed to access their accounts of the status	who are on com to e and int.	and gas	UDED: vance for electricity ST FOR PARKING:	T	TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (O REMAIN ON WA CALL EVERY (Months): 36 AIT LIST (Months): 60 AITLIST
			PARKING INFO		PET INFO:	Р	ETS OK: YES
]	ASSET LIMITS:				the categori	mals ok, but only c es listed below: der 25 lbs) or cat	ne from each of
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL II	NFO: ICES: Domestic V	iolence victims:
Cannot own a hou			LEASE: 1 year		homeless in displaced.	transitional shelte	ers; involuntary
INCOME CRITER	IA:					ns must be 3 yrs a	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350	,250; ;	FURNISHED: Partly furnished appliances only			namphetamine or s	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		Įt.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

		Last Comp	lete Update:	5/28/2024			AREA:	Honolulu
PROJECT NAME:	KAHA	UIKI VIL	LAGE				PROJECT TYPE:	Family
ADDRESS:	2325 N. I	Nimitz Hwy.					PHONE: 808-778	B-2464
CITY:	Honolulu		STATE: HI	ZIP:	96819		FAX:	
MANAGER	t: Institute	e for Human Se	ervices		APPLY ADD	PRESS:		OUT-OF-STATE
		ferrals to 425-5	5168 attention t	to Family Program				APPLICATION ACCEPTED:
APPLY ATTN				F	FAX: 808-425-5168		KVApplications@ih	nshawaii.org
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	60	775		324			
Two	Bdrm:	80	975		540			
Three I	Bdrm:							
Four I	Bdrm:							
RENT INFO: RE Rent is deducted a tenats choosing. waitlist are not req manager will be co AGE CRITERIA: Kupuna (62+ yrs)	automatica Regular u quired. Ap	ally through the pdates to remain policant or the	e bank of ain on the case	UTILITIES INCLU Water, electricity	UDED: v, internet, and cabl		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 0 AIT LIST (Months): 0
Families with cust	odial mino	or children		PARKING INFO:		PET INFO:		PETS OK: NO
AN OWN RESID	DENTIAL	SET LIMITS: PROPERTY:		1 parking per ho	usehold	GENERAL		
ASSET LIMIT INF	O:			LEASE: 6 month		or a Trans will have p living in su of being he	ving in Homeless E itional Shelter for h vriority for housing. ibstandard housing omeless may also a st be minimum 1 ac	omeless families Families who are and are at a risk apply.
INCOME CRITER 50% AMI # of people in hou 2 3 50,400 56,700 62	sehold: 4	5 6 000 73,050	7	FURNISHED:		under the All adults a	st be minimum 1 ac table jobs are acce are subject to a Cri luding Sexual Offer	pted) minal Background

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	10/5/2023			AREA:	Kahuku	
PROJECT NAME:	KAHUKU ELDE	ERLY - HAU	JOLI HALE			PROJECT TYPE:	Elderly	
ADDRESS:	56-154 Puuluana Pl.					PHONE: 808-293	3-1416	
CITY:	Kahuku	STATE: HI	ZIP:	96731		FAX : 293-141	16	
	R: Bonnie Cambra D: EAH Housing, Inc.			APPLY ADI 56-154 Puu Unit 100 Kahuku, Ha	luana Pl.		OUT-OF-STATE APPLICATION ACCEPTED: YES	
	E: 808-293-1416		ı	FAX:		eahhousing.org ks-management@e	eahhousing.org	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Two	Bdrm: 64 Bdrm: Bdrm: Bdrm:	0		570	1	3	YES	
Units come with p	ENT IS 30% OF INCOME ratio and planter boxes. A ges to their contact information in a timely manner to the management.	pplicants	JTILITIES INCL Water, sewer ar			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 60 AIT LIST	
AGE CRITERIA:						TO REMAIN ON W	Į.	
All members of the older at the time of	e household must be 62 of application.		WAITLIS PARKING INFO Parking included	11.5	PET INFO:	CALL EVERY Funder 25 lbs. only	(Months): YES	
	ASSET LIMITS:	NONE						
AN OWN RESI	DENTIAL PROPERTY:	NO			GENERAL	INFO:		
ASSET LIMIT INF	O:		LEASE: 1 year; then mo	nth-to-month	remain in Section 8/ Built 2013 coordinate Transports	pouse dies, undera unit if can afford the HUD; 9% LIHTC ; on-site manager, r or, laundry room. ation to Shopping a	e rent. Funding: resource	
INCOME CRITER					Catholic C Application	harities Hawaii n:		
Maximum Annual 1 person \$45,750 2 person \$52,250 3 person \$58,800			FURNISHED: Appliances; ceil water heaters, e microwave, gark granite countert coverings.	electric range, page disposal,	Complete Ask mana Pick up fro	prication: complete online or click management to mail it ck up from manager's office equest by email		
II 1-PERSON MAXIM	MUM MONTHLY INCOME	 ≣:	3813		1			

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	Last Co	omplete Update:	10/6/2023				McCully
DDO IECT NAME:				NOT ACCED	TING	AREA: PROJECT TYPE:	-
	NALANAUA 1545 Kalakaua Ave	•	ma-non) -	NOT ACCEP			1 .
ADDRESS.	1545 Kalakaua Ave	э.				PHONE: 808-973	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 973-019	97
MANAGER	: Ioane Ah Sam			APPLY ADI	DRESS:		
APPLY TO		G APPLICATIONS		1002 North School St. Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications	s office G APPLICATIONS					NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
Unit	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						YES
	3drm: 127 3drm: 58	0	-	711	1	4	YES
Three I		0		901	3	8	
Four I							
Minimum Rent: \$0 the waitlist are to g change or check the password is needed.		nts who are on ing.com to name and ccount.	UTILITIES INC	CLUDED: owance for electricity	т	TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W. CALL EVERY	(Months): 36 AIT LIST (Months): 60 /AITLIST
Head of household	d must be 18 years	or older		IST FOR PARKING:	DET INFO		PETS OK: YES
	ASSET LIMI	TS: NONE	PARKING INF	<u> </u>	the categori	mals ok, but only o es listed below: der 25 lbs) or_cat	one from each of
AN OWN RESIDE	DENTIAL PROPER [*] O:	TY: NO			GENERAL II	NFO: ICES: Domestic V	iolence victims:
Cannot own a hou			LEASE:		homeless in displaced.	n transitional shelte	ers; involuntary
INCOME CRITERI	A:		,			ons 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,	500; 200;	FURNISHED: Partly furnishe appliances on		'	namphetamine or s	sex offender
1-PERSON MAXIM	IUM MONTHLY INC	COME:	4570		Į.		
2-PERSONS MAXI	MUM MONTHLY IN	ICOME:	5220				

	Last Comple	ete Update:	7/18/2023			AREA:	Ala Moana
PROJECT NAME:	KALAKAUA VI	STA				PROJECT TYPE:	Elderly
ADDRESS: 1	628 Kalakaua Ave.					PHONE: 808-946	
сіту:	Honolulu	STATE: HI	ZIP:	96826		FAX : 949-552	25
MANAGER:	Kainoa Kuamoo, Resid	dent Manager		APPLY ADI			OUT-OF-STATE
APPLY TO:	Locations			Honolulu, H			APPLICATION ACCEPTED: YES
APPLY ATTN:	Property Management	Division					150
APPLY PHONE:	808-738-3100			FAX : 735-1978		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:
One Bo	drm: 80	1065	2xrent	430	1	2	YES
Two Bo							
Four Bo	drm:						YES
RENT INFO: REN'	T IS 30% OF INCOME		UTILITIES INC	LUDED:			AL UNITS: 80
Section 8 certificate gross income requir	holders need not mee	t the min		, sono, and has		MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
						ESTIMATE	
AGE CRITERIA:	e 62 or olderat the time	e of			٦	O REMAIN ON W CALL EVERY	
application.	o oz or oldorat aro time	, 01	WAITLI PARKING INFO	ST FOR PARKING: O: NO	PET INFO:		PETS OK: NO
]			\$40/month				
AN OWN DECIDE	ASSET LIMITS: ENTIAL PROPERTY:				 GENERAL I	NEO.	
ASSET LIMIT INFO		TES	LEASE:		Step-in sho	wer only; no batht	ub.
			1 year; then m	onth-to-month	opened 200	ase manager 2 da)2	
INCOME CRITERIA			ı			HTC, RHTF, Secti	ion 8
Maximum income re 30% of AMI: 1 perso		\$31,440	FURNISHED: Partly furnishe appliances onl		Pick up fror	: rom website n manager's office ement to mail it	•
1-PERSON MAXIMU	IM MONTHLY INCOME	<u>:</u>	3821]		

	Last Comp	olete Update:	10/6/2023			AREA:	Mililani
PROJECT NAME:	KALANI GARI	DENS				PROJECT TYPE:	Family
ADDRESS:	95-081 Kipapa Dr.					PHONE: 808-62	3-9811
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX: 623-72	12
MANAGER	R: Heather Weddle			APPLY AI On-Site	DDRESS:		OUT-OF-STATE
APPLY TO) :						APPLICATION ACCEPTED:
APPLY ATTN	1: Kalani Gardens						YES
APPLY PHONE	Ξ : 808-623-9811			FAX: 623-7212	EMAIL:	website: www.eah kg-management@	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:		ļ				
Two	Bdrm: 86	1236	YES	750	2	5	YES
Three	Bdrm: 31	1374	YES	900	3	7	YES
Four	Bdrm:						YES
Rent cannot exceone person house New rents as of 1 2BR \$1126 - \$123 3BR \$1253 - \$137	36 74 - Not Accepting Appl	ications	UTILITIES INC Gas, electricity sewer	CLUDED: y and water, trash a	and	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 9 /AIT LIST
AGE CRITERIA:	nautrad to romain on th	o waitlist				TO REMAIN ON V	
Head of househol time of application	ld must be 18 years or on.	older at the	PARKING INF		PET INFO	CALL EVERY	(Months): PETS OK: NO
ļ	ASSET LIMITS:	NONE	Parking includ	iea			
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF	O:		LEASE:		Funding:	Section 8 and LIHT	С
			1 year		NO RESP	PONSE IN 2023	
INCOME CRITER							
persons - \$65,280 \$78,300; 6 persor	me: 2 persons - \$58,02 0; 4 persons - \$72,480; ns - \$84,120; 7 persons ry due to different criteri	5 persons - - \$89,880;	FURNISHED: Partly furnishe appliances on				
I-PERSON MAXIN	MUM MONTHLY INCOM	ΛE:	,		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	DME:	4820				

	Last Com	plete Update:	10/6/2023	3		AREA:	Chinatown
PROJECT NAME:	KALANIHUIA	(HPHA-hor	n) - NOT	ACCEPTING	APPLI	PROJECT TYPE:	Elderly
ADDRESS:	1220 Aala St.	`				PHONE: 808-586	6-9724
	<u> </u>		_			FAX: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
MANAGER	t: Sol Sentous			APPLY	ADDRESS:		
1					orth School St.		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING A	APPLICATIONS			u, HI 96817 CEPTING AP	PLICATIONS	APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications o						NO
1	NOT ACCEPTING				EMA	NL: hphaishereforyou.o	ora
APPLY PHONE	: 808-832-5961			FAX : 832-3461		,,	
Unit	Type: Number		Minimur		MINIMU		CAREGIVER
	of UNITS:	RENT:	INCOM Require		Number of Peop		Allowed:
S	tudio: 60	0		420	1	2	YES
One I	Bdrm: 90	0		492	1	4	YES
Two I	Bdrm:						YES
Three I	Bdrm: 1						
Four I	Bdrm:						
	NT IS 30% OF INCOME. Output Discrepance Output		Allowance f	INCLUDED:			L UNITS: 151
the waitlist are to	go to: hpha.myhousing heir status. A usernar	g.com to		o. u.m.oo		MINIMUM W ESTIMATE	
	ed to access their acc					MAXIMUM W	AIT LIST
************	Q/2/2016*****		ļ			ESTIMATE	(Months): 60
AGE CRITERIA:	d or spouse must be 6	2 voore er				TO REMAIN ON W CALL EVERY	
older, or disabled	u or spouse must be o	oz years or		TLIST FOR PARKIN			
			PARKING I	NFO:	PET IN	pets under 25 lbs. only	PETS OK: YES
1		. Lucus	Included		Siliali	pets under 25 ibs. Only	
AN OWN RESID	ASSET LIMITS DENTIAL PROPERTY				GENER	RAL INFO:	
ASSET LIMIT INF		. 110	LEACE.			ERENCES:(A) domest	ic violence
Cannot own a hou	se on Oahu.		LEASE: 1 year			s; homeless in transition ced. (B) substandard h	
					of inco	ome. (C) others = indefi r dies, under age 62 sp	nite wait.
J					unit. F	unding: Fed Low Inc Pu	ub Hsing 100%
INCOME CRITERI			FURNISHE	D:	All con	e Eligibility=80% of AM nvictions must be 3 yrs	ago, unless it's
Maximum Annual	Income: 1 person - \$5	53,250;		shedmajor	crystal	I methamphetamine or	sex offender
	00; 3 persons - \$68,50 00; 5 persons - \$82,20			only, no carpet	Last co	ompleted update 10/05	/2017
6 persons - \$88,30	00; 7 persons - \$94,35						
8 persons - \$100,4	+50						
1-PERSON MAXIM	IUM MONTHLY INCO	ME:	4570				
2-PERSONS MAXI	MUM MONTHLY INC	OME:	5220				

	Last Comp	lete Update:	10/6/2023			AREA:	Kalihi
PROJECT NAME:	KALIHI VALLE	Y HOMES	(HPHA-ho	n) - NOT ACC	EPT	PROJECT TYPE:	Family
ADDRESS:	2250 Kalena Dr.					PHONE: 808-832	2-3336
CITY	Honolulu	STATE: HI	ZIP:	96819		FAX: 832-338	35
OII I.	Pronoiulu	STATE. HI	2	96619			
MANAGER	: Julie Wiggett			APPLY ADD			0117.05.07475
APPLY TO	: HPHA NOT ACCEPTING AI	PPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications off NOT ACCEPTING AI						NO
APPLY PHONE	: 808-832-5961			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:
S	tudio:						
One I	Bdrm: 52	0		494	1	4	YES
Two I	Bdrm: 60	0		674	2	6	YES
Three I	Bdrm: 123	0		834	3	8	YES
Four I	Bdrm: 112	0		1115	4	10	YES
applicants who are hpha.myhousing.c status. A usernan access their account.	5 Bdrm units. All HPle on the waitlist are to goom to change or check ne and password is need unt.	to to: their eded to	Water and allow	wance for electricity		MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W. CALL EVERY	(Months): 36 AIT LIST (Months): 60 /AITLIST
Ticad of flouscriot	a must be to years or e	idei	WAITLIS PARKING INFO	ST FOR PARKING:	PET INFO		PETS OK: YES
			one space per	1.1.5	multiple a	nimals ok, but only ories listed below:	one from each of
AN OWN DECK	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	under 25 lbs) or cat	
ASSET LIMIT INFO		INO	I FACE.			ENCES: Domestic V	/iolence victims;
Cannot own a hou	se on Oahu		LEASE: 1 year		displaced	in transitional shelte . Fed Low Inc Pub Hs	•
INCOME OBITES	14.		1			tions must be 3 yrs	o .
ncome Eligibility =			FURNISHED:			ethamphetamine or	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350 450	; ;	Partly furnished appliances only		NO RESF	PONSE IN 2023	
I 1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	4570		<u>J</u>		

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	Last Comp	ete Update:	10/6/2023			AREA	: Hawaii Kai
PROJECT NAME:	KALUANUI SE	NIOR APAF	RTMENTS			PROJECT TYPE	: Elderly
ADDRESS:	6950 Hawaii Kai Dr.					PHONE:	,
CITY:	Honolulu	STATE: HI	ZIP:	96825		FAX:	
MANAGER	R: Mike Klein, Compliand	ce Manager		APPLY ADI 394-6688	DRESS:		OUT-OF-STAT
APPLY TO	D: call for viewing and ap	plication		33 . 3333			APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE	E: 808-394-6688			FAX:	EMAIL:	halealiigroup@yah	noo.com
Unit	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:						
	Bdrm: 10	1228		525			
	Bdrm: 21	1473		600			
	Bdrm:						
Four	Bdrm:			J	J.		NO
Lower rent units for 3 1bdrm 3 2bd	ENT IS 30% OF INCOME or people at <30%AMI Irm or people at <50%AMI		UTILITIES INCI			TOTA MINIMUM V ESTIMATE	
7 1bdrm 18 2bd Sect 8 accepted						MAXIMUM V ESTIMATE	
AGE CRITERIA:						TO REMAIN ON \	WAITLIST
One member mus	st be 62+; spouse can be	18+	WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 6
			PARKING INFO		PET INFO:		PETS OK: NO
			Parking \$40 mg	ontn			
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				JENERAL	INFO:	
ASSET LIMIT INF			LEASE:		Opened 11	1/15/2003 all units	
			1 year		ventilation, have tub, 2 Communit Inc Hsing	lever handles on Pbdrm have showe y Lounge with TV, Fax Credit 100%	d living room, cross doors. 1bdrm units er with low lip. a/c. Funding: Low
	RIA: rson \$21,650; 2 persons rson \$36,050; 2 persons	\$41,200	FURNISHED: Partly furnished appliances only			RHTF RTIAL RESPONS leted update 10/20	
-PERSON MAXIN	MUM MONTHLY INCOM	 E:	3004		<u> </u>		
-PERSONS MAX	IMUM MONTHLY INCOI	ИE:	3433				

		Last Comp	lete Update:	5/28/2024			AREA:	Kakaako
PROJECT NAME:	KAM	AKEE VIS	TA				PROJECT TYPE:	Family
ADDRESS:	1065 Ka	waiahao St.					PHONE: 808-597	7-1725
CITY:	Honoluli	u	STATE: HI	ZIP:	96814		FAX : 808-597	71002
MANAGER	R: Toshi l	Hines			APPLY AD			OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	perties Inc.					APPLICATION ACCEPTED:
APPLY ATTN	I: Kamak	ee Vista						YES
APPLY PHONE	: 808-59	4-0121			FAX: 594-0123		kkamakeevista@ha http://hawaiiafforda	awaii.rr.com ble.com/residential-
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:	90	1886	3338	570	1		YES
Two	Bdrm:	136	2438	4115	720	2		YES
Three	Bdrm:							
Four	Bdrm:							YES
							MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 3 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	
Head of househole	d must be	e 18 years or ol			IST FOR PARKING:			
				PARKING INF \$40/month; \$7	75 each additional	PET INFO:		PETS OK: NO
	AS	SSET LIMITS:		stall				
AN OWN RESI		PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF Cannot own other		unit in this cou	nty.	EASE:			an be converted to are allowed with N	
				1 year		Application Ask mana	n: gement to mail it est with self-addres	becames hear
NCOME CRITER	IA:					envelope	om manager's office	
No maximum ann Min Income for ma	arket 1 bo		Г	FURNISHED: Partly furnishe appliances on			y email or fax	
-PERSON MAXIM	10M MUI	NTHLY INCOM	E: ;	3700				

		Last Comp	olete Update:	10/6/2023				ARI	EA: Waipahu
PROJECT NAME:	KAM	ALU - HO	OLULU E	LDERLY -	NOT AC	CEPTIN	G	PROJECT TY	PE: Elderly
ADDRESS:	94-941 k	Kauolu Pl.						PHONE: 808	-675-0099
CITY:	Maipahı	J	STATE: HI	ZIP:	967	'97		FAX : 675	-0098
	, ·								
MANAGER						PLY ADDRES Site Apt. A-1			OUT-OF-STATE APPLICATION
APPLY ATTN		Affordable Pro	operties Inc.						ACCEPTED: NO
APPLY PHONE					FAX : 675-0	0098	EMAIL:	http://hawaiiaffo	ordable.com/residential-
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ F	N	NIMUM lumber People	MAXIMUN Number of People:	
S	tudio:	171	170		443	3	1	1	YES
One I	Bdrm:	50	195		599	·	2	2	YES
Two I	Bdrm:								
Three I	Bdrm:				-	_			
Four I	Bdrm:							<u> </u>	YES
RENT INFO: RE	NT IS 30	% OF INCOM	F. VES	UTILITIES IN	CLUDED:			T	OTAL UNITS: 221
Minimum rent for s	studio is S	\$170 and for o	ne bdrm is	Electricity and					M WAIT LIST
\$195 or 30% of inc								ESTIMA	TE (Months): 36
********Waitlist Cl	LOSEDs	ince 8/2/2016°							M WAIT LIST TE (Months): 36
AGE CRITERIA:								TO REMAIN O	
Head of household time of application					IST FOR PAI		0		
old.				PARKING INF		— P	ET INFO):	PETS OK: NO
p.	Δ	SSET LIMITS:	YES						
AN OWN RESID						G	ENERAL	_ INFO:	
ASSET LIMIT INFO			A = = = 4	LEASE:		C	Caregiver	rs are allowed wi ence for veteran	th MD letter.
Cannot own prope Limit: 1 person - \$ 2 persons - \$44,10	38,600,	ne county.	Asset	Month-to-mor	nth	L N	pened 19 arge gar Meeting/D	993-Kamalu 199 den Dining room with	94-Hoʻolulu
INCOME CRITERI	IA:						Catholic C	Charities Hawaiʻi	
Maximum Annual 1 person - \$34,300 2 persons - \$39,20	0			Partly furnish appliances or Central heat; system	edmajor nly.	L	ınit)	PONSE in 2023.	·
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	1E:	2858					
2-PERSONS MAXI	MUM MC	NTHLY INCO	ME:	3267					

	Last Comple	te Update:	10/6/2023			AREA:	Kalihi
PROJECT NAME:	KAMEHAMEHA	HOMES	(HPHA-ho	n) - NOT AC	CEPTI	PROJECT TYPE:	Family
	1541 Haka Dr.			,		PHONE: 808-832	2-3153
						FAX: 832-318	
CITY:	Honolulu	STATE: HI	ZIP:	96817		10000	
MANAGER	: Cynthia Yoshida - Mana	ager		APPLY AD	DRESS:		
APPLY TO	D: HPHA NOT ACCEPTING APF	PLICATIONS		1002 North Honolulu, F NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APF						NO
APPLY PHONE	: 808-832-5961			FAX : 832-3461	EMAIL:	nphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:			F40			YES
	Bdrm: 62 Bdrm: 123	0		800	2	6	YES
Three I		0		980	3	8	YES
	Bdrm:						
Minimum Rent: \$0 All HPHA applicanto: hpha.myhousin	NT IS 30% OF INCOME: of for Federal Low Income this who are on the waitlist ag.com to change or chec the and password is neede unt.	projects are to go k their	Water and allo	LUDED: wance for utilities		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36 AIT LIST
AGE CRITERIA:			p.			ESTIMATE TO REMAIN ON W	
	d must be 18 years or old	er	WAITLI	ST FOR PARKING:		CALL EVERY	
			PARKING INFO		PET INFO:	F	PETS OK: YES
	ASSET LIMITS:	NONE	Included	·	the categor	imals ok, but only or ries listed below: nder 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:	OV			GENERAL	INFO:	
Cannot own a hou			LEASE: 1 year			NCES: Domestic V in transitional shelte	
					Funding: F	ed Low Inc Pub Hs	sing 100%
INCOME CRITERI						ons must be 3 yrs	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,2 20; 3 persons - \$68,500; 20; 5 persons - \$82,200; 20; 7 persons - \$94,350;	50;	FURNISHED: Partly furnishe appliances onl		.	ONSE IN 2023	sea unender
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

	Last Comple	te Update:	10/6/2023				Kaneohe
DDO IECT NAME.	-	·	· /UDUA	wind\ NOT A	CCE	7.11.127.11	Family
	KANE'OHE APA 45-507 & 45-513 Pahia F		(прпа-	wind) - NOT A			1 .
ADDRESS.	45-507 & 45-513 Pania F	Ka.			'	PHONE: 808-233	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX: 233-376	9
MANAGER	t: Roberta Kahele b: HPHA NOT ACCEPTING APP	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCEF	School St.	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APP						NO
APPLY PHONE		LICATIONS		FAX: 832-3461	EMAIL: hp	ohaishereforyou.o	g
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 5	0		429	1	4	YES
	Bdrm: 19	0		600	2	6	YES
Three I							
Minimum Rent: \$0 All HPHA applicar to: hpha.myhousir	NT IS 30% OF INCOME: of for Federal Low Income into who are on the waitlist ing.com to change or checine and password is needeunt.	projects. are to go k their	ITILITIES INC Vater and allo	CLUDED: owance for electricity		TOTA MINIMUM W, ESTIMATE (MAXIMUM W, ESTIMATE ((Months): 36
AGE CRITERIA:					Т	O REMAIN ON W	AITLIST
Head of household	d must be 18 years or olde	er	WAITLI	IST FOR PARKING:		CALL EVERY	
	_		ARKING INF	O:	the categorie	nals ok, but only c es listed below:	ers OK: YES
ANI OWNI DECI	ASSET LIMITS:				r	der 25 lbs) or cat	
ASSET LIMIT INF			EASE:			CES: Domestic V transitional shelte	
					Funding: Fe	d Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:					ns must be 3 yrs a amphetamine or s	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,290; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	50;	URNISHED: Partly furnishe appliances on		'	NSE IN 2023	ex offerider
1-PERSON MAXIM	IUM MONTHLY INCOME:	: 4	1570		k		
2-PERSONS MAXI	MUM MONTHLY INCOM	E: 5	5220				

	Last Com	plete Update:	7/20/2023			AREA:	Kaneohe
PROJECT NAME:	KANEOHE EL	DERLY				PROJECT TYPE:	Elderly
ADDRESS:	45-457 Meli Pl.					PHONE: 808-235	5-4399
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX: 235-003	33
MANAGER	R: Community Manage	r boing birod: Nou	ragional mana	ger - APPLY ADI	DECC.		
	Richard Char (rchard) Cambridge Manager	@cmiweb.net) 808	3-859-6514	Leasing Offi			OUT-OF-STATE APPLICATION
APPLY ATTN	Friday, 9:00am - 1:0		nours - Moriday				ACCEPTED: YES
	E: 808-235-4399			FAX : 235-0033		kaneohe@cmiweb. https://www.kaneoh	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 44	0		588	1	3	YES
Two	Bdrm:						
	Bdrm:						NO
	ENT IS 30% OF INCOM		Water and \$52 taken off the re	! mo. utility allowance		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36
AGE CRITERIA:			Į.			ESTIMATE TO REMAIN ON W	
	d must be 62 years or		WAITLI	ST FOR PARKING:		CALL EVERY	
caregivers allowed	amily members, roomn d at any age.	nates, and	PARKING INFO		PET INFO:	F	PETS OK: YES
]	ASSET LIMITS	: NONE	Parking include	ed if available		sit; one dog/cat/caç ; breed/species res	
	DENTIAL PROPERTY	: YES			GENERAL		
ASSET LIMIT INF	O:		LEASE: 1 year		manageme Emergency convenient landscaped		m, on-call bus line;
	IA: income: 1 person \$40, 0, 3 persons \$52,500	850	FURNISHED:		Section 8 1 Application Ask manag	100% i: gement to mail it	
2 porsons \$40,000	o, o poisons φυ 2, συ		Partly furnishe appliances onl flooring. Ample cabinet space;	y. Wood-style e closet and	envelope	est with self-addres	·
₽ 1-PERSON MAXIN	MUM MONTHLY INCO	ME:	3404		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	OME:	3887				

	Last Compl	ete Update:	10/6/2023			AREA:	Lanakila
PROJECT NAME:	KAPUNA I - NO	T ACCEP	TING APP	LICATIONS		PROJECT TYPE:	Elderly
ADDRESS:	1015 North School St.					PHONE: 808-845	5-2130
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 845-668	34
	2: Sherry Prevo 2: Sage Apartment Com	munities, Inc.		APPLY ADI 1015 North Honolulu, H	School St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	E: 808-845-2130			FAX : 845-6684	EMAIL:	kapunaonesage.co	m
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 162	0		530			YES
Three	Bdrm:						NO
minimum rent \$25 Annual update ba application. Must in a timely manne	sed on anniversary date respond to mail from ma	of anagement	UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1 AIT LIST
be 62 years or old	lication, Head of househ ler, or 18+ w/ disability. nily members, roommate	Spouse	WAITL	IST FOR PARKING: O: YES	PET INFO	TO REMAIN ON W CALL EVERY	
	d with mgmt approval. ASSET LIMITS:		Parking includ			roved reasonable accequesting pet	· ·
AN OWN RESI	DENTIAL PROPERTY:	YES			GENERAL	_ INFO:	
ASSET LIMIT INF	O:		LEASE: 1 year, then m	nonth-to-month.	monthly in Funding: Tax Creditation	st be notified if applincome goes up or de Section 8 and Low lit 100% tation to Shopping and Charities Hawai'i upc	own \$200 or more. ncome Housing vailable through
INCOME CRITER	IA:				Must com	ne in personally to up	odate applications
Maximum annual income is 80% AMI: 1 person - \$67,700; 2 persons - \$77,350, 3 persons - \$87,000 PREF: VERY LOW INCOME (<30% OF MEDIAN)			or mail			with form sent to ap PONSE IN 2023	plicant.
1-PERSON MAXIM	IUM MONTHLY INCOMI	E :	5642				

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		Last Comp	lete Update:	10/6/2023			AREA:	Waianae
PROJECT NAME:	KAU'	IOKALAN	II (HPHA-I	ee) - CLOS	ED		PROJECT TYPE:	Family
ADDRESS:	85-658 I	Farrington Hwy	· /.				PHONE: 808-697	7-7171
CITY:	Waiana		STATE: HI	ZIP:	96792		FAX : 697-717	74
	,							
MANAGER	R: Lui Fal	eafine			APPLY A			
APPLY TO): HPHA				1002 North Honolulu, I	n School St. HI 96817		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu a	applications off	ice					NO
APPLY PHONE	E: 808-83	2-5960			FAX : 832-3461	EMAIL:		
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:			<u> </u>				
Two	Bdrm:			<u> </u>				
Three	Bdrm:	50	0		987	3	8	YES
Four	Bdrm:							
Minimum Rent: \$5 projects PREFER victims; homeless displaced.	50.00 for ENCES: in transif	Federal Low In Domestic Viole tional shelters;	come	Water and allo	CLUDED: owance for electricity	y only	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	5ED 01010	Λ1 <i>C</i> *****					TO REMAIN ON W	
Head of househole	d must be	e 18 years or o	lder	WAITL	IST FOR PARKING	i:	CALL EVERY	(Months):
				PARKING INF		PET INFO:		PETS OK: YES
1	AS	SSET LIMITS:	NONE	Parking one st	tali	the catego	nimals ok, but only ories listed below: under 25 lbs) or cat	
AN OWN RESI		PROPERTY:	NO			GENERAL		
Cannot own a hou		ahu		LEASE: 1 year		any corres updates n update an composition	s must respond in a spondence from HP eeded, however, a y contact information on info, and check wousing.com (will ne-	HA. No waitlist oplicants must on/household vaitlist status via
INCOME CRITER						Username	e/password to do so Fed Low Inc Pub Hs).
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$53 sons - \$68,500 sons - \$82,200	;	FURNISHED: Partly furnishe appliances on		All convict crystal me	ions must be 3 yrs ethamphetamine or ONSE IN 2023	ago, unless it's
1-PERSON MAXIM	NOM MUI	NTHLY INCOM	IE:	4570		-		
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	5220				

	Last Comp	lete Update:	5/17/2023			AREA:	Kakaako
PROJECT NAME:	KAUHALE KAI	KAAKO				PROJECT TYPE:	Family
ADDRESS:	860 Halekauwila St.					PHONE : 808-593	3-9035
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 591-025	50
MANAGER	R: Laura Kim			APPLY ADI			OUT-OF-STATE
APPLY TO): Hawaii Affordable Pro	perties Inc.					APPLICATION ACCEPTED:
APPLY ATTN	I: Kauhale Kakaako						YES
APPLY PHONE	E: 808-593-9035			FAX: 591-0250	ŀ	kauhalekakaako.co http://hawaiiafforda	m ble.com/residential-
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:	4000	4250	570			YES
	Bdrm: 116	1832 2167	4350	578	1	4	YES
Three		2107	5600	728	2	5	
	Bdrm:						YES
RENT INFO: RE	INT IS 30% OF INCOME anned for 7/2023.		UTILITIES INC Water, Sewer,			TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
		Į.				ESTIMATE	
AGE CRITERIA:	d must be 18 years or o	lder at the				TO REMAIN ON W CALL EVERY	
time of application			WAITLI PARKING INF	O: NO	PET INFO:		PETS OK: YES
	ASSET LIMITS:		1st stall - \$62. \$94.24. Diamo	83; 2nd stall -		tted with a \$200 re	
AN OWN RESI	DENTIAL PROPERTY:		\$157 mo.) No	guest parking.	GENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:			Lanai, AC, renoval deck with a bask	
			1 year		center and Manager/M	ecue areas, playgr convenience store Igmt Office, and Co plication: Ask mgn	. On-site Resident entral Laundry
INCOME CRITER						anager's office. Or dableproperties.co	
depends upon nur	cannot exceed 100% A mber of occupants and s persons - \$141,100, ann	size of unit. ually.	with hood, refr kitchen sinks,	ed- carpet, range igerator, double blinds, ceiling able jacks, dead	applicants well as res		ar waitlist updates, act info current, as ation from housing
F 1-PERSON MAXIN	IUM MONTHLY INCOM	E:	7625		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	8708				

	Last Comple	ete Update:	10/6/2023			AREA:	Wahiawa
PROJECT NAME:	KAUHALE NAN	I (HPHA-c	en) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
	310 North Cane St.					PHONE: 808-622	2-6360
						FAX: 622-636	
CITY:	Wahiawa	STATE: HI	ZIP:	96786		,	
MANAGER	: Jimary Quinones			APPLY ADI	DRESS:		
APPLY TO	D: HPHA NOT ACCEPTING APP	PLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications offic NOT ACCEPTING APP						NO
APPLY PHONE	: 808-832-5961			FAX : 832-3461	EMAIL: h	nphaishereforyou.o	rg
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 14	0		564			YES
	Bdrm: 14	0		564	1	4	YES
Three I		0		958	3	8	YES
	Bdrm:						
Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.	NT IS 30% OF INCOME: of for Federal Low Income Domestic Violence victim itional shelters; involuntal	projects ns; 'y	UTILITIES INC Water and allo and gas	CLUDED: wance for electricity		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36 AIT LIST
AGE CRITERIA:			r.			ESTIMATE TO REMAIN ON W	
	d must be 18 years or old	ler	\\/ \ T	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	F	PETS OK: YES
	ASSET LIMITS:	NONE	Parking includ	ed	the categor	imals ok, but only ories listed below: nder 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:		*Applicants	s must respond to a	any
			1 year		manner. No applicants info/housel	dence from HPHA, o waitlist updates nust update any concluded composition in	needed, however, ontact ifo and check
INCOME CRITERI			ELIDNICHED.		need userr	tus via hpha.myhou name/password to o	do so).
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,2 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250;	FURNISHED: Partly furnishe appliances on		All convicti crystal met	ed Low Inc Pub Hs ons must be 3 yrs hamphetamine or DNSE IN 2023	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220				

	Last Co	mplete Update:	10/6/2023			AREA:	Waimanalo
PROJECT NAME:	KAUHALE C	'HANA (HP	- (IA-wind	NOT ACCEPT	ΓING	PROJECT TYPE:	Family
	41-1260 Kalaniana	•				PHONE: 808-233	3-3766
						FAX: 233-376	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		,	
	: Roberta Kahele			APPLY ADI 1002 North : Honolulu, H	School St.		OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING Cahu applications			NOT ACCE	PTING APPLI	CATIONS	ACCEPTED: NO
ALLETATION	NOT ACCEPTING				FMAII -	hphaishereforyou.o	ra
APPLY PHONE	: 808-832-5961			FAX: 832-3461	LIIIAIL.	Tipriaistici ci oi you.o	·9
Unit	Type: Number of UNITS	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 3drm:						
	Bdrm:			1003	3	8	YES
Three I		0		1003		0	123
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced.	NT IS 30% OF INCO for Federal Low Inco Domestic Violence tional shelters; invo	victims;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA 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 older	WAITI	IST FOR PARKING:		CALL EVERY	(Months):
			PARKING INF		PET INFO	: F nimals ok, but only o	PETS OK: YES
1	ASSET LIMI	rs: NONE			the catego	ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERT	Y: NO			GENERAL	. INFO:	
Cannot own a hou			LEASE: 1 year		correspon manner. N applicants info/house	ts must respond to a dence from HPHA, No waitlist updates n s must update any co ehold composition in atus via hpha.myhou	in a timely leeded, however, ontact fo and check
INCOME CRITERI	A:				need user	rname/password to	do so).
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - 00; 3 persons - \$68, 00; 5 persons - \$82, 00; 7 persons - \$94,	500; 200;	FURNISHED: Partly furnishe appliances on		All convictorystal me	Fed Low Inc Pub Hs tions must be 3 yrs a ethamphetamine or s DNSE IN 2023	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INC	OME:	4570		Į.		

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		Last Comp	lete Update:	5/16/2023			AREA:	Wahiawa
PROJECT NAME:	KAW	AHI MALI	JWAI APA	RTMENTS	1		PROJECT TYPE:	Family
ADDRESS:	730 Wili	ikina Dr.					PHONE: 808-888	3-5287
CITY:	l Wahiawa	а	STATE: HI	ZIP:	96786		FAX: 888-532	29
		Garza, Mana	ger		APPLY AI	DDRESS:		OUT-OF-STATE APPLICATION
APPLY TO APPLY ATTN		Maluwai Apar	tments					ACCEPTED: YES
APPLY PHONE		·			FAX: 888-5329		awahi@cmiweb.noww.KawahiMaluw	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	79	0	NO		1	3	YES
Two I	Bdrm: Bdrm:	39	0	NO		2	5	YES
Four I	Bdrm:		<u> </u>					
RENT INFO: RE project-based sect managed by Caml known as Wilikina	tion 8 buil bridge Ma	ding with priva	ate owner	UTILITIES INC Water, sewer,			MINIMUM W ESTIMATE MAXIMUM W	(Months): 24
AGE CRITERIA:				Į.			ESTIMATE TO REMAIN ON W	
Head of household time of application		18 years or o	lder at the		IST FOR PARKING	_	CALL EVERY	
	۸۵	SSET LIMITS:	VES		led, 149 stalls. have car and stalls	PET INFO: Only servic	e animals with doo	PETS OK: NO
AN OWN RESID	DENTIAL			available.	Cubot parking	GENERAL	NFO:	ar waitlist updates.
Property is counte eligibility. 401K by formula) counte	- current	interest rate (d		LEASE: One-year then thereafter	n month-to-month	applicants and respon mgnt in a ti Funding: S	must keep all cont d to communication mely manner.* ection 8 100% + Li ped accessible un	act info current, on from housing
INCOME CRITERI Maximum Monthly		5 persons - \$6	5510.00	FURNISHED: Partly furnishe appliances & r carpet.	ed with-major microwave. No	at ground le Playground maintenand Laundry Fa Transporta	evel. 2 Elevators, (I, secured key-card ce, On-site managracilities. Newly ren tion to shopping avarities Hawai'i. Cu	Community Room, d entry, 24 hr. ement and novated (2012) vailable through
1-PERSON MAXIM 2-PERSONS MAXI				4220				

	Last Compl	ete Update:	10/6/2023			AREA	Moiliili
PROJECT NAME:	KEAUHOU SHI	ELTER				PROJECT TYPE	Emergency/Transi
ADDRESS:	1020 Isenberg St.					PHONE: 808-53	7-8330
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
APPLY TO	R: Jordan Torres, Housin D: Intake hours - Monday		am - 4:30pm	APPLY Al Walk-in, o			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	e: 808-537-8330		ı	FAX:	EMAIL	: https://waikikihc.or shelter/	g/locations/keauhou-
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 75						
	Bdrm:						
Four	Bdrm:						
RENT INFO: RE	NT IS 30% OF INCOME	::	UTILITIES INCL	UDED:			AL UNITS: 75
						MINIMUM W ESTIMATE MAXIMUM W	(Months):
			ļ			ESTIMATE	
AGE CRITERIA: 18 years or older,	adults only, no family		WAITLIS	T FOR PARKING) :	TO REMAIN ON V CALL EVERY	
			PARKING INFO:		PET INFO): v, 8 animals max for	PETS OK: project
AN OWN RESI	ASSET LIMITS:				GENERA	I INFO:	
ASSET LIMIT INF			LEASE:		Dormitor	y facility, shared bat	hrooms, showers,
			Program Fee		Services assistant	ind laundry facilities include housing pla ce, job training, help hts and mail service.	
INCOME CRITER	IA:						
			FURNISHED:		-		
		_					

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	10/24/2023			AREA:	Moiliili
ROJECT NAME:	KEAUHOU SH	ELTER			F	PROJECT TYPE:	Emergency/Trans
ADDRESS:	1020 Isenberg Street				١	PHONE: 808-53	7-8330
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER APPLY TO	: on-site, 7:30am - 4:30	nm: if snace ava	ailable to complete	appointment	DRESS: ilable, staff will sto complete ad		OUT-OF-STAT
APPLY ATTN	pre-applicaton	p, opaco are		paperwork.			ACCEPTED:
APPLY PHONE			F.A	AX:	EMAIL: ht	tps://waikikihc.or	g/locations-shelter/
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	0	i toquii ou		Join Copie	. оср. с	
One I	Bdrm:	0					
Two I		0					
Four I		0					
Emergency housir houseless or at ris	NT IS 30% OF INCOME ng for up to 75 clients wi k. Dormatory-type arra noms and showers, shar is.	no are ngement	UTILITIES INCLUI	DED:		MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
AGE CRITERIA:			ie.		Т	ESTIMATE O REMAIN ON V	VAITLIST
All individuals or chemoless or at risl	ouples, age 18 and olde k.	er, who are	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:	CALL EVERY	(Months): 0
	ASSET LIMITS:						
AN OWN RESID	DENTIAL PROPERTY:				GENERAL IN		es and individuals;
			LEASE:		housing place help obtaining services. Housing First program to e	cement assistance ong ID, social secu- st model is used, enroll clients strain	e; job training; urity card, etc.; mail which allows ight from the street
NCOME CRITERI	A:		FURNISHED:		and assist the	nem once they ar	e housed.
-PERSON MAXIM	UM MONTHLY INCOM	E:	0]		
-PERSONS MAXI	MUM MONTHLY INCOI	ME:	0				

	Last Comp	lete Update:	10/6/2023			AREA:	Chinatown
PROJECT NAME: KEK	AULIKE C	OURTYAR	DS			PROJECT TYPE:	Family
ADDRESS: 1016 N	Maunakea St.					PHONE: 808-54	5-2993
CITY: Honold	ulu	STATE: HI	ZIP:	96817		FAX: 545-36	54
MANAGER: Eric \	Wong, Property N	Manager		APPLY A	ADDRESS:		OUT-OF-STAT
APPLY TO: Keka	ulike Courtyards	Corp.					APPLICATION ACCEPTED:
APPLY ATTN:							NO
APPLY PHONE: 808-5	545-2993			FAX: 545-3654		ttp://www.mutual- ousing.org/kekaul	ike-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
Waitlist is open intermitte http://www.mutual-housin			Water and sev	wei		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 3
AGE CRITERIA: Head of household must	he 21 years or o	der at the			ד	O REMAIN ON V CALL EVERY	
time of application; spous caregiver must be 18+.	se/partner, roomr	nates,	WAITLI PARKING INF	IST FOR PARKING	G: PET INFO:		PETS OK: YES
caregiver made be 101.	ormaterr unowed	(under 10)	\$40/month	o. 140		(2 max) and fish o	P
,	ASSET LIMITS:	NONE					
AN OWN RESIDENTIA	L PROPERTY:	NO			GENERAL I		
ASSET LIMIT INFO:			LEASE: 1 year; then m	nonth-to-month	must keep of respond to a timely ma Laundry roo		nt, as well as om management in (except C
INCOME CRITERIA: \$45,750 for 1 person, \$52 \$58,800 for 3 persons, \$6			FURNISHED: Partly furnishe appliances on		courtyards, Application http://www.i courtyards/ open).	as only I laundry in secure building. available at: mutual-housing.or (only during times on SE IN 2023	g/kekaulike-
 1-PERSON MAXIMUM MO	ONTHLY INCOM	E:	3813]		
2-PERSONS MAXIMUM N	MONTHLY INCO	ME:	4029				

Last Complete Update:	5/5/2023	AREA:	Kapolei
PROJECT NAME: KEKUILANI COURTS		PROJECT TYPE:	Family
ADDRESS: 91-1083 Kekuilani Lp.		PHONE: 808-674	4-0405
CITY: Kapolei STATE: H	ZIP: 96707	FAX : 674-042	26
MANAGER: Nua Vaovasa Site Manager: Kristine Scott	APPLY ADD	RESS:	OUT-OF-STAT
APPLY TO: Hawaii Affordable Properties Inc.			APPLICATIO ACCEPTED
APPLY ATTN: Kekuilani Courts LLC			YES
APPLY PHONE : 808-674-0405	FAX : 674-0426	EMAIL: kekuilanicourts@gr http://hawaiiafforda	
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required: SQ FT:	MINIMUM Number of People MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm: 80 2000	2000		YES
Two Bdrm: 80 2000 Three Bdrm:	3600 790	1	
Four Bdrm:			YES
RENT INFO: RENT IS 30% OF INCOME: NO Section 8 holders do not need to meet the minimum income requirement. Must have verifiable residential history.	UTILITIES INCLUDED: Water	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA: Head of household must be 18 years or olderat the		TO REMAIN ON W CALL EVERY	
time of application.	WAITLIST FOR PARKING: PARKING INFO: NO 1-Parking included, additional	PET INFO: F	PETS OK: NO
ASSET LIMITS: YES	stall - \$15/mo. Guest parking available during specified hours.		
AN OWN RESIDENTIAL PROPERTY: NO		GENERAL INFO:	
ASSET LIMIT INFO: Property is counted when determining income eligibility.	LEASE:	Along with completing regular applicants must keep all cont and respond to communication mgmt.in a timely manner.*	act info current
		Project has resident manager central laundry facility, recrea	r, mgmt. office,
NCOME CRITERIA: Income is not to exceed 80% AMI.	FURNISHED: Partly furnished major appliances; gas range; disposal, small patio with storage closet.	machine, barbecue area, visit wash area, membership in Kawith access to the rec facility pool. Bus stops across street	tor parking, car apolei Association and swimming
		Application:	
	6100	Į-	

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	Last Comp	· [-	10/6/2023			AREA:	,
	KEKUILANI GA	ARDENS				PROJECT TYPE:	<u> </u>
ADDRESS:	91-1045 Kekuilani Lp.					PHONE: 808-674	
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX : 674-417	70
MANAGER	: Mark Development, Ir	nc.		APPLY AD	DRESS: kuilani Lp., Kapo	olei	OUT-OF-STA
APPLY TO	: Kekuilani Gardens			Hawaii 9670		JiOi,	APPLICATIO ACCEPTED
APPLY ATTN	:						YES
APPLY PHONE	: 808-735-9099 ext 1			FAX : 674-4170		ttp://www.mdihawa ens	aii.com/kekuilaniga
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm: 55	0		790	2	5	YES
Three E	Bdrm:						
Four E	Bdrm:						YES
iority given to ve MI). Security De onthly Allowable arket Note Rate	Rent \$925	in 30%	Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
			įt.			2011111111111	(((((((((((((((((((((((((((((((((((((((
			įr.		Т	O REMAIN ON W	VAITLIST
	d must be 18 years or o	lder		ST FOR PARKING:		O REMAIN ON W CALL EVERY	VAITLIST (Months):
	d must be 18 years or o	lder	WAITLIS PARKING INFO): NO	T PET INFO: Must have N	O REMAIN ON W CALL EVERY	VAITLIST
	d must be 18 years or o ASSET LIMITS:		PARKING INFO): NO	PET INFO:	O REMAIN ON W CALL EVERY	VAITLIST (Months):
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		PARKING INFO): NO	PET INFO: Must have M	O REMAIN ON W CALL EVERY F M.D. letter	VAITLIST (Months): PETS OK: NO
ead of household AN OWN RESID SET LIMIT INFO	ASSET LIMITS: DENTIAL PROPERTY:	YES	PARKING INFO): NO	PET INFO: Must have M GENERAL II *Waitlist up keep all cor to communi a timely ma Funding: R	CO REMAIN ON W CALL EVERY F. M.D. letter NFO: dates not required tract info current, a cation from housinner.*	VAITLIST (Months):
ad of household AN OWN RESIE SET LIMIT INFO	ASSET LIMITS: DENTIAL PROPERTY: O: d when determining inc	YES	PARKING INFO): NO	PET INFO: Must have M GENERAL II *Waitlist up keep all cor to communi a timely ma	CO REMAIN ON W CALL EVERY FM.D. letter A.D. letter dates not required tact info current, a cation from housinner.* HTF copment Inc. ddy room	WAITLIST (Months): PETS OK: NO

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		Last Com	plete Update:	8/15/2023				AREA:	Waianae
PROJECT NAME:	KFOL	A HOON	/ALU				PROJEC		1
		Plantation Rd.					PHONE:		1 .
OLTY						=		545-52	
CITY:	Waianae)	STATE: HI	ZIP:	96792	2			
MANAGER	: Sunnie	Lee, COS. J	ay Okada, Off-Si	te Manager		Y ADDRESS: Beretania St., Su	ite C101		OUT-OF-STATE
APPLY TO	: Urban F	Real Estate C	o.		Honol	ulu, HI 96813			APPLICATION ACCEPTED:
APPLY ATTN	l: Housing	g Manageme	nt Department						YES
APPLY PHONE	: 524-273	31 x 3609			FAX : 545-52	EMAI 14	IL:		
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUI Number of Peopl	r Numl	MUM per of pple:	CAREGIVER Allowed:
	tudio: Bdrm:	35	0					2	YES
	Bdrm:	33						2	
Three I	Bdrm:								
Four I	Bdrm:								
RENT INFO: RE Market \$1,100.00	NT IS 309	% OF INCOM	IE: YES	UTILITIES INC			ES MAX	IMUM W TIMATE IMUM W	AL UNITS: 35 AIT LIST (Months): 36 AIT LIST (Months): 60
AGE CRITERIA:							TO REMA		/AITLIST
Head of Househol union partner 18+;	all other	members of			IST FOR PARK				(Months): 6
household must be	e 62+ or c	disabled		PARKING INF		PET INF	FO: t to Managem		PETS OK: YES
	AS	SET LIMITS	NONE						
AN OWN RESID		PROPERTY:	YES				AL INFO:		
ASSET LIMIT INFO	O:			LEASE:	nonth-to-month		t as of 8/15/23 g: Section 8 1	•	ars
				year, trierri	nontin-to-montin		nager residing		
INCOME CRITERI	IA:					SQFT	of units not av	ailable fr	om manager.
50% AMI: 1 perso); 2 persons S	\$46,650	FURNISHED: Partly furnishe appliances or	edmajor	Applica Send re envelop	equest with se	elf-addres	ssed stamped
1-PERSON MAXIM	IUM MON	ITHLY INCOM	ME:	3404		p.			
2-PERSONS MAXI	мим мо	NTHLY INCO	OME:	3888					

	Last Comp	lete Update:	6/13/2023				AREA:	Vineyard
PROJECT NAME:	KEOLA HOON	ANEA				PROJECT	TYPE:	Elderly
ADDRESS:	1465 Aala St.					PHONE:	808-533	3-4582
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:		
MANAGER	: Beverley Febenito - P Specialist; Sterling Ro			711 Kapiolar	ni Blvd. Ste. 70	00		OUT-OF-STATE
APPLY TO	: Hawaiiana Manageme	ent Co.		Honolulu, HI	96813			APPLICATION ACCEPTED: YES
APPLY ATTN	: Housing Management	Department						123
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	MAXIN Numbe Peop	er of	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm: 175	862	2.5x Rent	500	1	2		YES
Two B	Bdrm:							
Three E	Bdrm:							
Four I	Bdrm:					<u> </u>		
70 units are Sectic by 30% of income not apply. Rest of \$862. Preference income requireme	NT IS 30% OF INCOME on 8 units where rent is a and the minimum incon funits have rent range o given to veterans. Minim nt \$1832.50.	calculated ne need if \$733 -	UTILITIES INCLU Electricity, gas ar			EST MAXIN EST	MUM W. IMATE MUM W. IMATE	AIT LIST (Months): 9 AIT LIST (Months): 60
AGE CRITERIA: Head of household	d must be 62 years or ol	der, or		. = 0 = 0 + 0 + 0 + 0		TO REMAII CALL E		(Months): 6
	r members of household Caregivers over 18 yrs o		PARKING INFO:	FOR PARKING:	PET INFO:		F	PETS OK: YES
<u> </u>	,		50 stalls; no park	ing fee; waitlist				approval, 2 cats
	ASSET LIMITS:	NONE	avg. 2-3 years; lir parking available		or dogs po	ssible; \$100) pet de	posit
	DENTIAL PROPERTY:	YES			GENERAL	INFO:		
ASSET LIMIT INFO	O:		LEASE: 1 year; then mon	th to month	Send requ envelope	n: Ask mana est with self om manager	-addres	ssed stamped
INCOME CRITERI			=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
All income limits a	re usually published anr	nually by	FURNISHED: major appliances	only				
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	5642]			

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	Last Compl	ete Update:	6/14/2023			AREA:	Makiki
PROJECT NAME:	KEWALO APA	RTMENTS				PROJECT TYPE:	Family
ADDRESS:	1407 Kewalo St.					PHONE: 808-531	-3233
CITY:	Honolulu	STATE: HI	ZIP:	96822		FAX : 529-051	6
	: Kelli Lopez				DRESS: nagement offic www.mdihaw		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN					EMAIL:	kellil@mdihawaii.cc	
APPLY PHONE	<u>:</u> 808-531-3233			FAX: 529-0516		www.mdihawaii.con	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm:						
Two I	Bdrm: 37	0	NO	610	2	5	YES
Three I	Bdrm:						
Four I	Bdrm:				J	J	YES
Project-based Sec	NT IS 30% OF INCOME ction 8 - 32 units only LIHTC at \$1022/mo.	YES YES	UTILITIES INC Gas, water, and			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 48 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	
	d must be 18 years or ol	der at the	WAITLI:	ST FOR PARKING:	PET INFO	CALL EVERY	(Months): 6
	ASSET LIMITS:	NONE	Assigned parki	ing for residents e; other parking	PETINFO	:	PETS OK: NO
AN OWN RESIDE	DENTIAL PROPERTY:	YES			GENERAL		tinfo ourrent oo
AGGET ENVIT IN	O .		LEASE: 1 year; then me	onth-to-month	well as remanagem 2-5 people	ts must keep contact spond to communicatent in a timely mannal e per unit nmon areas were rer	ation from ner.*
INCOME CRITERI	IA:						
Must qualify for LII and/or Section 8 li	HTC income limits set by mits set by HUD.	y HHFDC	FURNISHED: Partly furnished appliances only			n: ww.mdihawaii.com om manager's office	
J			,		Į.		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last (Complet	e Update:	10/6/2023				AREA:	Kaneohe
PROJECT NAME:	KII OHANA	APA	RTMENTS	- NOT	ACCE	PTING	APPI I	PROJECT TYPE:	
	45-265 William H			1101	AOOL		AI I EI	PHONE: 808-23	,
								FAX: 234-70	
CITY:	Kaneohe		STATE: HI	ZIP:		96744		,	
	t: Terrilyn Ahakue					On-Site S	ADDRESS: Ste. #J-06 DSED FOR		OUT-OF-STATE APPLICATION
	: Qualpac Manag		corporation			APPLICA	TIONS***		ACCEPTED: YES
APPLY ATTN	I: Kilohana Apartn	nents					F34.41		
APPLY PHONE	E: 808-235-1844				FAX:	234-7058	EMA	IL:	
	Type: Numbe of UNIT	-	RENT:	Minimum INCOME Required	:	SQ FT:	MINIMUI Number of Peopl	r Number of	CAREGIVER Allowed:
	tudio:				<u> </u>				YES
	Bdrm: 17		485		_	479	1	4	YES
	Bdrm: 90		610		_	634 821	4	8	YES
Three			760		<u> </u>	021	4	0	1123
Four	Bdrm:						J		
RENT INFO: RE				TILITIES IN				MINIMUM W ESTIMATE MAXIMUM W	(Months): 120
AGE CRITERIA:			,					ESTIMATE TO REMAIN ON V	
Head of household	d must be 18 year	s or olde	er	۱۸/۸۱	TI IST EA	R PARKING	2.	CALL EVERY	
			Р	ARKING IN		N FARRING	PET INI	FO:	PETS OK: NO
			F	arking incl	uded				
	ASSET LIN	1ITS: N	IONE				J		
AN OWN RESIDE	DENTIAL PROPEI O:	RTY: N	IO					RAL INFO: g: Section 221(d) 100	0/
ACCET ENVIRT IN	<u>. </u>		_	EASE: Month-to-mo	onth			g. 3ection 221(u) 100	76
				nontri-to-m	onun			SPONSE IN 2023. LA TE OCCURRED ON 1	
INCOME CRITER									
Maximum Annual 2 persons - \$73,00 4 persons - \$91,20 6 persons - \$108,0 persons - \$120,40	00; 3 persons - \$8 00; 5 persons - \$9 800; 7 persons - \$	2,100; 8,500;	F	URNISHED Partly furnis ppliances o	hedmaj				
II 1-PERSON MAXIN	IUM MONTHLY IN	ICOME:	5	320					
2-PERSONS MAXI	MUM MONTHLY	INCOME	≣: 6	083					

Last Complete Upd	ate: 7/18/2023	AREA: Makiki		
PROJECT NAME: KINAU VISTA		PROJECT TYPE: Elderly		
ADDRESS: 1150 Kinau St.		PHONE: 808-521-7111		
CITY: Honolulu STAT	E: HI 2IP: 96814	FAX: 521-6897		
MANAGER: Paul Hobson	APPLY ADDRESS			
APPLY TO: Locations LLC	P.O. Box 22420 Honolulu, HI 96823	OUT-OF-STATE APPLICATION ACCEPTED:		
APPLY ATTN: Property Management Division		YES		
APPLY PHONE: 808-738-3100	FAX: 735-1978	MAIL: http://www.locationsrentals.com/afforda ble-rentals.aspx		
Unit Type: Number of UNITS: REI	IT. II CO ET. II	MUM MAXIMUM Number of People: CAREGIVER Allowed:		
Studio: 62 13	35 2xrent 430			
Two Bdrm:	2XIEIIL 430			
Three Bdrm:				
Four Bdrm:		YES		
RENT INFO: RENT IS 30% OF INCOME: NO 7 units (for 30 % AMI seniors) - \$630 24 units (for 50% AMI seniors) - \$1,050 31 units (for 60% AMI seniors) - \$1,335 Section 8 certificate holders need not meet the mir gross income requirement.	UTILITIES INCLUDED: Electric, water, and sewer	MINIMUM WAIT LIST ESTIMATE (Months): AXIMUM WAIT LIST		
AGE CRITERIA:		ESTIMATE (Months): 36 TO REMAIN ON WAITLIST		
All residents must be 55 or older. Applicants can apply without verifiable residential	WAITLIST FOR PARKING:	CALL EVERY (Months):		
history.	18 stalls, 5 handicap stalls; \$40	PET INFO: PETS OK: NO Pets not allowed.		
ASSET LIMITS: NONE	fee for parking; guest parking available			
AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO:		NERAL INFO: ened 3/05. Funding: LIHTC & RHTF		
All income from assets is counted to determine eligibility.	LEASE. Has Cor with App	s social worker on site for services (PT). mmunity room w/ full kitchen & TV; courtyard n BBQ area, victory garden. plication: Online; Ask management to mail it; nd request with self addressed stamped		
INCOME CRITERIA:	env	relope; Pick up from manager's office or in office		
30% of AMI: 1 person \$27,450; 2 persons \$31,350 50% of AMI: 1 person \$45,750; 2 persons \$52,250 60% of AMI: 1 person \$54,900; 2 persons \$62,700	FURNISHED: Partly furnishedmajor kee appliances only	aitlist updates not required; Applicants must p all contact info current, as well as respond communication from housing management in mely manner.*		
1-PERSON MAXIMUM MONTHLY INCOME:	4575			

	Last Comp	lete Update:	10/6/2023			AREA:	Kaneohe
PROJECT NAME:	KO'OLAU VILL	AGE (HDL	IΔ-wind).	NOT ACCEPT	TING	PROJECT TYPE:	1
	45-1027 Kamau Pl.	AGE (HFI	i A-willa) -	- NOT ACCEPT	ING		<u> </u>
ADDITEOU.	43-1027 Kamau Fi.					PHONE: 808-233 FAX: 233-376	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		TAX. 233-370	9
MANAGER	: Roberta Kahele			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AF	PLICATIONS		Honolulu, HI		CATIONS	APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications offi NOT ACCEPTING AF				F344U		NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL:	nphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 8	0		526	1	4	YES
Two I	Bdrm: 24	0		662	2	6	YES
Three I	Bdrm: 36	0		915	3	8	YES
Four I	Bdrm: 12	0		996	4	10	YES
Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.	NT IS 30% OF INCOME for Federal Low Income Domestic Violence victi itional shelters; involunta	e projects ms;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM WA ESTIMATE A MAXIMUM WA ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	d must be 10 years or al	dor				TO REMAIN ON W CALL EVERY	
Head of nousenoid	d must be 18 years or ol	der		IST FOR PARKING:			
	ASSET LIMITS:	NONE	PARKING INF	-0:	the catego	imals ok, but only or ries listed below: nder 25 lbs) or cat	PETS OK: YES
	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:			s must respond to a dence from HPHA, i	
Cumot cum a nea	oo on cana		1 year		manner. N applicants info/house	o waitlist updates n must update any co hold composition in tus via hpha.myhou	eeded, however, ontact fo and check
INCOME CRITERI	IA:				need userr	name/password to died Low Inc Pub Hs	do so).
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		FURNISHED: Partly furnish appliances or	edmajor	All convicti crystal me	ons must be 3 yrs a thamphetamine or s ONSE IN 2023	ago, unless it's
	IUM MONTHLY INCOM		4570		P		

	Last Comple	ete Update:	1/23/2024			AREA:	Downtown
PROJECT NAME:	KOKUA HALE					PROJECT TYPE:	Elderly
ADDRESS:	1192 Alakea Street					PHONE: 808-809	9-7600
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX: 833-893	3-0226
	: Tress Sotelo, Commun	, ,	AtKokuaHale.co	APPLY ADD 1192 Alakea Honolulu, Ha	Street #630		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Schedule in-person app		nce if unable to				YES
APPLY PHONE	complete the one online: 808-809-7600	e.		FAX: 833-693-0226		liveatkokuahale.co kokuahale@tmo.co	
Two E Three E Four E RENT INFO: REI Lower rent - 12 uni 60% AMI units are person application	Bdrm:	s closed. hedule in- complete	Minimum INCOME Required: UTILITIES INC Water, sewer, 1		MINIMUM Number of People	MAXIMUM Number of People: TOTA MINIMUM W ESTIMATE	_
	red) due in certified fund.					MAXIMUM W ESTIMATE	
AGE CRITERIA: One person in hou	sehold must be age 55 c	or older.				TO REMAIN ON W CALL EVERY	
	_		PARKING INFO	ST FOR PARKING: D: NO g on a First Come CFS) basis daily.		or dog) per unit, 30 \$350 due at move	
	ASSET LIMITS:	NONE	i iist cervea (i	or of basis daily.		wood due at move	
AN OWN RESID	DENTIAL PROPERTY: O:	YES			GENERAL	INFO: uilding on corner of	Alakaa St. and
			LEASE: 6 months than	month-to-month	Beretania Trash shoo surveilland City or Sta	St.	pike storage, video rooms, me.
INCOME CRITERI	A:				date to be	determined) and re D. Box is not accep	equired in certified
\$27,510 (1 person 60%AMI units - Ma	aximum annual gross inc) \$31,440 (2 person) aximum annual gross inc) \$62,880 (2 people).		FURNISHED: Both furnished options. VCT fl	and unfurnished looring.	residence.		ieu as piace oi
1-PERSON MAXIM	UM MONTHLY INCOME	::	4585		k		

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5240

		Last Compl	ete Update:	5/16/2023	3			AREA:	Ewa Beach
PROJECT NAME:	KO'O	LOA'ULA	Phase I	& II - wai	tlist cl	osed		PROJECT TYPE:	
		Keahumoa Pk	,	an war	tilot oi	Jood		PHONE: 808-550	
	<u> </u>							FAX: 356-333	
CITY:	Ewa Bea	ach	STATE: HI	ZIP:		96706		17211 000 000	,,,
MANAGER	: Laurie	Burgess - Prope	erty Manager			APPLY ADD			
APPLY TO	: CLOSE	ED for application	on			91-1159 Kea Ewa Beach,	ahumoa Pkwy, HI 96706	#801	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:								YES
							EMAIL:	www.mutual-housir	ng.org
APPLY PHONE	: 808-55	0-3800			FAX:	356-3330			
Unit	Туре:	Number		Minimun			MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:	RENT:	INCOME Required		SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:								
One I	Bdrm:	54	1095	>2x ren	t	569	1	4	
Two I	Bdrm:	169	1275	>2x ren	nt .	765	2	6	
Three I	Bdrm:	46	1665	>2x rer	nt	1143	3	8	
Four I	Bdrm:	38	1855	>2x ren	nt	1462	4	10	YES
									,
RENT INFO: RE				UTILITIES I			_	TOTA	L UNITS: 307
60% AMGI: (see h (136); 3-bd (37); 4	-bd (31).	, ,	,,	Water and s	sewer; sol	ar water heatir	ng	MINIMUM W ESTIMATE	(3.4 (1)
50% AMGI: 1-bd ((6) - \$1,335; 4-bd)			155; 3-bd						, , ,
30% AMGI: (see lo		above) 1-bd (3) ; 2-bd	<u> </u>				MAXIMUM W ESTIMATE	
AGE CRITERIA:								TO REMAIN ON W	
18 and older				WAI	TLIST FO	R PARKING:		CALL EVERY	(Months): 0
				PARKING II		NO	PET INFO:	F	PETS OK: NO
				1 assigned one bedroo			Pets not al	lowed.	
	AS	SSET LIMITS:	YES	included for	all other	sized units.			
AN OWN RESID		PROPERTY:	YES	Guest parki	ng avallal	oie.	GENERAL		
ASSET LIMIT INFO	O:			LEASE:				must keep all cont respond to commu	
				1 year			housing m	gmt. in a timely ma	nner.*
							Funding: F	ng in City's Ready t Iula Mae Multi Fam	
INCOME CRITERI	ΙΔ·			,			Revenue E Landscape	ed grounds with pla	y areas, tot lot,
Gross income mus	st be grea			FURNISHE	D:			iths and bbq pavilio om, resident service	
rent. Maximum an \$84,660; 6-person				ceiling fans			community	/ room, on-site mgr	nt office.
person - \$103,440		, r porcorr (por, r 20, 0	appliances, vinyl floors,				must have satisfaction all background che	
				cherry wood	d veneer o	cabinets	landlord re	eferences.	
1-PERSON MAXIM	IUM MON	NTHLY INCOME	≣:	4575					
2-PERSONS MAXI	мим мс	ONTHLY INCOM	ΛE:	5225					

Last Complete Update:	10/6/2023		AREA	Kalihi
PROJECT NAME: KUHIO HOMES (HPHA-	hon) - NOT	ACCEPTING AF		
ADDRESS: Ahonui St.			PHONE: 808-83	32-6075
			FAX: 832-34	
CITY: Honolulu STATE: H	II ZIP:	96819	,	
MANAGER: Nua Vaovasa		APPLY ADDRE		
ARRIVE URIU		1002 North Sch Honolulu, HI 96		OUT-OF-STATE APPLICATION
APPLY TO: HPHA NOT ACCEPTING APPLICATIONS	8	NOT ACCEPTIN	NG APPLICATIONS	ACCEPTED:
APPLY ATTN: Oahu applications office				NO
NOT ACCEPTING APPLICATIONS	3		EMAIL: hphaishereforyou.	org
APPLY PHONE: 808-832-5961		FAX: 832-3461		
Unit Type: Number	Minimum		MINIMUM MAXIMUM	CAREGIVER
of UNITS: RENT:	INCOME Required:	E CO ET:	Number Number of People:	Allowed:
Studio:				
One Bdrm: 20 0		490	1 4	YES
Two Bdrm: 32 0		688	2 6	YES
Three Bdrm: 37 0		877	3 8	YES
		1042	4 10	VE0
Four Bdrm: 37 0		10.2		YES
RENT INFO: RENT IS 30% OF INCOME: YES	UTILITIES INC	CLUDED:	тот	AL UNITS: 134
8 5 Bdrm units		s + allowance for	MINIMUM V	Į.
Minimum Rent: \$0 for Federal Low Income projects PREFERENCES: Domestic Violence victims;	electricity		ESTIMATE	(Months): 36
homeless in transitional shelters; involuntary displaced.			MAXIMUM V	- (3.4 (1)
AGE CRITERIA:	le.			(Months): 60
Head of household must be 18 years or older			TO REMAIN ON ' CALL EVER'	
,	WAITL PARKING INF	LIST FOR PARKING: FO: F	PET INFO:	PETS OK: YES
	Included		multiple animals ok, but only	
ASSET LIMITS: NONE			the categories listed below: one dog (under 25 lbs) or ca	at
AN OWN RESIDENTIAL PROPERTY: NO		(GENERAL INFO:	
ASSET LIMIT INFO:	LEASE:	ľ	*Applicants must respond to	
Cannot own a house on Oahu	1 year		correspondence from HPHA manner. No waitlist updates	needed, however,
			applicants must update any info/household composition	info and check
INCOME CRITERIA:			waitlist status via hpha.myho need username/password to	
ncome Eligibility = 80% of AMI	FURNISHED:		Funding: Fed Low Inc Pub F All convictions must be 3 yrs	Ising 100%
Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500;	Partly furnishe	edmajor	crystal methamphetamine of NO RESPONSE IN 2023	
4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350;	appliances on	ily, no carper	NO RESPONSE IN 2023	
8 persons - \$100,450				
1-PERSON MAXIMUM MONTHLY INCOME:	4570			
2-PERSONS MAXIMUM MONTHLY INCOME:	5220			

		Last Com	plete Update:	6/13/2023			AREA:	Liliha
ROJECT NAME:	KUK	UI GARD	ENS				PROJECT TYPE:	Family
ADDRESS:	1103 Li	liha St.					PHONE: 808-532	2-0033
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX: 762-233	33
MANAGER APPLY TO		e Ishimie, Prop	erty Manager		APPLY AD 1103 Liliha Honolulu, F	St., Ste. 102		OUT-OF-STAT APPLICATIOI
APPLY ATTN		-						ACCEPTED: YES
APPLY PHONE				1	FAX: 762-2333	EMAIL:	www.eahhousing.or	rg
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER Allowed:
s	tudio:			Required:		of People	People:	
	Bdrm:	115	1239	3110		1	2	YES
Two I	Bdrm:	106	1472	3695 4235		3	7	YES
	Bdrm:	46	1864	4687		4	9	YES
PENT INFO: RE Deposit plus first r *Updates not requippedating contact in respond to communications.	month re uired to re nfo), how unication	ent emain on waitli vever, applicar n from housing	st (unless	UTILITIES INCL Water & Sewer	UDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA: Head of household	d must b	e 18 years or o	older	WAITLIS	T FOR PARKING:		TO REMAIN ON W CALL EVERY	
				PARKING INFO 1 stall included, available.	: YES	PET INFO	: F	PETS OK: NO
AN OWN RESID	DENTIAL	SSET LIMITS: _ PROPERTY:				GENERAL Funding:		
				LEASE: First year: Fixed Month-to-Month	112-month lease. thereafter.		applications for AL	L bedroom sizes.
NCOME CRITER	IA:			,				
				FURNISHED: Partly furnished appliances only.				
-PERSON MAXIM	1UM MO	NTHLY INCOM	ЛЕ:	4085				
PERSONS MAXI	IMUM M	ONTHLY INCO	DME:	4665				

		Last Comple	te Update:	10/6/2023			AREA:	Downtown	
PROJECT NAME:	KUKUI	TOWER	- CLOSED	FOR ap	plications		PROJECT TYPE:	Family	
ADDRESS:	35 North K	ukui St.		-			PHONE: 808-53	7-4935	
CITY	Honolulu		STATE: HI	ZIP:	00047		FAX: 537-96	82	
CITT.	Honolulu		STATE. HI	ZIF.	96817				
	Celeste R	alloe, Propert ussell, Assist e Chan, Leas	ant Resident Ma	nager	APPLY AI On-Site	DDRESS:		OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN		935			FAX: 537-9682	EMA	NL: KT-Management@	eahhousing.org	
	of	lumber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMU Number of Peop	er Number of	CAREGIVER Allowed:	
	tudio:							YES	
	Bdrm:	126	778	1695	560	1	3	YES	
	Bdrm:	254	846	1843	742	2	5	TES	
Three I									
RENT INFO: RE Calculated by usin income, the minim \$778 for 1 bdrm; \$ income cannot be *****CLOSED FOR AGE CRITERIA:	ng 30% of the num and ma. 1737 - \$846 at or above	e household's ximum rents 2 bdrm. 30% the maximun	s adjusted are \$678 - of n rent.	JTILITIES INC Water, sewer,			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V	(Months): 24 /AIT LIST (Months): 36 VAITLIST	
Head of household	d must be 18	3 years or old			IST FOR PARKING	_	CALL EVERY		
	ASSE	ET LIMITS:	NONE	PARKING INF Parking 1st stated stalls range from \$175/month, of availability.	all \$25; additional om \$105 to	PET IN reason	IFO: IFO: Inable accommodations	PETS OK: NO for disability	
AN OWN RESID		ROPERTY:	YES	avaliability.			RAL INFO:		
ASSET LIMIT INFO:				1 year; then month-to-month "upo Fun Cor			*Waitlist updates must be completed every June of each year, via submission of an "update card".* Funding:Section 8, Section 236 Completed 1976		
INCOME CRITERI Section 8 limit - 50 Section 236 limit - Applicant's monthl cannot exceed \$2,	0% AMI; 80% AMI ly adjusted h		ome	FURNISHED: Partly furnishedmajor active Swim comr 24 ho			Post card sent once a year to keep application active on waitlist. Swimming pool, playground, basketball court, community room, picnic/bbq area on site. 14 hour trained personnel patrol. closed circuit ameras. 15 RESPONSE IN 2023.		
	-	,					20. OHOL IN 2020.		

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	5/11/2023			AREA	Makiki	
PROJECT NAME:	KULA	ANA HALI	E				PROJECT TYPE	Elderly	
ADDRESS:	1551 Sc	outh Beretania	St.				PHONE: 808-9	83-1551	
CITY:	Honoluli	u	STATE: HI	ZIP:	96826		FAX: 983-1	553	
MANAGER	R: Leslie	Young (Genera	al Mgr.)		On-Site	ADDRESS:	200	OUT-OF-STATE	
APPLY TO): Kulana	Hale LLP			4th Floor	r, Management (Office	APPLICATION ACCEPTED:	
APPLY ATTN	l :							YES	
APPLY PHONE	E: 808-98	3-1551			FAX: 983-1553		: leslie@hawaiiaffo https://www.low-ir		
Unit	t 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	Bdrm:	11	1855		594	2	4	YES	
Three	Bdrm:								
Four	Bdrm:							YES	
RENT INFO: RE Credit Check Fee Based on 80% AM	\$24.95	% OF INCOM	=: NO	Electricity, wa	CLUDED: ter, and maintenar	nce	MINIMUM N ESTIMATI MAXIMUM N	E (Months): 12 WAIT LIST	
ACE ODITEDIA.								E (Months): 36	
AGE CRITERIA: All residents must	t be 55 or	older		\A/A ITI	ICT FOR RAPIUM	10.	TO REMAIN ON CALL EVER		
				PARKING INF	IST FOR PARKIN	PET INFO):	PETS OK: NO	
	AS	SSET LIMITS:	NONE	Parking: \$80/ii parking is ava limited and/or	ilable; parking is	Service F	Service Pets Allowed		
AN OWN RESI		PROPERTY:	YES			GENERA	L INFO:		
ASSET LIMIT INF Income from Asse income. Assets ov	ets counte			LEASE: 6 months (Init	tial lease term)	keep cor commun manner.' Funding:	tact info current, as ication from manag		
INCOME CRITERIA: 1 person - \$73,200 annually; 2 person - \$83,600 annually.			FURNISHED: Partly furnishedmajor appliances only. Carpet, blinds,			is all allowed with side home. 1998; Accepts Sec equipped with fire s on: Online: low-inco com or ask manage p from manager's o	tion 8 Certificate; prinklers. ome-senior- ement to mail it		
I-PERSON MAXIM	NOM MUI	NTHLY INCOM	E:	6100					
2-PERSONS MAXI	ІМИМ МО	ONTHLY INCO	ME:	6967					

	Last Comp	lete Update:	5/9/2023			AREA:	Kaneohe	
ROJECT NAME:	KULANA NAN	I APARTME	ENTS			PROJECT TYPE:	Family	
ADDRESS:	46-229 Kahuhipa St.					PHONE: 808-247		
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX : 247-060	02	
MANAGER	R: Farod Jackson			APPLY ADI			OUT-OF-STA	
APPLY TO	O: Hawaiian Properties			on one on	71104		APPLICATIO ACCEPTED	
APPLY ATT	N: Kulana Nani						YES	
APPLY PHONE	E: 808-247-0602		F	AX : 247-0602	EMAIL:	rm@kulananai.com	1	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Studio: Bdrm:							
Two	Bdrm: 40	1575		745	2	5	YES	
Three	Bdrm: 80	1765		862	3	7	YES	
Four	Bdrm : 40	1810		980	4	9	YES	
Wait List for 2 bed	ENT IS 30% OF INCOMI drooms is 6 months - 12 drooms is 3 months - 6 drooms is 6 months - 12	months	UTILITIES INCLUE Electricity, water			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
AGE CRITERIA:	ld must be 18 years or o	lder				TO REMAIN ON W		
Applicants can ap history.	oply without verifiable resistion for 2 bedroom units	sidential	PARKING INFO:		PET INFO:	F	PETS OK: NO	
Willimani Compos	ASSET LIMITS:		\$50 per month; we stall is 4 - 5 years		Only assist	tive animals		
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INF	FO:		LEASE: 1 year		well as res manageme Office Hou	s must keep contact pond to communice ent in a timely manurs: 8am - 4pm	ation from	
NCOME CRITER	RIA:		ļ		10 handica	courts, picnic/bbq	area	
INCOME CRITERIA: 5-PERSONS MAXIMUM MONTHLY INCOME: \$6,510.00			FURNISHED: Partly furnishedmajor For A Send envelopment			Application: and request with self-addressed stamped relope; pick up from manager's office or call ce to request application to be emailed.		

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Li	ast Complete Upd	ate: 7/18/2023			AREA:	Waimanalo
PROJECT NAME: KULANA	KAUHALE	MALUHIA O N	IA KŪPUNA		PROJECT TYPE:	Elderly
ADDRESS: 41-209 Ilauh	ole St.				PHONE: 808-426	6-1400
CITY: Waimanalo	STATI	≣: HI ZIP: 「	96795		FAX : 426-140	01
waimanao	OTAL	[]	90793			
MANAGER: Nohealani h	Нооріі		41-209 I	ADDRESS:		OUT-OF-STATE
APPLY TO: Locations			Waiman	alo, HI 96795		APPLICATION ACCEPTED: YES
APPLY ATTN: Property Ma	anagement Division					120
APPLY PHONE : 808-426-14	00		FAX : 738-8981		locationsrentals.com rentals.aspx	m/affordable-
of U	mber JNITS: REN	IT: Minimum INCOME Required	SO ET.	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	_					VEC
	85 100	2xrent	528	1	2-3	YES
Two Bdrm:		_				
Three Bdrm:		_				
Four Bdrm:						YES
RENT INFO: RENT IS 30% Of 9 units @ 30%AMI; 49 @ 50% of 14 @ 80%AMI. Rent amounts a \$800, \$825, \$960, and \$1000 properties and \$1000 properties are 50% Native Hawaiian blood DHHL list.	AMI; 10 @ 60%AM are as follows: \$560 er month. HOH mu	, \$144/mo for st	ewer. Utility allowa	nce of	MINIMUM W ESTIMATE MAXIMUM W	(Months): 24 AIT LIST
A OF ODITEDIA		į.			ESTIMATE	. , , , , ,
AGE CRITERIA: All residents must be 55 or olde	r;				TO REMAIN ON W	
	,	WAIT PARKING IN	LIST FOR PARKIN	IG: PET INFO)· F	PETS OK: NO
A00E3	LIMITS: NONE	Parking inclutenant stalls	uded, 103 visitor &			į, to
AN OWN RESIDENTIAL PRO		accessible.	ccssibic and 2 van	GENERAL	INFO.	
ASSET LIMIT INFO:	JI ZIKITI JIKO	LEASE:		Verification	on of 50% Hawaiian	
Cannot own a majority percenta properties.	ge of residential		month-to-month	confirmat Homeland *Commur room. 6 a	processing. Application letter fromf Deptids (DHHL) nity room and garder pt. are handicap accept.	of Hawaiian n plots; laundry cessible; onsite
INCOME CRITERIA:					nanager.*No waitlist applicants must kee	
30% 27,450 31,350 80%	person 2 people 6 73,200 83,600 91,500 104,500	Partly furnisl appliances of	Partly furnishedmajor appliances only. Carpet & vinyl holders			espondence in a epted; voucher n. income tter mailed once
1-PERSON MAXIMUM MONTHL	Y INCOME:	7625				
2-PERSONS MAXIMUM MONTH	ILY INCOME:	8708				

	Last Comp		AREA	. Makiki				
PROJECT NAME:	KULAOKAHU	EMERGI	ENCY SHE	LTER		PROJECT TYPE	: Emergency/Transi	
ADDRESS:	1311 Ward Ave.					PHONE: 808-59	9-5759	
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 545-86	23	
	: Property Manager - G	eorge McMorris	APPLY ADDRESS: 1311 Ward Avenue				OUT-OF-STATE	
APPLY ATTN	l:						ACCEPTED: NO	
APPLY PHONE	: 808-599-5759			FAX:	EMAIL:	https://dynamichea	alingcenter.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	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:						NO	
Rent is 30% of inc Housing is tempor couples with the g	NT IS 30% OF INCOME come up to the maximun rarly for unsheltered indi- oal of finding permanen e following service plant lost = \$0	n of \$250. viduals or t housing.	UTILITIES INC			TOT. MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	(Months):	
AGE CRITERIA:						TO REMAIN ON V	WAITLIST	
	d must be 60 years or olust be 18. Only visiting		WAITLI	ST FOR PARKING:		CALL EVERY	(Months):	
allowed.	act so to. Only vicining	caregivere	PARKING INFO	O: NO	PET INFO		PETS OK: YES	
J.	ASSET LIMITS:	NONE			Service A	nimal - Doctor Veri	rication Required	
AN OWN RESID	DENTIAL PROPERTY:				general	_ INFO:		
ASSET LIMIT INF			LEASE:			s must be actively I		
				nent only. Must r permanent	No waitlis couples h participate	eltered and capable of independent living. aitlist is kept for a unit. Individuals or s have own unit. Residents must pate in a social service plan and accept		
INCOME CRITER	IA:		FURNISHED:			an offer of permanent housing. Funding: Homeless Stipend		
		Partly furnishedmicrowave, refrigerator, stovetop (no oven) and bed.						
1-PERSON MAXIM	IUM MONTHLY INCOM	F·						

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	Last Com	plete Update:	6/13/2023			AREA	. Waianae		
PROJECT NAME:	KULIA I KA N	UU (Kahiko	<mark>lu Ohana H</mark>	lale OʻWaiʻa	nae)	PROJECT TYPE	Family		
ADDRESS:	85-296 Ala Hema St.	-				PHONE: 808-69	7-7300 808-75		
CITY	Waianae	STATE: HI	ZIP:	00700		FAX: 697-73	602		
CITT.	vvaianae	STATE. HI	ZIF.	96792					
	t: Leslie Young, Site M (New management p b: Kulia I Ka Nuu			APPLY ADI 85-235 Ala Waianae, H	Akau St., Unit	712	OUT-OF-STATE APPLICATION ACCEPTED:		
APPLY ATTN	l:								
APPLY PHONE	:: 808-697-7300		ı	FAX:	EMAIL:	www.hawaiiafforda	able.com		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
S	tudio: 24	944							
One I	Bdrm:								
Two I	Bdrm: 46	1418							
Three I	Bdrm:								
Four I	Bdrm:						YES		
24 Studios @ \$55 46 Two Bedrooms units); based on 6 AGE CRITERIA:	NT IS 30% OF INCOM 1 - \$944; based on 30° 2	% of income. \$1418 (22	UTILITIES INCLI Electric, water, a	and sewer		MINIMUM WESTIMATE MAXIMUM WESTIMATE TO REMAIN ON VEALL EVERY	VAIT LIST (Months): 6 (Months): 12 WAITLIST		
	ave verifiable residenti	al history.	WAITLIS' PARKING INFO:	T FOR PARKING: YES	PET INFO	_j .	PETS OK: NO		
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:			All paperwork (c safety check, an must be up to da parking available	ar registration, id insurance) ate. Guest	GENERAL INFO: Formerly knowns as Kahikolu Ohana Hale O'Waianae. Funding: RHTF Requires: 1. 6 months of pay stubs 2. 6 months bank statements				
INCOME CRITERI 30% - 60% of Hon	IA: nolulu Median Income		FURNISHED: 3. 4. 5. Ar Ar See			3. Birth certificates 4. Social Security Card 5. State I.D. or Driver's License Application: Ask management to mail it Send request with self-addressed stamped envelope Pick up from manager's office			

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

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Printed:

	La	st Comple	ete Update:	10/13/2023			AREA:	Barber's Point	
PROJECT NAME:	KUMUH	AUNC	Building 3	36)			PROJECT TYPE:	Transitional	
ADDRESS:	91-1096 York	town St.					PHONE: 808-682-5494		
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 682-5495		
APPLY TO	Carla Kahala : HCAP		rogram Manage t Program Mana		APPLY AE P.O. Box 7 Kapolei, H	5547		OUT-OF-STATE APPLICATION ACCEPTED: NO	
APPLY ATTN					FAX: By CES	EMAIL	: Website: www.hcapweb.org/		
Unit		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	65	0		340	1	3		
	Bdrm:								
	Bdrm:								
Three I	Bdrm:					,			
RENT INFO: RE Charges a "Progra TB clearance requ *No waitlist; Entry 59 units available LISVote formule on AGE CRITERIA: Adults ONLY (>18	am Fee", not "F iired. coordinated vi for public use;	Rent" a CES 6 units res	vd for	UTILITIES INC All Utilities WAITL PARKING INF	IST FOR PARKING	: PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 0 AIT LIST (Months): 0	
]				Parking includ	ded				
AN OWN RESID		LIMITS: PERTY:				GENERAI	L INFO:		
ASSET LIMIT INFO	O:			LEASE: 120 Days		use. Res meals. Program	rooms and two kitch sidents are responsib provides case mana	ole for their own	
INCOME CRITERIA: No minimum income requirement, as fee is calculated by 30% of gross income; maximum incomes not provided on last update (2021).			um	FURNISHED: Small refrigera bathroom, mid		s and workshops related to personal of permanent housing and financial indence . ation process done by referral through inated Entry System (CES) SPONSE IN 2023			

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	10/17/2023			AREA	A: Moiliili
ROJECT NAME: KU	MUWAI APA	ARTMENTS	6			PROJECT TYPE	Elderly
ADDRESS: 1902	Young St.					PHONE : 808-7	62-0902
CITY: Hono	olulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER: Mai	etta Espiritu			APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO: Hou	ısing Solutions, Ind	.					APPLICATION ACCEPTED:
APPLY ATTN: Mar	etta Espiritu						NO
APPLY PHONE: 808	-762-0902		F	FAX:		Website: https://w Email: Maretta@I	www.hsiservices.net/ nsiservices.net
Unit Type: Number of UNITS: REN		RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio	29	900			1	2	
One Bdrm		0					
Two Bdrm		0					
Three Bdrm		0					
Four Bdrm		0					
Section 8 and other hou	sing vouchers acc	epted.				MAXIMUM	E (Months):
AGE CRITERIA:						TO REMAIN ON	
All applicants must be 6	2 or older.		_	T FOR PARKING:	-	CALL EVER	
			PARKING INFO: Parking included	I. however. a	PET INFO:		PETS OK:
	ASSET LIMITS:		waitlist for parkir	ng is unknown.			
AN OWN RESIDENT		NO			GENERAL	INFO:	
SSET LIMIT INFO:			LEASE:		for homele Features i Amenities facilities, a	ess persons at lean nclude kitchens a include resident p	nd private baths.
NCOME CRITERIA:						ONSE IN 2023	
			FURNISHED:		THO INCIN	ONOL IIV 2023	
PERSON MAXIMUM N	ONTHLY INCOM	E:	3675		<u> </u>		
PERSONS MAXIMUM	MONTHLY INCOM	ME:	4200				

		Last Comp	lete Update:	10/17/2023			AREA:	Kunia	
PROJECT NAME:	KUNI	A VILLAC	SE .				PROJECT TYPE:	Family	
ADDRESS:	92-1770	Kunia Rd.					PHONE: 808-439	9-6375	
CITY:	Kunia		STATE: HI	ZIP:	96759		FAX: 808-439	9-6375	
MANAGER	:				APPLY ADD	3		OUT-OF-STATE	
APPLY TO	: Kunia \	/illage, EAH H	ousing		Kunia, HI 96	759		APPLICATION ACCEPTED:	
APPLY ATTN	: Manag	er's Office							
APPLY PHONE	APPLY PHONE: 808-439-6375				FAX : 439-6375	EMAIL:	IL: KU-management@eahhousing.org		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	3drm:								
Two E			0		630	2	5		
Three E			0		960-1200	4	9	YES	
Tour E	Julili.		U	,				11.5	
RENT INFO: REI Affordable housing the agricultural ind the combined hous	develop ustry. R	ment serving pent will not exc	persons in seed 30% of	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0	
AGE CRITERIA:							TO REMAIN ON V		
18+				WAITL	IST FOR PARKING:	PET INFO	CALL EVERY	(Months): PETS OK: YES	
<u> </u>					port for each house	Subject to	specific policy requ		
AN OWN RESID	DENTIAL	SSET LIMITS: PROPERTY:				GENERAL	. INFO:		
ASSET LIMIT INFO	O:			LEASE:		keep all c to commu a timely n One mem	ber of the househol	as well as respond ng management in d must meet the	
INCOME CRITERI	A:					farm labo	of Agriculture (USD) r and minimum farm	labor income.	
Income Maximums 1 Person: \$52,920 2 Persons: \$60,480 3 Persons: \$68,040 4 Persons: \$75,540 5 Persons: \$81,600 6 Persons: \$87,660			Washe/dryer hook ups/ energy efficient appliances/water conserving fixtures in kitchen Kunia			Site Manager and U.S. Post Office; iia Farmers Market; nmunity room with kitchan; Gym with oor basketballl/volleyball court s play structure; Head Start preschool gram. LAST UPDATE IN 2021.			
" 1-PERSON MAXIM 2-PERSONS MAXII				4410 5040		P			

	Last Comple	ete Update:	10/18/2023			AREA:	Waialua
PROJECT NAME:	KUPUNA HOM	E O'WAIA	LUA (HPH	A-cen) - NO	T ACC	PROJECT TYPE:	Elderly
ADDRESS:	67-088 Goodale Ave.		•			PHONE: 808-63	7-8244
CITY]	STATE: HI	7ID.	00704		FAX: 622-636	62
CITT	Waialua	STATE: HI	ZIP:	96791			
MANAGER	t: Jimary Quinones			APPLY A	DDRESS:		
			1002 North School St., F PO Box 17907 Honolulu				OUT-OF-STATE
APPLY TO): HPHA NOT ACCEPTING AP	PLICATIONS			EPTING APPL		APPLICATION ACCEPTED:
APPLY ATTN	I: NOT ACCEPTING AP						NO
	ii Norwooli iiio ii	LIOMITONO			FMAII	: hphaishereforyou.c	ora
APPLY PHONE	:: 808-832-5961			FAX: 832-3461	Lilinic	. ripridionororory ou.c	y
Unit	: Type: Number		Minimum		MINIMUM		CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
s	tudio: 24	0		390	1		YES
One I	Bdrm: 16	0		520	1		YES
Two I	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						
			,	,	,	,	
RENT INFO: RE	NT IS 30% OF INCOME	YES	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 40
) for Federal Low Income respond to any correspor		Water and elec	ctricity		MINIMUM W	AIT LIST
from HPHA, in a ti		Iderice				ESTIMATE	(Months): 8
						MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON V	
Head of household	d must be 62 years or old		\A/A I T I I		.	CALL EVERY	
disabled. If elder of	dies, under age 62 spous	e may rent.	PARKING INF	IST FOR PARKING O:	PET INFO	D: F	PETS OK: YES
			Parking includ	led	Small pe	ts under 25 lbs. only	
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERA	L INFO:	
ASSET LIMIT INF			LEASE:			RENCES: Domestic \ s in transitional shelt	
Cannot own a hou	ise on Oanu		1 year		displace	d. No waitlist update	s needed,
					info/hous	, applicants must upo sehold composition in	nfo and check
INCOME CRITER	IA·		1		need use	tatus via hpha.myho ername/password to	do so).
80% AMI: 1 perso	80% AMI: 1 person \$53,250; 2 persons \$60,900; 3				unit. Fun	iding: Fed Low Inc Po ctions must be 3 yrs	ub Hsing 100%
persons \$68,500;	4 person \$76,100.		Partly furnishe		metham	phetamine or sex offer ently barred.	
			appliances on	iy no caipet		PONSE IN 2023	
]			1				
1-PERSON MAXIM	IUM MONTHLY INCOME	! :	4570				
2-PERSONS MAYI	MUM MONTHLY INCOM	1 ⊢ ·	5220				

Last Complete Update	10/18/2023			AREA:	Wahiawa
PROJECT NAME: LA'IOLA ELDERLY - N	OT ACCEPT	ING ADDI IC	'ATIO	PROJECT TYPE:	
ADDRESS: 1 Iho Iho Pl.	IOT ACCEPT	ING AFFLIC	ATIO		
ADDRESS. I IIIO IIIO FI.				PHONE: 808-622	
CITY: Wahiawa STATE:	HI ZIP:	96786		FAX : 622-635	1
MANAGER: Jay Domanguera, Resident Mgr. Lyn - Admin (675-0099) APPLY TO: Hawaii Public Housing Authority		1002 Nort	DDRESS: th School Street Hawaii 96817		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN : Lyn APPLY PHONE : 808-832-5961		FAX: 622-6351	1	mu42laiola@gmail. http://hawaiiaffordal	com 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: 60 170	YES	384	1	2	YES
One Bdrm: 48 195	YES	506	2	2	YES
Two Bdrm:	T				
Three Bdrm:					
Four Bdrm:					YES
RENT INFO: RENT IS 30% OF INCOME: YES Deposit same as rent. Minimum rent is \$170 for studio; \$195 for 1 bdrm. ***********************************	UTILITIES INC			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 24
AGE CRITERIA:				TO REMAIN ON W	
Head of Household must be 62 years or older;	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	IST FOR PARKING		CALL EVERY	
spouse must be 55+. Caregiver 18+. Other members of the household must be 62+.	PARKING INF		PET INFO:	P	PETS OK: NO
Applicants must have verifiable residential history.	Parking include		Doctor's no	ote required	
ASSET LIMITS: YES	T				
AN OWN RESIDENTIAL PROPERTY: YES			GENERAL	INFO:	
ASSET LIMIT INFO: Cannot own property in same county. Asset Limit: 1person - \$38,600; 2 people - \$44,100	LEASE:		well as res	s must keep contact pond to communicate ent in a timely mann	ation from
]			- '	state Low Income 1	000/
INCOME CRITERIA: Maximum Annual Income: 1-person \$34,300	FURNISHED:				00%
2- persons - \$39,200	Partly furnishe appliances on		NO RESP	ONSE IN 2023	
1-PERSON MAXIMUM MONTHLY INCOME: 2-PERSONS MAXIMUM MONTHLY INCOME:	2858				

APPLY TO: Bob Tanaka Inc. APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 Honolulu, HI 96826 APPLICA ACCEP YE. APPLY PHONE: 808-949-4111 FAX: 949-7211 Minimum MINIMUM MAXIMUM Number of Numbe			Last Comp	lete Update:	5/17/2023			AREA:	Lanakila
MANAGER: Shane Lyman, Resident Manager APPLY ADDRESS: 1055 Kalo Pl. Ste. 103 APPLY ATTN: Ext. 36 APPLY ATTN: Ext. 36 APPLY ATTN: Ext. 36 APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type:	PROJECT NAME:	LAN/	KILA GA	RDENS				PROJECT TYPE:	Family
MANAGER: Shane Lyman, Resident Manager APPLY ADDRESS: 1055 Kalo PI. Site. 103 APPLY ADDRESS: 1056 Kalo PI. Site. 103 APPLY ADDRESS. 1056 Kalo PI. Site. 103 APPLY ADRESS. 1055 Kalo PI. Site. 103 APPLY ADDRESS. 1056 Kalo PI. Site. 103 APPLY ADDRESS. 105	ADDRESS:	833 Nor	th School St.					PHONE: 808-949	9-4111
APPLY TO: Bob Tanaka Inc. APPLY ATTN: Ext. 36 APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type: Number of UNITS: RENT: RENT: Required: SQ FT: Minimum Number of People: Allowed Studio: Stud	CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 949-72	11
APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type: Number of UNITS: RENT: Rent Required: SQ FT: Minimum Number of People People: CAREGIVI Allowed People: CAREGIVI All				ent Manager		1055 Kalo l	Pl., Ste. 103		OUT-OF-STATE APPLICATION
APPLY PHONE: 808-949-4111 FAX: 949-7211 Minimum NCOME SQ FT: Minimum Naximum Naxim									ACCEPTED: YES
APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type: Number of UNITS: RENT: RENT: RENT: RENT: Required: SQ FT: MINIMUM Number of People: Allowed People: SQ FT: Required: SQ FT:	APPLY ATTN	l: Ext. 36	i				EMAII.		
Studio: Studio: One Bdrm: 6 1029 2.5xrent YES Two Bdrm: 15 1154 2.5xrent YES Three Bdrm: 6 1276 2.5xrent YES Four Bdrm: No RENT INFO: RENT IS 30% OF INCOME: NO City Section 8 vouchers accepted. Water Wa	APPLY PHONE	APPLY PHONE : 808-949-4111				FAX : 949-7211	EWAIL.		
One Bdrm: 6 1029 2.5xrent YES Two Bdrm: 15 1154 2.5xrent YES Three Bdrm: 6 1276 2.5xrent YES Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO City Section 8 vouchers accepted. Water Water Water Water TOTAL UNITS: 27 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM W				RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
Two Bdrm: 15 1154 2.5xrent YES Three Bdrm: 6 1276 2.5xrent YES Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO City Section 8 vouchers accepted. Water Water Water WallLIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): PET INFO: PETS OK: NO Parking included; no guest parking available. ASSET LIMIT INFO: Income from assets cannot make applicants go over income limit NCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: NO Parking included; no guest parking available. TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: NO Parking included; no guest parking available. TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: NO Parking included; no guest parking available. FURNISHED: Partly furnished-major			6	1029	2 5yrent				YES
Three Bdrm: 6 1276 2.5xrent YES Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO City Section 8 vouchers accepted. Water Water WillITIES INCLUDED: TOTAL UNITS: 27 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): AGE CRITERIA: Head of household must be 18 years or older WAITLIST FOR PARKING: PARKING INFO: NO Parking included; no guest parking available. AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO: Income from assets cannot make applicants go over income limit LEASE: 1 year; then month-to-month NCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. FURNISHED: Partly furnishedmajor									YES
RENT INFO: RENT IS 30% OF INCOME: NO City Section 8 vouchers accepted. Water Water Minimum Walt List ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (MONTHS)									YES
Water MINIMUM WAIT LIST	Four I	Bdrm:							NO
Head of household must be 18 years or older WAITLIST FOR PARKING: PARKING INFO: PARKING: PARKING		chers ac	cepted.		Water			ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 /AIT LIST (Months): 24
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO: Income from assets cannot make applicants go over income limit INCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. PARKING INFO: Parking included; no guest parking available. GENERAL INFO: Accepts Sect 8 Vouchers *Along with completing regular waitlist update applicants must keep all contact info current well as respond to communication from hou management in a timely manner.* FURNISHED: Partly furnishedmajor		d must be	e 18 years or o	lder	\\/AITLI	ST EOD DARKING:			
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO: Income from assets cannot make applicants go over income limit INCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. parking available. GENERAL INFO: Accepts Sect 8 Vouchers *Along with completing regular waitlist upda applicants must keep all contact info current well as respond to communication from hou management in a timely manner.* FURNISHED: Partly furnishedmajor								: 1	PETS OK: NO
ASSET LIMIT INFO: Income from assets cannot make applicants go over income limit INCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. LEASE: 1 year; then month-to-month *Accepts Sect 8 Vouchers *Along with completing regular waitlist upda applicants must keep all contact info current well as respond to communication from hou management in a timely manner.* FURNISHED: Partly furnishedmajor		AS	SSET LIMITS:	NONE					
Income from assets cannot make applicants go over income limit INCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. LEASE: 1 year; then month-to-month *Along with completing regular waitlist upda applicants must keep all contact info current well as respond to communication from hou management in a timely manner.* FURNISHED: Partly furnishedmajor			PROPERTY:	YES					
applicants must keep all contact info current well as respond to communication from hour management in a timely manner.* Min. income required. Must make 2.5x rent and be below income limit. FURNISHED: Partly furnishedmajor			t make applica	nts go over			,		
INCOME CRITERIA: Min. income required. Must make 2.5x rent and be below income limit. FURNISHED: Partly furnishedmajor	income limit				1 year; then me	onth-to-month	applicants well as re	s must keep all cont spond to communic	act info current, as ation from housing
below income limit. Partly furnishedmajor								•	
	Min. income requil below income limit	red. Mus t.	st make 2.5x re	nt and be	Partly furnished				
1-PERSON MAXIMUM MONTHLY INCOME: 4696	 1-PERSON MAXIM	IUM MON	NTHLY INCOM	E:	4696				

		Last Comp	lete Update:	5/9/2023			AREA	Kailua
ROJECT NAME:	LANI	HULI					PROJECT TYPE	,
ADDRESS:	25 Aulik	ce St.					PHONE: 808-26	3-0268
CITY:	Kailua		STATE: HI	ZIP:	96734		FAX:	
MANAGER	: Dale C	Cripps, Resident	Manager		APPLY ADI			OUT-OF-STAT
APPLY TO	: Bob Ta	anaka Inc.			Honolulu, H			APPLICATION ACCEPTED
APPLY ATTN	l: Ext. 24	1						YES
APPLY PHONE	: 808-94	19-4111		F	FAX: 949-7211	EMAIL:		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	50	726	2.5xRent	413/443	1	2	YES
	Bdrm:	32	864	2.5xRent	456/499	1	2	YES
	Bdrm:							
Three E								
Four I	Bdrm:					J		NO
Accepts section 8 AGE CRITERIA:	voucher	S		Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	/AIT LIST (Months): 2
Head of household	d must b	e 62 years or ol	der, or	WAITLIST	Γ FOR PARKING:		CALL EVERY	
not without HOH.	iye 02 sp	ouse is accepta	able, but	PARKING INFO:	YES	PET INFO		PETS OK: YES
	A	SSET LIMITS:	NONE	\$25/month; gues available.	t parking not	for medica	al/assistance only	
AN OWN RESID	DENTIAL					GENERAL	. INFO:	
ASSET LIMIT INFO: Income from assets cannot put person over income limits.			er income	LEASE: 1 year		outside ho	ome. Participating Rental Assistance F 993	MD letter; can work in the City Program.
NCOME CRITERI Minimum Income		d. Must make 2	.5 x the rent	FURNISHED: Partly furnished- appliances only.				
-PERSON MAXIM				4696 5367				

		Last Comp	lete Update:	6/13/2023			AREA:	Kakaako
OJECT NAME:	LOLI	ANA					PROJECT TYPE:	Family
ADDRESS:	565 Qui	nn Ln.					PHONE: 808-522	2-0541
CITY:	Honolul	J	STATE: HI	ZIP:	96813		FAX : 522-053	39
MANAGER	R: Pam S	akai, General l	Manager		APPLY AD	DRESS:		OUT-OF-ST/
APPLY TO): Housin	g Solutions, In	c.					APPLICATION ACCEPTE
APPLY ATTN	l:					EMAIL.	@b-::	
APPLY PHONE	: 808-52	2-0541		F.	AX:	EMAIL:	pams@hsiservices	.net
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	43	1000		319	1	4	
	Bdrm:							
Three I	Bdrm: Bdrm:							NO
NT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES INCLU	IDED:		TOTA	AL UNITS: 42
000/month				Electricity, water,	refuse, sewer		MINIMUM W ESTIMATE	AIT LIST
							MAXIMUM W ESTIMATE	
E CRITERIA:	least 1 m	inor child (und	ler 18)				TO REMAIN ON W	
uit 10+ Witi1 at	icast i iii	illioi cilia (and	iei 10)	WAITLIST PARKING INFO:	FOR PARKING:			PETS OK: NO
				\$50/ month; no g		PET INFO:	Г	-L13 OK. NO
	AS	SSET LIMITS:	NONE					
AN OWN RESID		PROPERTY:	NO			GENERAL		
SET LIMIT INF	<u> </u>			LEASE: Month-to-month			or at risk homeless dren under the age	
				World's to morals			e a registered sex	offender or histor
COME CRITER	IA:			,		Application	n:	
ıst be less than				FURNISHED:			gement to email it, iservices.net	
				unfurnished, majo only. No carpet	or appliances			
SEDOON MANOR	41 IB 4 B 4 C 5	ITH WAY IN CO.]		
ERSON MAXIM		NITHLY INCOM		0				

		Last Compl	ete Update:	10/19/2023			AREA:	Waianae	
PROJECT NAME:	MA'IL	II (HPHA	-lee) - NC	T ACCEP	TING APPICA	TION	PROJECT TYPE:	Family	
ADDRESS:	_		, , ,				PHONE: 808-697	7-7171	
			_				FAX: 697-717		
CITY:	Waianae)	STATE: HI	ZIP:	96792		1		
MANAGER	: Mandy	Miyamoto				n School St.		OUT-OF-STATE APPLICATION	
APPLY TO	NOT A	CCEPTING AP			Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS ACC				
APPLY ATTN		pplications offic CCEPTING AP				EMAIL:	: hphaishereforyou.o	rg	
APPLY PHONE	: 808-832	2-5961			FAX : 832-3461				
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: Bdrm:								
	Bdrm:	7	0		912	2	6	YES	
Three		13	0		1394	3	8	YES	
Four	Bdrm:								
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced.	for Fede Domestic itional she	ral Low Income Violence victir elters; involunta	e projects ms;	UTILITIES IN	CLUDED: owance for electricit	У	TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 36 AIT LIST	
AGE CRITERIA:							TO REMAIN ON W	AITLIST	
Head of household	d must be	18 years or ol	der	WAITI	LIST FOR PARKING	:	CALL EVERY	(Months):	
				PARKING INF	FO:	PET INFO	nimals ok, but only o	PETS OK: YES	
,	AS	SSET LIMITS:	NONE	Included		the categ	ories listed below: under 25 lbs) or cat		
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERA	L INFO:		
ASSET LIMIT INF		hu		LEASE:			its must respond to a		
Cannot own a house on Oahu 1 year manner. No waitlist updates needed, ho applicants must update any contact info/household composition info and che waitlist status via hpha.myhousing.com						eeded, however, ontact fo and check using.com (will			
INCOME CRITER	IA:					need use	rname/password to or Fed Low Inc Pub Hs	do so).	
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				Partly furnishedmajor appliances only, no carpet			ns must be 3 yrs ago hetamine or sex offe	o; crystal	
1-PERSON MAXIM	IUM MON	ITHLY INCOMI	≣:	4570		Į.			

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		Last Comp	olete Upda	ate:	10/19/2023					DA/-:
			•			- 1110	4001	104710	AREA:	
PROJECT NAME:			A-lee)	- NO	ACCEP	IING	APPL	ICATIO	PROJECT TYPE:],
ADDRESS:	87-165 Ke	eliikipi St.							PHONE: 808-697	
CITY:	Waianae		STATE	: HI	ZIP:		96792		FAX : 697-717	74
MANAGER	· Mandy M	livamoto					ΔΡΡΙ Υ	ADDRESS:		
MANAGEN	. Manay iv	nyamoto						orth School St.		OUT-OF-STATE
APPLY TO								u, HI 96817 CEPTING APPL	ICATIONS	APPLICATION ACCEPTED:
1		CEPTING A		ONS						NO
APPLY ATTN		plications of CEPTING A		ONS						
APPLY PHONE: 808-832-5961						EAY.	832-3461		hphaishereforyou.o	rg
ATTENTIONE	000 002	0001				1 77.	002 0401			
Unit	Type:	Number			Minimum			MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:	REN	IT:	INCOME Required:		SQ FT:	Number of People	Number of People:	Allowed:
<u> </u>	tudio:									
One I	Bdrm:					1 P				
	!									YES
	Bdrm:	12	0			- L	912	2	6	TES
Three I	Bdrm:									
Four I	Bdrm:	12	0				1394	4	10	YES
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced. ***********************************	ofor Federa Domestic itional shel	al Low Incon Violence vic ters; involun	ne projects tims; tary		UTILITIES INC	owance	for electric		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 36 AIT LIST (Months): 60 /AITLIST
		, , , , , , , , , , , , , , , , , , , ,			WAITL PARKING INF		R PARKIN	NG: PET INFO	\.	PETS OK: YES
					Included	<u> </u>			nimals ok, but only o	
k	ASS	SET LIMITS:	NONE					the categ	ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL F	ROPERTY:	NO					GENERAL	L INFO:	
ASSET LIMIT INFO				_	LEASE:				nts must respond to a ndence from HPHA,	
Cannot own a hou	ise on Oah	u			1 year			manner. l applicant info/hous	No waitlist updates no smust update any cehold composition in atus via hpha.myhou	needed, however, ontact of and check
INCOME CRITERI	IA:							need use	rname/password to o	do so). Funding:
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					or	Convictio distributir	ns must be 3 yrs ago ng crystal methamph d sex offender are pe	o; however, etamine and		
1-PERSON MAXIM	IUM MONT	THLY INCOM	И Е:		4570			-		
2-PERSONS MAXI	MUM MON	NTHLY INCO	DME:		5220					

		Last Comp	lete Update:	2/22/2022				AREA:	Aiea
PROJECT NAME:	MAK	ALAPA M	ANOR (Co	o-op Fee)				PROJECT TYPE:	Family
ADDRESS:	,						_	PHONE: 808-487	7-7114
CITY:	Aiea		STATE: HI	ZIP:	967	01		FAX:	
MANAGER	: Tracy H	Hefferon, mana	ager		3165	LY ADDRES Waialae Av		Honolulu,	OUT-OF-STATE APPLICATION
APPLY TO	: Mark D	evelopment In	C.		111. 5	0010			ACCEPTED: YES
APPLY ATTN	l:								120
APPLY PHONE	: 808-73	5-9099			FAX: 781-2	95-3427		nttps://mdihawaii.co racyh@mdihawaii.	om/makalapamanor com
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ F	_{T.} N	INIMUM lumber People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	18	0				1	2	YES
Two I	Bdrm:	29	0			— F	2	4	YES
Three I	Bdrm:	29	0				4	6	YES
Four I	Bdrm:	34	0				6	8	YES
5 - Five-bdrm units Down Payment ba year. 1 bdrm = \$1 (6/08) = \$27,105; Recording, Transfe \$195.00 AGE CRITERIA:	sed on s 7,893; 2 4 bdrm =	ize of unit and bdrm = \$21,36 \$31,977 Addt	time of the 55; 3 bdrm Fees:	Water				MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 6 AIT LIST (Months): 24
Head of household	d must be	e 18 years or o	lder	WAITL	IST FOR PAF	RKING:		CALL EVERY	(Months): 6
				PARKING INF		P	ET INFO:	F	PETS OK: YES
1	AS	SSET LIMITS:	NONE	Parking include	ded				
AN OWN RESID		PROPERTY:	YES			_	SENERAL		
ASSET LIMIT INFO	O:			LEASE:		- $ $	 2-bdrm 3-bdrm 4-bdrm 5-bdrm 		
INCOME CRITERI	IA:			,		\		yer hookups in uni	
Maximum annual i 2 persons - \$61,35 4 persons - \$76,65 6 persons - \$88,95 8 persons - \$101,2	income: 1 50, 3 pers 50, 5 pers 50, 7 pers	sons - \$69,000 sons - \$82,800), ,	FURNISHED: Partly furnishe appliances on have carpet			Section 23 NO RESPO	ONSE IN 2021. MPLETED UPDATE	est of units are
1-PERSON MAXIM 2-PERSONS MAXI				4475 5112		Į.			

	Last Cor	nplete Update:	1/24/2022			AREA:	Nuuanu
PROJECT NAME:	MAKAMAE (I	HPHA-hon)	- NOT ACC	CEPTING APP	LICA	PROJECT TYPE:	,
	21 South Kuakini St.					PHONE: 808-586	6-9724
						FAX: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96813		,	
MANAGER	: Sol Sentons			APPLY ADD			
APPLY TO	: HPHA NOT ACCEPTING	APPLICATIONS		1002 North School St. Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS OUT-OF- APPLICATIONS ACCEPTING APPLICATIONS			
APPLY ATTN	: Oahu applications on NOT ACCEPTING						NO
APPLY PHONE	: 808-832-5961			FAX : 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:
S	tudio: 108	0		384	1	2	YES
One I	3drm: 16	0		500	1	4	YES
Two I	Bdrm:						
Three I	3drm:						
Four I	Bdrm:						
	NT IS 30% OF INCO for Federal Low Inco 8/2/2016*****		UTILITIES INC	CLUDED: owance for electricity		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:					т	O REMAIN ON W	
Head of household	d or spouse must be	62 years or	WAITI	IST FOR PARKING:	'	CALL EVERY	
older, or disabled			PARKING INF		PET INFO:	F	PETS OK: YES
			Included		Small pets u	under 25 lbs. only	
	ASSET LIMITS]		
AN OWN RESIDE	DENTIAL PROPERT` O·	Y: NO			GENERAL II	NFO: NCES: Domestic V	/iolonce victims:
Cannot own a hou			LEASE: 1 year			n transitional shelt	
) your		1	must respond to a	any
					correspond	ence from HPHA, waitlist updates n	in a timely
2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 person - \$ 00; 3 persons - \$68,5 00; 5 persons - \$82,2 00; 7 persons - \$94,3	00; 00;	FURNISHED: Partly furnishe appliances on		applicants r info/househ waitlist statu need userna If elder dies	must update any coold composition in us via hpha.myhouame/password to congress and general feet age 62 spig: Fed Low Inc Pu	ontact Ifo and check using.com (will do so). ouse may rent
1-PERSON MAXIM	IUM MONTHLY INCO	DME:	4570		Į		
2-PERSONS MAXI	MUM MONTHLY INC	COME:	5220				

	MAKA						PROJECT TYPE:	Family	
ADDRESS:	95-141 K	(ipapa Dr.					PHONE: 808-623	3-3920	
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX: 623-392	20	
MANAGER	R: Michael	Ramos			APPLY AD 95-141 Kipa	DRESS: apa Drive, Mililar	ni 96789	OUT-OF-STA	
APPLY TO	D: Makana	a Hale Cooper	ative						
APPLY ATT	N:							YES	
APPLY PHONE	E: 808-623	3-3920		F	FAX:	EMAIL:			
Uni	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:								
Two	Bdrm:	30	696	NO	705	2	5	YES	
Three	Bdrm:	69	771	NO	843/882	3	7	YES	
Four	Bdrm:	27	857	NO	1050	4	9	NO	
ent INFO: Re wo bdrm rent is aree bdrm rent i our bdrm rent is	\$592-696 s \$656-77	maximum. 1 maximum.	E: YES	UTILITIES INCLU	JDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
GE CRITERIA:						Т	O REMAIN ON W		
ead of househol				WAITLIS ⁻	T FOR PARKING:		CALL EVERY	(Months):	
story.	ppry withou	it vermusio rec	Sideritial	PARKING INFO:	YES	PET INFO:		PETS OK: NO	
		SET LIMITS:		Parking included stall @ \$30/mo.	; waitlist for 2nd		ve animals with m	edical verification	
AN OWN RESI SET LIMIT INF		PROPERTY:	YES			GENERAL II Application:			
operty is counte		etermining inc	ome	LEASE: Month-to-month			n manager's office	Э.	
ligibility.						*Note, waitlist status inquiry must be in writing, every 6 months.			
COME CRITER							regular waitlist up		
aximum Annual Income: 2 persons: \$45,650; persons: \$51,350; 4 persons: \$57,050;			5,650;	FURNISHED:	-maior	. '	must respond to		
persons: \$51,35	persons: \$51,350; 4 persons: \$57,050; persons: \$61,600; 6 persons: \$66,200; persons: \$70,750; 8 persons: 75,300;			Partly furnishedmajor appliances only.				ement, in a timely	

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	Last Comp	olete Update:	1/24/2022			AREA:	McCully
PROJECT NAME:	MAKUA ALII (I	HPHA-hon)	- NOT A	CCEPTING	APPLIC	PROJECT TYPE:	•
	1541 Kalakaua Ave.					PHONE: 808-97	3-0193
						FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96826		12.22	
MANAGER	R: Loane Ah Sam				ADDRESS:		
APPLY TO	D: HPHA NOT ACCEPTING AI	PPLICATIONS		Honolul	orth School St. lu, HI 96817 CCEPTING AP		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications off NOT ACCEPTING A						NO
APPLY PHONE	E: 808-832-5961			FAX : 832-346		AIL: hphaishereforyou.c	org
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMU Number of Peop	er Number of	CAREGIVER Allowed:
	tudio:						VEC
	Bdrm: 210	0		522	1	4	YES
Three					-		120
	Bdrm:						
DENT INCO DE	NT IO 000/ OF INCOM	- V		01115=5			
	NT IS 30% OF INCOM of for Federal Low Incom		Electricity and			MINIMUM W	AL UNITS: 211
***********CLOSED	8/2/2016*****					ESTIMATE	
						MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON V CALL EVERY	
older, or disabled	d or spouse must be 62	years or		IST FOR PARKI	_		
			PARKING INF	O: YES	PET IN	IFO: I pets under 25 lbs. only	PETS OK: YES
Į.	ASSET LIMITS:	NONE	Included		Siliali	pets under 25 lbs. Only	
AN OWN RESI	DENTIAL PROPERTY:				GENE	RAL INFO:	
ASSET LIMIT INF			LEASE:		PREF	ERENCES: Domestic \ ess in transitional shelt	/iolence victims;
Cannot own a hou	ise on Oanu		1 year		displac		crs, involuntary
						cants must respond to pondence from HPHA,	
INCOME CRITER	IA:				manne	er. No waitlist updates rants must update any c	needed, however,
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200););	FURNISHED: Partly furnish appliances or	edmajor	info/ho waitlis	busehold composition in t status via hpha.myhousername/password to	nfo and check using.com (will
6 persons - \$88,30 8 persons - \$100,4	00; 7 persons - \$94,350 450);				r dies, under age 62 sp unding: Fed Low Inc P	
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4570				
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

	Last Comp	lete Update:	6/14/2023			AREA:	Liliha
PROJECT NAME:	MALULANI HA	LE				PROJECT TYPE:	Elderly
ADDRESS:	114 North Kuakini St.					PHONE: 524-273	1 537-1213
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 545-521	4
	2: John Valledor, Reside x 10 2: Urban Real Estate Co		ee, COS 524-27		ania St. C101		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Housing Management	t Department	FAX : 545-5214			slee@urban-hi.com	YES
s	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Two	Bdrm: 150 Bdrm: Bdrm: Bdrm:	1410					NO
Project has some wait, as of 2022).	NT IS 30% OF INCOME Section 8 units (60 units t rents - call Sunnie dire 10	s; 5 year	UTILITIES INCLI			TOTAI MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (Months): 0
	ld 62+ or disabled; spou ; all other members of th e 62+ or disabled	ne	WAITLIS' PARKING INFO: Parking available	1:	PET INFO	TO REMAIN ON W. CALL EVERY (AITLIST Months): 6 ETS OK: YES
	ASSET LIMITS: DENTIAL PROPERTY:		year waiting list guest parking av options for \$40 r	after move-in; /ailable; other	Subject to property manager's approval GENERAL INFO:		
ASSET LIMIT INF	O:		LEASE: 1 year		rent unit. Transport Catholic C federal pro		,
Maximum annual	income for Sec. 8 Units		FURNISHED: Partly furnished- appliances only,		Funding: Section 8 60 units Market 89 units + 1 unit for resident mgr SQFT of units not available from manager. Application: Send request with self addressed stamped envelope		
 1-PERSON MAXIN	IUM MONTHLY INCOM	E:	5446]		

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		Last Comp	lete Update:	2/22/2022			AREA:	Pearl City
PROJECT NAME:	MAN	ANA GAR	DENS				PROJECT TYPE:	Family
ADDRESS:	949 Lue	hu St.					PHONE: 808-455	5-4225
CITY:	Pearl Cit	ty	STATE: HI	ZIP:	96782		FAX : 455-422	25
MANAGER	R: Lisa As	sinsin			APPLY AD			OUT-OF-STAT
APPLY TO): EAH H	ousing			Pearl City,			APPLICATION ACCEPTED
APPLY ATTN	N: Propert	ty Managemen	t Division					YES
APPLY PHONE	E: 808-45	5-4225			FAX: 455-4232		Locationsrentals.corentals.aspx	om/affordable-
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
-	Bdrm:	71	940	2.5x rent	746			YES
Three				2.6X 16III	740			
Four	Bdrm:							YES
RENT INFO: RE Has Sliding Scale RAP (rent assista Section 8 certifica gross income requ	for Rent nce) = \$7 ate holders	: \$940 minus 725 minimum r	\$215 max ent.	Water & Sewe			MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
AGE CRITERIA:				Į.			ESTIMATE TO REMAIN ON W	
Head of househol	d must be	e 18 years or o	lder	WAITI	IST FOR PARKING		CALL EVERY	
				PARKING INF	0:	PET INFO:	· F	PETS OK: NO
	AS	SSET LIMITS:	NONE			<u> </u>		
AN OWN RESI		PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF	·O:			LEASE:		application community Visitor par	tion letter mailed af n. Common laundry y area. On-site res king. Near Pearl Ci	area. Large ident manager.
INCOME CRITER	ΙΔ.					Center and	d Pearl Highlands.	
Maximum Annual 1 person - \$49,02: 2 people - \$55,98: 3 people - \$63,00: 4 people - \$69,96: 5 people - \$75,60: 6 people - \$81,18:	Income 6 0 0 0 0 0 0 0	50% AMI:		FURNISHED: Partly Furnish appliances, vi window curtai up.		.	ate - Info from Web	site
-PERSON MAXIN	MOM MUN	NTHLY INCOM	IE:	4085				
PERSONS MAXI	IMUM MC	NTHLY INCO	MF:	4665				

	Last Comple	ete Update:	8/31/2023			AREA:	Manoa
PROJECT NAME:	MANOA GARD	FNS FLDE	RI Y HOL	ISING		PROJECT TYPE:	
	2790 Kahaloa Dr.			Jointo		PHONE: 808-762	1
	J					FAX: 762-053	
CITY:	Honolulu	STATE: HI	ZIP:	96822		,	
MANAGER	t: Resident manager - Ka	ahea Fong			Street, Suite 3	804	OUT-OF-STATE
APPLY TO	: Hawaii Affordable Prop	perties, Inc.		Honolulu, Ha	awaii 96814		APPLICATION ACCEPTED: YES
APPLY ATTN	l:						
APPLY PHONE	: 808-762-0101			FAX:	EMAIL: k	ahealanif@hawaii	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 I	Bdrm: 31	1050	2xrent	448	2	2	YES
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						YES
RENT INFO: RE	NT IS 30% OF INCOME	: NO	UTILITIES INC	CLUDED:		TOTA	L UNITS: 79
60% AMI rent - \$9			Water & Sewe	er		MINIMUM W ESTIMATE	
80% AMI rent - \$1 Market rent - \$1	250 1300					MAXIMUM W	
aross income requ	olders need not meet the	minimum	Į.			ESTIMATE	(Months): 60
AGE CRITERIA: All applicants/resid	dents must be 62 or olde	r at time of			-	TO REMAIN ON W CALL EVERY	
	ants may apply without v		WAITL PARKING INF	IST FOR PARKING: O: YES	PET INFO:	F	PETS OK: NO
			51 stalls; \$20/	month, street			
	ASSET LIMITS:	NONE	parming aloo a	.validblo			
AN OWN RESIDE	DENTIAL PROPERTY:	YES			GENERAL I		17.1.11
ASSET LIMIT INF	0.		LEASE:		outside hor	ne.	1D letter; can work
			year, then m	nonth to month		92 tion to Shopping aਾ narities Hawaii	vailable through
INCOME CRITER	IA:		,				
Maximum Annual 1 person - 60%AN	/II \$66,024, 80%AMI \$88	,032	FURNISHED:	edmajor			
2 persons - 60%A No income limit fo	MI \$75,456, 80%AMI - \$ r market units.	100,608	appliances on window shade	lly. Carpet and			
1-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u>	5502		1		
O DEDCOMO MANG	NALINA NAONITLII V INICON	4 -	6200				

		Last Compl	ete Update:	10/24/2023			AREA:	Chinatown	
PROJECT NAME:	MAR	IN TOWER	₹				PROJECT TYPE:	Family	
ADDRESS:	60 North	n Nimitz Hwy.					PHONE: 808-528	3-4460	
CITY:	Honoluli	u	STATE: HI	ZIP : 96817			FAX : 524-0060		
MANAGER				APPLY ADDRESS: 60 N. Nimitz Hwy Honolulu, HI 96817				OUT-OF-STATE APPLICATION	
		Affordable Pro						ACCEPTED: YES	
APPLY PHONE		·	istant		FAX: 524-0060	EMAIL:	Email: marin@haw https://www.marinto	aiiaffordable.com owerapartments.com	
Unit	Туре:	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	Bdrm:								
Four	Bdrm:							NO	
Studio 60%AMI \$1100, 80%AMI \$1200, 120%AMI	1 1		: NO	UTILITIES INCI Water + Sewer			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6	
AGE CRITERIA:							TO REMAIN ON W	/AITLIST	
Head of househole	d must be	e 18 years or ol	der	WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 12	
				PARKING INFO	D: include parking.	PET INFO	: F nimals only.	PETS OK: YES	
,	AS	SSET LIMITS:	NONE	Rent does not	include parking.	Service at	iimais only.		
AN OWN RESIDE		. PROPERTY:	YES			GENERAL			
ASSET LIMIT INF	<u> </u>			LEASE:			ll forms of subsidy ple: Section 8)	oayments	
				1 year		Most units	s have a Lanai		
INCOME CRITER	IA:						n: om Resident Manag arin@hawaiiaffordab		
60%AMI 1 2 3 4 5 \$54,900 \$62,700 \$70,560 \$78,360 \$84,660 Units also priced at 80, 120 and 140% AMI			\$84,660	FURNISHED: Partly furnished appliances only			PONSE IN 2023		
T-PERSON MAXIM				4575 5225]			

	Last Cor	nplete Update:	5/17/2023			AREA:	Chinatown
PROJECT NAME:	MAUNAKEA	TOWER (CL	OSED for a	application)		PROJECT TYPE:	Family
	1245 Maunakea St.	•				PHONE: 808-537	7-9905
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 545-166	63
MANAGER	R: Terri Washam			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO) :						APPLICATION ACCEPTED:
APPLY ATTN	: Maunakea Tower						
APPLY PHONE	E: 808-537-9905		ı	FAX: 545-1663		andalwoodmgt.co Maunakeatower@s	m andalwoodmgt.com
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 254	0	NO	560	1	2	YES
	Bdrm: 126	0	NO	742	2	4	YES
Three				7 12			
Four	Bdrm:						NO
AGE CRITERIA:	Y ACCEPTING APPL		Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 60 AIT LIST (Months): 120 /AITLIST
Head of househol	d must be 18 years o	rolder	_	T FOR PARKING:			
	ASSET LIMITS	S: NONE	Parking included parking available available for a fe	d; some guest e; other options	PET INFO: Assistive a		PETS OK: NO
AN OWN RESI	DENTIAL PROPERT				GENERAL I	NFO:	
ASSET LIMIT INF	O:		LEASE:		Funding: 3	79 units Low Incom	ne Housing Tax
			1 year; then mo	nth-to-month		on letter sent upon	receipt of
INCOME CRITER	IA:		-			on wait list will rec	eive a notice
Maximum Annual 2 persons - \$52,2: 4 persons - \$65,3:	Income: 1 person - \$ 50; 3 persons - \$58,8 00	45,750; 300;	Partly furnished appliances only.		annually		
1-PERSON MAXIN	IUM MONTHLY INCO	DME:	3808				
2-PERSONS MAXI	IMUM MONTHLY INC	OME:	4354				

	L	ast Complet	e Update:	10/24/2023					Delema
			·		\	NOT	A COED	AREA: PROJECT TYPE:	Palama
PROJECT NAME:			HOME	S (HPHA-r	non) -	NOI A	ACCEP		
ADDRESS:	521 North K	ukui St.						PHONE: 808-832	
CITY:	Honolulu		STATE: HI	ZIP:		96817		FAX : 832-318	88
	-								
MANAGER	R: Cynthia Yo	shida - Mana	ger				ADDRESS:		
							rth School St. , HI 96817		OUT-OF-STATE APPLICATION
APPLY TO		EPTING APPI	LICATIONS				CEPTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	I: Oahu appli	cations office							NO
	NOT ACC	EPTING APP	LICATIONS				EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 808-832-59	961			FAX: 8	32-3461			
Unit	Type: N	umber		Minimum			MINIMUM	MAXIMUM	CAREGIVER
		UNITS:	RENT:	INCOME Required:	8	Q FT:	Number of People	Number of People:	Allowed:
S	tudio:								
One I	Bdrm:	24	0		T (530	1	2	YES
Two I	Bdrm:	114	0			732	2	4	YES
Three I	Bdrm:	168	0			908	3	6	YES
Four I	Bdrm:	50	0			1203	4	8	YES
Minimum Rent: \$0 PREFERENCES: homeless in transi displaced. *********CLOSED: AGE CRITERIA:) for Federal Domestic Vio itional shelter	Low Income polence victims	orojects s;	UTILITIES INC Water and gas electricity		ince for		MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W	(Months): 36 AIT LIST (Months): 60 AITLIST
Head of household	d must be 18	years or olde	er	WAITL	IST FOR	PARKIN	G:	CALL EVERY	(Months):
				PARKING INF	O:		PET INFO		PETS OK: YES
J				Included				nimals ok, but only o pries listed below:	one from each of
	ASSE	T LIMITS: N	IONE				one doa (ı	under 25 lbs) or cat	
AN OWN RESID		OPERTY: N	Ю				GENERAL		
ASSET LIMIT INFO				LEASE:				s must respond to a dence from HPHA,	
				1 year			applicants info/house	lo waitlist updates n must update any co chold composition in atus via hpha.myhou	ontact fo, and check
INCOME CRITERI	IA:							name/password to d Fed Low Inc Pub Hs	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 pe 00; 3 persons 00; 5 persons 00; 7 persons	erson - \$53,25 s - \$68,500; s - \$82,200;	50;	FURNISHED: Partly furnishe appliances on	edmajor		All convict	ions must be 3 yrs a ethamphetamine or s	ago, unless it's
1-PERSON MAXIM	IUM MONTH	LY INCOME:		4570					
2-PERSONS MAXI	MUM MONT	HLY INCOME	:	5220					

Last Complete Update:	8/2/2023	AREA: Mililani
PROJECT NAME: MEHEULA VISTA I		PROJECT TYPE: Elderly
ADDRESS: 95-1060A Lehiwa Dr.		PHONE: 808-626-9162
CITY: Mililani STATE: HI	ZIP: 96789	FAX: 427-8591
MANAGER: Resident Manager - Bridget Singletor Julio Gomez APPLY TO: Meheula Vista	n; Office Assistant - APPLY ADDRES 95-1060A Lehiwa Mililani HI 96789	Drive OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN: Management Office		YES
APPLY PHONE : 808-626-9162	FAX : 427-8591	EMAIL: eahhousing.org/apartments/meheula-vista/
Unit Type: Number of UNITS: RENT:	INCOME SO ET: N	NIMUM umber of People People: CAREGIVER Allowed:
Studio:	2 X rent 420	
Two Bdrm: Three Bdrm:		
Four Bdrm:		YES
RENT INFO: RENT IS 30% OF INCOME: NO 30% AMGI - \$690 mo., 4 units 50% AMGI - \$990 mo, 71 units Food Stamps & Rent Subsidy may be accepted to help meet min. income. No credit evaluation required	UTILITIES INCLUDED: Electricity, water, sewer	MINIMUM WAIT LIST ESTIMATE (Months): 6 MAXIMUM WAIT LIST ESTIMATE (Months): 12
AGE CRITERIA:		TO REMAIN ON WAITLIST
All residents must be 55 or older. Applicants can apply without verifiable residential histories.	WAITLIST FOR PARKING: PARKING INFO: NO PI \$50/month available on a first-	CALL EVERY (Months): 6 ET INFO: PETS OK: NO
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES	come, first-served basis. Once all stalls have been assigned, tenancy restricted to	ENERAL INFO:
ASSET LIMIT INFO: All income from assets is counted to determine eligibility.	a w	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.* Dicnic area, community room, laundry room, andscaped common areas, coin-operated
INCOME CRITERIA: 30% AMI - Max income \$27,510 one person, \$31,440 two persons. 50% AMI - Max income -\$48,850 one person, \$52,400 two persons.	FURNISHED: Range/oven, garbage desposal, refrigerator, freezer, vinyl	andry, Dnsite resident manager, visitor parking, multi- jurpose pavillion. Funding: LIHTC, HHFDC, RHTF, and DURF Must have good landlord references and satisfy ninimum criminal background criteria.
1-PERSON MAXIMUM MONTHLY INCOME:	4071	

	Last	Complete Upo	late:	8/8/2023				AREA	Mililani
PROJECT NAME:	MEHEULA	VISTA II						PROJECT TYPE	Elderly
ADDRESS:	95-1060B Lehiwa	a Dr.						PHONE: 808-62	6-9162
CITY:	Mililani	STAT	E: HI	ZIP:		96789		FAX : 427-85	91
	Resident Mana Julio Gomez Meheula Vista	ger - Bridget Si	ngleton; C	Office Assistar	nt -	APPLY AD 95-1060A L Mililani, Ha	ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Management O	ffice							YES
APPLY PHONE	808-626-9162				FAX:	427-8591		vista/	eartments/meheula-
	Type: Number of UNIT		NT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 75	99	90			420			
Three I									YES
RENT INFO: RE 8 units @ 30% AM AMGI=\$9190 7 un	//GI=\$690; 60 unit	s @ 50%		JTILITIES INC Vater, sewer a			ed.	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
AGE CRITERIA:								TO REMAIN ON V	
All tenants must b submission. Applicants can applicants.				ARKING INF	O: ing is li		PET INFO:	CALL EVERY	PETS OK: NO
AN OWN RESID	ASSET LIN	MITS: NONE		once all stalls occupancy is r who do not ow	restricte	ed to those	GENERAL	INFO:	
ASSET LIMIT INFO	O:		_	EASE:			applicants well as res	must keep all con	ar waitlist updates, tact info current, as cation from housing oner.*
INCOME CRITERI	IA:						manager,	ree property. On-s Meeting & multi-pu ry doors, common	irpose room,
Maximum annual i 30% AMI - 1 perso 50% AMI - 1 perso 60% AMI - 1 perso	on - \$27,510, 2 pe on - \$45,850; 2 pe	erson - \$52,400	Ī	URNISHED: Major applicar disposal, vinyl an, window co	floorin	g, ceiling		ry doors, common a, community room	
1-PERSON MAXIM	IUM MONTHLY II	NCOME:		1585			1		

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	Last Comp	lete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME:	MEHEULA VIS	TA III				PROJECT TYPE:	Elderly
ADDRESS:	95-1060C Lehiwa Dr.					PHONE: 808-62	6-9162
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 427-85	91
	Resident Manager - E Julio Gomez Management Office	Bridget Singleton;	Office Assistant	- APPLY ADI 95-1060A Lo Mililani, HI 9	ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Meheula Vista I - ATT	N: Resident Man		FAX: 427-8591	EMAIL:	eahhousing.org/ap vista/	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Two	Bdrm: 75 Bdrm: Bdrm: Bdrm:	990	2x Rent				
30% AMI Units - \$ 50% AMI Units - \$ 60% AMI Units - \$ AGE CRITERIA:	NT IS 30% OF INCOME 690/month - 8 Units 990/month - 60 Units \$1000/month - 7 Units		UTILITIES INCL Water, Sewer, a			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 6 /AIT LIST (Months): 12 VAITLIST
	ply without verifiable res		\$50/mo. Parking once all stalls a occupancy is re	g is limited and	PET INFO	<u>. </u>	PETS OK: NO
AN OWN RESI	DENTIAL PROPERTY:		who do not own		general	. INFO:	
ASSET LIMIT INF			LEASE:		applicants well as re		tact info current, as cation from housing
year., 2 persons - 50% AMI - Maxim year.; 2 person - \$	um income, 1 person - \$ \$30,240 per year. um income, 1 person - \$ 50,400 per year um income 1 person \$\$	\$44,100 per	FURNISHED: Major appliance disposal, vinyl fl fan, window cov	looring, ceiling	manager, entry door	free property. On-si meeting/multi-purp rs, common laundry nunity room.	ose room, locked
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	3675				

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	Last Complete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME: MEH	EULA VISTA IV				PROJECT TYPE:	Elderly
ADDRESS: 95-1060	DD Lehiwa Drive				PHONE: 808-626	G-9162
CITY: Mililani	STATE: Hi.	ZIP:	96789		FAX : 427-859	91
Siri: Villilarii	OTATE: III.		90709			
MANAGER: Reside Julio G APPLY TO: Manag		n; Office Assista		.ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:						YES
APPLY PHONE: 808-62	26-9162		FAX : 427-8591	EMAIL: N	IVLP-managemen	t@eahhousing.org
Unit Type:	Number of UNITS:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:	990		420			
Two Bdrm:						
Three Bdrm:						
Four Bdrm:						NO
RENT INFO: RENT IS 30 30% AMI - \$690 - 4 units 50% AMI - \$990 - 71 units	0% OF INCOME: NO	UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1 AIT LIST
AGE CRITERIA:				7	TO REMAIN ON W	/AITLIST
All tenants must be age 55 submitting application.	or older at the time of		IST FOR PARKING:		CALL EVERY	
A	SSET LIMITS: NONE	once all stalls occupancy is	ing is limited and are assigned, restricted to those	PET INFO:	F	PETS OK: NO
AN OWN RESIDENTIAL ASSET LIMIT INFO:	PROPERTY: YES	who do not ov	vn a venicie.	GENERAL I		
ASSET LIMIT INFO.		LEASE:		applicants i well as resp manageme Picnic area landscaped		act info current, as ation from housing ner.* , laundry room,
INCOME CRITERIA: Maximum annual income:		FURNISHED:			dent manager, visi	tor parking, multi-
30% AMI - 1 person - \$27, 50% AMI - 1 person - \$45,		Major applian	I flooring, ceiling	purpose pa Funding: LI	villion. HTC, HHFDC, RH	TF, and DURF
1-PERSON MAXIMUM MOI	NTHLY INCOME:	3821		1		
2-PERSONS MAXIMUM MO	ONTHLY INCOME:	4367				

		Last Comp	lete Update:	8/10/20	023				AREA:	Waipahu
PROJECT NAME:	MOK	UOLA VIS	STA					ı	PROJECT TYPE:	Family
ADDRESS:	94-333	Mokuola St.							PHONE : 808-671	-4075
CITY:	Waipah	u	STATE: HI	ZII	P:		96797		FAX : 671-280)7
MANAGER	R: Marler	ne Antonio					APPLY AD			OUT OF STATE
APPLY TO	D: Location	ons					P.O. Box 2 Honolulu, F 94-333 Mol 96797		ipahu	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	N: Proper	rty Managemer	nt Division							YES
APPLY PHONE	≣: 808-67	71-4075				FAX:	671-2807		ttp://www.locations e-rentals.aspx	srentals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minin INCC Requ	ME		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio:									
	Bdrm:									
	Bdrm:	69	1320	2.5 x	rent		641	1	5	
Three						ј ј. 1 п				
Four	Bdrm:					Į.			J	YES
RENT INFO: RE 4 units @ 30% AN 65 units @ 60% A Section 8 certifica gross income req 600+ credit score	MG for \$5 AMGI for ate holder uirement	530 \$1320 rs need not me		UTILITIE Water ar			D:		TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
Pockaround chool									ESTIMATE	(Months): 3
AGE CRITERIA: Head of househol	ld must h	e 18 vears or o	alder					Т	O REMAIN ON W CALL EVERY	
Tiedd of fieddefiol	a mast b	c to yours or o	ndoi	W PARKING			R PARKING: NO	PET INFO:		PETS OK: NO
	Δ	SSET LIMITS:	NONE	\$50 mon spaces.					mal. Emotional ne	
AN OWN RESII								GENERAL II	NFO:	
ASSET LIMIT INF	O:			LEASE:				Playground	picnic area. Eac	h unit will have
									units available on	site
								Funding: R		0.10
INCOME CRITER Annual Maximum \$27,510, 2 persor	Income -			FURNISH	HED:			NO RESPO	NSE SINCE 2019 on's website.); updates taken
persons - \$39,300 2 persons \$62,880 \$78,600	0 60% o	f AMI: 1 Persoi	n \$55,020,							
-PERSON MAXIN	иим мо	NTHLY INCOM	1E:	4585				Į.		
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	5240						

Last Comple	ete Update:	6/13/2023			AREA	: Kakaako
ROJECT NAME: NA LEI HULU K	UPUNA			P	ROJECT TYPE	: Elderly
ADDRESS: 610 Cooke St.				F	PHONE: 808-59	3-1009
CITY: Honolulu	STATE: HI	ZIP:	96813		FAX:	
MANAGER: Angela Hoan, Property	manager		APPLY ADI	DRESS: Street #114, Hon	olulu, HI	OUT-OF-STA
APPLY TO: Na Lei Hulu Kupuna			96813			APPLICATIO ACCEPTED
APPLY ATTN:						YES
APPLY PHONE: 808-593-1009			FAX:		ww.mdihawaii.co gela@mdihawa	
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 75	966		350	1	2	YES
One Bdrm:						
Two Bdrm:						
Four Bdrm:						YES
		-		,	,	
RENT INFO: RENT IS 30% OF INCOME: Mark Development is management compar		UTILITIES INC		_	ТОТ	AL UNITS: 75
20 Units @ 40% AMI - \$733.00/ month i3 Units @ 50% AMI - \$966.00/month 2 Units @ 60% AMI - \$1099.00/month		Liectricity and	water		MINIMUM V ESTIMATE MAXIMUM V	(Months):
No waitlist updates needed; applicants only	ly need to					(Months):
GE CRITERIA: Applicants must be 62 yrs old at time of ap	plication			T	O REMAIN ON Y CALL EVERY	
submission. Applicants can apply without vesidential history, with letter from their cas	erifiable	WAITLI PARKING INF	O: NO	PET INFO:		PETS OK: NO
		No parking av	ailable.	Accommoda service anim	tion considered als	for verifiable
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:				JENERAL IN	IFO:	
SSET LIMIT INFO:		LEASE:			on to Shopping a	available through
		1 year intial le month after th	ase, then month-to- at	Open in 199 Has social s coordinator -	2; has Air Condi ervices on site, - Katie Hoan ınits w/ walk in s	part-time,
NCOME CRITERIA:				each floor Funding: LIF		
ncome Limit 1 Person 2 Person 10% AMI \$35,280/yr \$40,320/y 150% AMI \$44,100/yr \$50,400/y 150% AMI \$52,920/yr \$60,480/y	/r /r /r	table with chai	ed, dresser, coffee irs (which can be quested) and A/C.	Accepts Sec Can decline	tion 8 & Rent S	partment 2-3 times
PERSON MAXIMUM MONTHLY INCOME	 E:	4410		J.		

	Last Comp	lete Update:	10/24/2023			AREA:	Nanakuli
PROJECT NAME:	NANA'IKEOLA	SENIOR A	PARTMEN	ITS		PROJECT TYPE:	Elderly
ADDRESS:	87-122 Nanaikeola St.					PHONE: 808-668	8-4702
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX:	
MANAGER	R: Mike Klein, Compliand	ce Manager		APPLY ADD	DRESS:		OUT-OF-STATE
APPLY TO): Call for viewing and a	oplication.					APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE	E: 808-668-4702			FAX:	EMAIL: h	alealiigroup@yah	oo.com
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 39	0		500	1	3	
Three	Bdrm:						
Four	Bdrm:						NO
	:NT IS 30% OF INCOME me; maximum income n		\$75 monthly util	nd garbage included lity allowance. No A e is Subject to Chan	C.	MINIMUM W ESTIMATE MAXIMUM W	(Months): 30
AGE CRITERIA:			Įt.			ESTIMATE O REMAIN ON V	, , ,
Head of househol	d must be 62 years or ol		\Λ/ΔΙΤΙ IS	ST FOR PARKING:	'	CALL EVERY	
	ust be 18 and older; all o e 62. Caregiver must be		PARKING INFO		PET INFO:	ſ	PETS OK: YES
]	ASSET LIMITS:	NONE		ded, covered and limited (28 stalls	If under the	provisions of pet	policy.
	DENTIAL PROPERTY:	YES			GENERAL I		
ASSET LIMIT INF	·O:		LEASE: 1 year; co-signer credit score is leader.		Senior Apa EAH Inc. TDD (877)4 HUD Section	leanette Weinberg rtments, opened 3 147-5991 on 202 program, H tional Community	3/09, managed by
	IA: % of Median (Very Low I 3,350 for 2; \$43,150 for 3		FURNISHED: major applicand coverings	ces, window	Associan, V Resident m Trash chute 2 units are	Veinberg Foundat anager on site. e on each floor. handicapped acce PLETED UPDATI	ion
" 1-PERSON MAXIM	MUM MONTHLY INCOM	E:	2796		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCOM	ME:	3196				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	10/24/2023			AREA:	Waianae	
PROJECT NAME:	NANAKULI HO	MES (HPF	IA-lee) - N	OT ACCEPTIN	NG A	PROJECT TYPE:	Family	
	87-1606 to 87-1612 Fa	•				PHONE: 808-697	'-7171	
CITY	<u> </u>	CTATE:	7ID.	20722		FAX: 697-717	'4	
CITY:	Nanakuli	STATE: HI	ZIP:	96792		-		
MANAGER	: Mandy Miyamoto			APPLY ADD			OUT-OF-STATE	
APPLY TO	: HPHA NOT ACCEPTING AF	PPLICATIONS		Honolulu, HI NOT ACCEF	96817 PTING APPLI	CATIONS	APPLICATION ACCEPTED: NO	
APPLY ATTN	: Oahu applications offi NOT ACCEPTING AF				FMAII ·	hphaishereforyou.o		
APPLY PHONE	: 808-832-5961			FAX: 832-3461	LWAIL.	прпавнеговую.	19	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:							
	Bdrm:							
Three E	36	0		1024	3	8	YES	
Four I	Bdrm:							
Minimum Rent: \$0 PREFERENCES:	NT IS 30% OF INCOME for Federal Low Incom- Domestic Violence victi tional shelters; involunta	e projects ms;	UTILITIES INC Water and allor	LUDED: wance for electricity		MINIMUM WA ESTIMATE MAXIMUM WA	(Months): 36 AIT LIST	
********OI OGED (P/9/901&*****		Į.			ESTIMATE	(Months): 60	
AGE CRITERIA: Head of household	d must be 18 years or ol	der	WAITLI	ST FOR PARKING:		TO REMAIN ON W CALL EVERY		
			PARKING INFO	D:	PET INFO		PETS OK: YES	
1	ASSET LIMITS:	NONE	Has carport		the catego	nimals ok, but only o ories listed below: under 25 lbs) or cat		
	DENTIAL PROPERTY:	NO			GENERAL	. INFO:		
ASSET LIMIT INFO	0:		LEASE: 1 year		correspon manner. N applicants info/house	ts must respond to a dence from HPHA, lo waitlist updates no must update any control composition in atus via hpha.myhou	in a timely eeded, however, ontact fo, and check	
INCOME CRITERI	A:				need user	name/password to d	do so).	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		FURNISHED: Partly furnishe appliances only		All convictory	Funding: Fed Low Inc Pub Hsing 100% Ill convictions must be 3 yrs ago, unless it's rystal methamphetamine or sex offender IO RESPONSE IN 2023		
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		į.			

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2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Com	plete Update:	5/17/2023			AREA:	Kakaako	
PROJECT NAME:	NOHONA HAI	_E			F	PROJECT TYPE:	Family	
ADDRESS:	630 Cooke St.				-	PHONE: 808-650)-3931	
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX: (808) 465-2217		
	R: Dorene Young D: Nohona Hale EAH Housing				DRESS: St., Honolulu, HI site: eahhousing.		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	I: Leasing Office						YES	
APPLY PHONE	E: 808-650-3931			FAX: (808) 465-22		H-Management@ /ebsite: eahhousii		
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	itudio: 111	999	2x Rent	355	1	2		
One	Bdrm:	0						
Two	Bdrm:	0						
Three	Bdrm:	0						
Four	Bdrm:	0					YES	
*11 Micro-units (3: AMI - \$552/month	355 sq. ft. + 75 sq. ft. l th *	anai) - 30%	Water & Gas	CODED:	Т	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON W CALL EVERY	(Months): 6 AIT LIST (Months): 12 VAITLIST	
			WAITL PARKING INF	IST FOR PARKING: O: YES	PET INFO:		PETS OK: NO	
	ASSET LIMITS	:	Parking include	ded, but severely available. No guest	No pets allow		2.0 0.11	
AN OWN RESI	DENTIAL PROPERTY:	YES			GENERAL IN	NFO:		
ASSET LIMIT INF	O: ered income for all asse	ets.	LEASE: 1-year lease f month-to-mon	or first year, then ath thereafter.	applicants m well as resp managemer Community	updates needed, nust keep contact ond to communic nt in a timely man Features: Bicycle torage area; Build	info updated, as ation from ner.* , Moped &	
INCOME CRITER	IA:				Community	Garden, Commui	nity room kitchen	
30% AMI: 1 person/\$26,460 Max. 2 persons/\$34,020 Max. 60% AMI: 1 person/\$52,920 Max. 2 persons/\$56,700 Max.			FURNISHED: Murphy Bed 8	Attached Sofa.	Managemer On-Site laur Outdoor land Secured ent	Community room/lounge area, Fitness room Management office On-Site laundry facilities Outdoor lanai Secured entry Security cameras		
1-PERSON MAXIM	IUM MONTHLY INCOI	ME:	0]			

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	Last Comple	ete Update:	10/24/2023			AREA:	Nuuanu
PROJECT NAME:	NUUANU YMC	A - Men's				PROJECT TYPE:	Emergency/Transi
	1441 Pali Hwy Honolulu	STATE: HI	ZIP:	96813		PHONE: 808-536 FAX: 521-118	
	Torioraid			30010			
	: Cheryl Young	ship Coordinator		APPLY ADD 1441 Pali Hv Honolulu, HI	vy.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN				FAX: N/A	EMAIL:	cyoung@ymcahono apiunno@ymcahon	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 50	45			1	1	
	Bdrm:						
Three I							YES
\$45/night, \$255/w Student housing a monthly \$720	NT IS 30% OF INCOME: eek - single w/ shared ba vailable to full-time stude	throom.	JTILITIES INC			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 0
AGE CRITERIA: Must be 18+. SR0)		PARKING INFO	ST FOR PARKING:	PET INFO	TO REMAIN ON W CALL EVERY): F	
	ASSET LIMITS:		No parking		GENERA		
ASSET LIMIT INF			LEASE: None		Check-In	2pm - 8pm n-5pm	gle men ONLY
INCOME CRITER	IA:				Check-O		
			FURNISHED: Twin bed, dres & lamp.	ser, closet, desk,		ate in 2019 - Info fro	m Website
			·		LAST RE	SPONSE IN 2021.	

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	10/24/2023			AREA:	Waipahu
PROJECT NAME:	OASIS AT WA	IPAHU AP	ARTMEN1	rs .		PROJECT TYPE:	Family
ADDRESS:	94-207 Waipahu St.					PHONE: 808-67	1-2800
CITY:	 Waipahu	STATE: HI	ZIP:	96797	96797		45
MANAGER	t: Bethany Combs			APPLY AD			
APPLY TO	D: Site				Management ipahu Street II 96797		OUT-OF-STATI APPLICATION ACCEPTED:
APPLY ATTN	l:						NO
APPLY PHONE	E: 808-671-2800			FAX: 676-6945	EMAIL:	website: oasis-tow	nhomes.com
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm:	1900	2.5xrent	882	1	5	
Three I		2200	2.5xrent	998	1	7	
Four	Bdrm:		<u> </u>				YES
324 Units @ Mark 82 Units @ 80% A	AMGI to 60% of the total avail:		None	CLUDED:		MINIMUM WESTIMATE MAXIMUM WESTIMATE TO REMAIN ON V	(Months): C
	18 yrs old at time of ap	plication	\\/ A T	LIST FOR PARKING:		CALL EVERY	
submission. Applicants can ap	ply without verifiable res	sidential	PARKING INF		PET INFO) <u>:</u>	PETS OK: YES
history.	ASSET LIMITS:		One stall included for extra stall	uded. \$100/month	Maximum month.	2 pets allowed. \$50) pet rent per
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	_ INFO:	
ASSET LIMIT INF	O:		LEASE:			es - Waipahu St. & ness room, busines	
			6 - 12 month	lease agreements	internet a *Gated co Onsite la	ccess, pool (8ft), was	ading pool (2ft)
INCOME CRITER	IA:				Online pa Dog Park		
2.5 x rent			FURNISHED: Full range, re ceiling fans, a disposal	frigerator, blinds,	,	MPLETED UPDAT	E OCCURRED ON
1-PERSON MAXIM	IUM MONTHLY INCOM	E:					

Last Complete Update:	6/13/2023	AREA: Waianae
ROJECT NAME: OHANA OLA O KAHUM	ANA	PROJECT TYPE: Emergency/1
ADDRESS: 86-704 Lualualei Homestead Rd.		PHONE: 808-696-4095 FAX: 696-7144
CITY: Waianae STATE: H	ZIP : 96792	1000
MANAGER: Desiree Robeinson, Site Manager	APPLY AI	DDRESS:
APPLY TO: Alternative Structures International		APPLICA ACCEPT
APPLY ATTN:		
APPLY PHONE: 808-696-4095	FAX:	EMAIL: Website: www.kahumana.org
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	MINIMUM Number of of People MAXIMUM Number of People: CAREGIVE Allowed:
One Bdrm: 6		4
Two Bdrm: 36		6-8
Three Bdrm: 6 Four Bdrm:		8-10
THE INFO PENT IS SON OF INCOME.		
ENT INFO: RENT IS 30% OF INCOME: YES rogram receives referrals from the state's homeless pordinated entry system only for transitional housing	UTILITIES INCLUDED: Electric and water	TOTAL UNITS: 48 MINIMUM WAIT LIST
nly.		ESTIMATE (Months): MAXIMUM WAIT LIST
		ESTIMATE (Months):
GE CRITERIA: or families with minor children experiencing	WAITLIST FOR PARKING	TO REMAIN ON WAITLIST CALL EVERY (Months):
melessness.	PARKING INFO: NO	PET INFO: PETS OK:
ASSET LIMITS:	included, one stall per unit, guest parking available.	
AN OWN RESIDENTIAL PROPERTY:		GENERAL INFO:
SSET LIMIT INFO:	LEASE:	Referral to Ohana Ola is through the Coordinated Entry System (CES) Transitional housing only.
COME CRITERIA:		*Failure to respond to communication from management, in a timely manner, will result rejection of application.*
	FURNISHED:	NO RESPONSE IN 2023

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	10/24/2023			AREA:	Kakaako
PROJECT NAME:	OLA	KA'ILIMA	ARTSPA	CE LOFTS			PROJECT TYPE:	Family
ADDRESS:							PHONE: 808-439	0-6402
							FAX: (808) 43	
CITY:	Honolul	u	STATE: HI	ZIP:	96814		į (* · · · /	
	Office Honoli : EAH H	Address: 1025 \ ılıı HI 96814 lousing-OLA KA	'ILIMA ARTSF		and submitt https://www s/artspace-	ications can be ted at: .eahhousing.or	•	OUT-OF-STATE APPLICATION ACCEPTED: YES
/		accepted.	.o o), paper	appa		EMAIL:	AL-	
APPLY PHONE	: 808-43	39-6402			FAX: N/A	ı	MANAGEMENT@E	EAHHOUSING.ORG
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:		0					
One E	3drm:		1293	2.5x rent	680-721		3	
Two E	3drm:		1539	2.5x rent	851-1016		5	
Three E	3drm:		1766	2.5x rent	1265-1279		7	
Four E	3drm:		0					YES
RENT INFO: REI One Bedroom 309 AMI - 34 Units - \$ \$1293/mo Two Bedrooms 50 60% AMI - 6 Units	%AMI - 9 1067/mc 0% AMI - - \$1539	9 Units - \$615/m o; 60% AMI - 7 U - 23 Units - \$126 /mo	no; 50% Jnits - 68/mo;	UTILITIES INCI			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	
18+				WAITLIS	ST FOR PARKING:	_	CALL EVERY	
				PARKING INFO	1.20	PET INFO:		PETS OK: YES
AN OWN RESID		SSET LIMITS: . PROPERTY:		Resident parkir	ng garage.	GENERAL	\$250 Pet Deposit. INFO:	
ASSET LIMIT INFO	O:			LEASE:			n completing regula must keep all conta	
				1 Year		well as res manageme Application https://www	pond to communicate in a timely manual services. Online only, at w.eahhousing.org/a	ation from housing ner.*
INCOME CRITERI				ELIDA (101 : E.			asher and dryer fac	
1 30%AMI \$25,400 50% AMI \$42,300 60%AMI \$50,760	\$48,3	000 \$32,650 \$ 50 \$54,400 \$	\$60,400	FURNISHED: Major appliance refrigerator).	es only (stove and	community office; On-	rtyard with playgrou gardens; *On-site site maintenance ONSE IN 2023	
1-PERSON MAXIM	UM MOI	NTHLY INCOME	≣:	0]		

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			lete Update:	5/19/2023			AREA:	
ROJECT NAME:							PROJECT TYPE:	Family
ADDRESS:	265 South	Vineyard St.					PHONE: 808-524	
CITY:	Honolulu		STATE: HI	ZIP:	96813		FAX : 545-52 ²	14
MANAGEF	R: Myrna Cl	hun, Residen	t Mgr.; Sunnie L	ee, COS 524-2731		DRESS: ania St. C101		OUT-OF-STAT
APPLY TO): Urban Re	eal Estate Co).		Honolulu, H			APPLICATION ACCEPTED:
APPLY ATTN	N: Housing	Management	t Department					YES
APPLY PHONE	E: 808-524-	2731 x 3609		F	FAX: 545-5214	EMAIL:	slee@urban-hi.com	1
		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:							YES
	Bdrm:	14	0	NO		1	2	YES
	Bdrm:	13	0	NO		3	6	YES
	Bdrm:	5	0					NO
Four	Burin.							NO
RENT INFO: RE	ENT IS 30%	OF INCOME	YES	UTILITIES INCLU	JDED:		TOTA	AL UNITS: 32
				Water			MINIMUM W	
							ESTIMATE	
							MAXIMUM W ESTIMATE	
AGE CRITERIA:							TO REMAIN ON W	
Head of househol	ld must be '	18 years or ol	lder	WAITLIST	T FOR PARKING:		CALL EVERY	(Months):
				PARKING INFO: Parking included		PET INFO:	F	PETS OK: NO
			luous.	parking is availab				
AN OWN RESI		SET LIMITS:				JENERAL	INFO:	
ASSET LIMIT INF		TOT ZITT	1.20	LEASE:			Section 8 100%	
				1 year		Application Send requences envelope	n: lest with self addres	ssed stamped
NCOME CRITER	RIA:			1				
SIMILEN				FURNISHED:				
				Partly furnished- appliances only.				
-PERSON MAXIN	MUM MONT	THLY INCOM	E:	2288]		
-PERSONS MAX	IMUM MON	ITHLY INCO	ME:	2617				

	Last Comple	ete Update:	10/24/2023				AREA:	Kalaeloa
PROJECT NAME:	ONELAU'ENA -	Hope for a	a New Be	ginnin	g		PROJECT TYPE:	Emergency/Transi
ADDRESS:	50 Belleau Woods St.						PHONE: 808-782	-4342
CITY:	Kapolei	STATE: HI	ZIP:		96707		FAX: 682-542	18
OII I.	rapolei	OTATE: FI			96707			
MANAGER	: Tanya Tehotu, Executi	ve Director			PPLY AD			
APPLY TO): Kealahou West Oʻahu				/-132 Fari /aianae, F	rington Hwy H 96792		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	1: No action required unle	ess updating con	tact info					
APPLY PHONE	E: 808-782-4342			FAX : 68	2-5428	EMAIL:	t.tehotu@kwohawa	ii.org
Unit	Type: Number		Minimum			MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SC	Q FT:	of People	People:	Allowed:
	tudio:							
	Bdrm:			_ _				
Three	Bdrm:			- -				
	Bdrm:							NO
1 100			,			,		IVO
	NT IS 30% OF INCOME pant) dorm; Female (sing		JTILITIES INC	CLUDED:				L UNITS: 61
occupant) dorm; S	Studio (1-3 ppl); ADA stud Bppl); Family unit (1-4ppl)	dio (1-3ppl)	· ui				MINIMUM W. ESTIMATE	
Large family unit (MAXIMUM W ESTIMATE	
AGE CRITERIA:							TO REMAIN ON W	
	d must be 18 at time of a pleted upon eligibility of	placement.		IST FOR P	ARKING:		CALL EVERY	
Applicants must has Multi-family unit (ave verifiable residential 6-12ppl) \$150/mo		PARKING INF 1 assigned pa			PET INFO:	F	PETS OK: UNKNO
ı	ASSET LIMITS:			9				
AN OWN RESID	DENTIAL PROPERTY:					GENERAL	INFO:	
ASSET LIMIT INF	O:		EASE:			Need to go	o through Kealahou	West Oʻahu
							omeless - preferenc Coast, but will place	
INCOME CRITER	10.						amilies with minor cl ren (18+), couples v	
INCOME CRITER	IA.		URNISHED:			and single Application	s n:	·
							om Kealahou West	
<u> </u>								

1-PERSON MAXIMUM MONTHLY INCOME.

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	lete Update:	10/24/2023			AREA:	Kalaeloa
PROJECT NAME:	ONEM	ALU - Tr	ansitiona	l shelter			PROJECT TYPE:	Transitional
ADDRESS:	48 Belleau	Woods St.					PHONE: 808-682	2-5868
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 682-542	28
	rapoloi				00101			
MANAGER	t: Tanya Te	hotu			APPLY ADD			
APPLY TO):				P.O. Box 75 Kapolei, HI			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 682-5868	1			FAX: 682-5428	EMAIL:		
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	11			267	2	4	
One I	Bdrm:	5			329	3	5	
Two I	Bdrm:	26			535	4	8	
Three I	Bdrm:							
Four I	Bdrm:							
RENT INFO: RE Unit size determin Must be family wit age. *All units rent base Market rate: \$750/	ed by family h at least of ed on 30% of month	y size. No S ne child 0 to of client inco	ingles. 17 years of	UTILITIES INC Water and elec			TOTA MINIMUM W. ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA:							TO REMAIN ON W	/AITLIST
Head of household of application subr		8 years or ol	der at time	WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
Application is prov	rided to hea	d of househo	old upon	PARKING INFO		PET INFO): F	PETS OK: NO
JP 400 5 10 10 0 2 1		ET LIMITS:	NONE		current reg, safety ce, and driver's			
AN OWN RESID		ROPERTY:				GENERAL	_ INFO:	
ASSET LIMIT INFO	O:			LEASE:		NEED: TI verified	B clearance, inc veri	fied, disability
				4-month progra		Communumit. Exp	s must participate in al kitchen, but micro ress bus from Kapol takes app. 30 min F	+ minifridge in ei transit center to
Must provide verifi		onthly incom	e that	FURNISHED:		'	Units - studio (1) + :	2 hedroom (1)
confirms the applic program fee while family. No max in	cant's ability meeting ba	y to afford the asic needs of	e monthly	Yes. Beds allo inspection. No furniture.		A homele	ess verification letter	needs to be
						ľ	PONSE SINCE 2022	

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	5/8/2023			AREA	: Waianae	
PROJECT NAME:	PAI'OLU KAIA	ULU (Wai	anae Civic	Center)		PROJECT TYPE	: Emergency/Transi	
ADDRESS:	85-638 Farrington Hwy	/				PHONE: 808-66	4-1400 808-696-	
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 696-67	11	
MANAGER	: Program Manager: C Executive Director: Ta		1	APPLY AD	DRESS:		OUT-OF-STATE	
APPLY TO:	: Need to be assessed Info below) if homeles	by Service Pro	viders (see Gener	ral			APPLICATION ACCEPTED:	
APPLY ATTN:	:						NO	
APPLY PHONE	: 808-688-7631			FAX : 696-6711	EMAIL:	CRobinson2@us.v	vets.org	
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	3drm:							
Two E	Bdrm:							
Three E	3drm:							
Small (45) - 8 ftx10 Medium (20) - 10ft: Large (32) - 12ftx1:	NT IS 30% OF INCOM of t (80 sq ft) \$120 - 1 p x12ft (120 sq ft) \$150 2ft (144 sq ft) \$150 - 3 its. Emergency Shelter	erson - 2 persons persons	UTILITIES INCI Electricity, wate Public telephon	er, and sewer.		MINIMUM V ESTIMATE MAXIMUM V	(Months):	
AGE CRITERIA:			je.			TO REMAIN ON V	,	
-	accompanied by legal	guardians		ST FOR PARKING:		CALL EVERY	(Months):	
	ASSET LIMITS:	NONE	PARKING INFO Parking for veh safety check, re insurance.	icles with valid	PET INFO:		PETS OK: NO	
	ENTIAL PROPERTY:				GENERAL			
ASSET LIMIT INFO	D:		LEASE:			Coast Comprehens	sive Health Center:	
			None		" '	559; 696-1586		
			1			Community Outrea		
INCOME CRITERIA	A:		FURNISHED:			ealth Center - Care		
None			1 bed, additional cots. Cubicl			ministered by US Veterans Initiative bicle like units. Community bathrooms, mmunity Meals		

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 EMAIL: mschousing@hawaii.rr.com FAX: 946-0572 EMAIL: mschousing@hawaii.rr.com Minimum INCOME SQ FT: Minimum Number of People			Last Comp	lete Update:	9/27/2023			AREA:	Kapolei
MANAGER: Angela Akiona - Community Director APPLY ADDRESS: 1330 S. Beretania St. #200 Hon. HI 96814 APPLY ATTN: Affordable Housing Dept. APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 EMAIL: mschousing@hawail.rr.com Pacple: Allo APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 EMAIL: mschousing@hawail.rr.com Number of of Unit Type: of Unit	OJECT NAME:	PALE	HUA TEF	RRACE PH	. 1			PROJECT TYPE:	Family
MANAGER: Angela Akiona - Community Director MANAGER: Angela Akiona - Community Director APPLY ADDRESS: 1330 S. Beretania St. #200 Hon. HI 96814 APPLY ATTN: Affordable Housing Dept. APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 EMAIL: mschousing@hawaii.rr.com FAX: 946-0572 EMAIL: mschousing@hawaii.rr.com Minimum INCOME Required: SQ FT: Number of People: Peopl	ADDRESS:	92-1074	Palahia St.					PHONE: 808-67	2-5602
APPLY TO: Management Specialists Co. APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 Minimum INCOME Required: SQ FT: MINIMUM MAXIMUM Number of of People: Allo People: People: Allo People: People: Allo People: People: Allo People: People:	CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 672-56	46
APPLY TO: Management Specialists Co. APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 Unit Type: Of UNITS: Of UNITS: RENT: Of UNITS: RENT: Of UNITS: RENT: Of UNITS: RENT: Of People: Of UNITS: RENT: OF People: Of UNITS: RENT: OF People: Of UNITS: OF People: OF OF People: OF OF People: OF	MANAGER:	: Angela	Akiona - Com	munity Director				Hon. HI	OUT-OF-STATI
APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 Unit Type: Number of UNITS: RENT: Minimum NCOME SQ FT: Minimum Number of People: Allor People: Studio: Stud	APPLY TO:	: Manag	ement Speciali	ists Co.		96814			APPLICATION ACCEPTED:
APPLY PHONE: 808-949-7611 x131 FAX: 946-0572 Unit Type: Number of UNITS: RENT: RENT: RENT: RENT: Required: SQ FT: MINIMUM Number of People: Allor People: Required: SQ FT: Rent IS SQ FT:	APPLY ATTN:	: Afforda	ble Housing D	ept.					YES
One Bdrm: Two Bdrm: 7 1468 2700 1037 YE Four Bdrm: 7 1468 2700 1037 YE RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: Water Water Water Walt ILIST FOR PARKING: PARKING: PARKING: PARKING: PARKING INFO: PET INFO: PET Sok: Service animals ok ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: 1 year Partly furnished—major appliances only INCOME CRITERIA: FURNISHED: Partly furnished—major appliances only	APPLY PHONE:	: 808-94	9-7611 x131			FAX: 946-0572	EMAIL: m	schousing@haw	aii.rr.com
One Bdrm: Two Bdrm: Two Bdrm: 7				RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
Two Bdrm: 76									
Three Bdrm: 7 1468 2700 1037 YE Four Bdrm: 7 1468 2700 1037 YE RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: TOTAL UNITS: MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): PARKING INFO: PETS OK: 2 stalls per unit ASSET LIMIT INFO: LEASE: 1 year NCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 Partly furnished—major appliances only									VEC
Four Bdrm: RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: Water Water MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST CALL EVERY (Months): PARKING INFO: PARKING: PARKING: PARKING: PARKING: PARKING: PET INFO: PET INFO: PET INFO: PET INFO: PET INFO: Service animals ok GENERAL INFO: Funding: RHTF Accepts Section 8 Credit checks through Equifax INCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$62700 3 persons \$70560									YES
RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: TOTAL UNITS: Water MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): CALL EVERY (Months): PARKING INFO: PET INFO: PETS OK: Service animals ok ASSET LIMIT INFO: LEASE: Funding: RHTF Accepts Section 8 Credit checks through Equifax INCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$62700 3 persons \$70560			7	1468	2700	1037			120
Water MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): CALL EVERY (Months): CALL EVERY (Months): PET INFO: PETS OK: Service animals ok Service ani	Four B	sarm:					J		
WAITLIST FOR PARKING: PARKING INFO: PET INFO: PETS OK: Service animals ok Service animals ok GENERAL INFO: Funding: RHTF Accepts Section 8 Credit checks through Equifax INCOME CRITERIA: 1 person \$54900 2 persons \$62700 3 persons \$70560					Water		1	ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON V	(Months): 12 /AIT LIST (Months): 12 VAITLIST
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: 1 year INCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 2 stalls per unit Service animals ok GENERAL INFO: Funding: RHTF Accepts Section 8 Credit checks through Equifax	ead of household	I must be	e 18 years or o	lder			-		
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: 1 year NCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 GENERAL INFO: Funding: RHTF Accepts Section 8 Credit checks through Equifax									PETS OK: NO
LEASE: 1 year NCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 LEASE: Funding: RHTF Accepts Section 8 Credit checks through Equifax FURNISHED: Partly furnishedmajor appliances only		AS	SSET LIMITS:	NONE	2 stalls per un		Oct vice ariii	nais ox	
LEASE: 1 year Credit checks through Equifax NCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 LEASE: Accepts Section 8 Credit checks through Equifax Purnished: Partly furnished: appliances only			PROPERTY:	NO					
NCOME CRITERIA: 60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 Credit checks through Equifax FURNISHED: Partly furnishedmajor appliances only	SSET LIMIT INFO	J:							
60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 FURNISHED: Partly furnishedmajor appliances only					1 year		Credit chec	ks through Equifa	x
1 person \$54900 2 persons \$62700 3 persons \$70560 Partly furnishedmajor appliances only	ICOME CRITERIA	A:							
4 persons \$78360	person \$54900 persons \$62700 persons \$70560				Partly furnishe				
-PERSON MAXIMUM MONTHLY INCOME: 4575	PERSON MAXIMU	UM MON	ITHLY INCOM	E:	4575]		

		Last Comp	lete Update:	9/27/2023			_	AREA:	Kapolei
PROJECT NAME:	PALE	HUA TEF	RACE PH	. 2			PROJEC	T TYPE:	Family
ADDRESS:	92-1074	Palahia St.					PHONE:	808-672	2-5602
CITY:	Kapolei		STATE: HI	ZIP:	9670	07	FAX:	672-560	02
MANAGER	R: Angela	Akiona - Com	munity Director			_Y ADDRESS: S. Beretania St.	#200 Hop HI		OUT-OF-STATE
APPLY TO): Manag	ement Speciali	sts Co.		9681		. #200 Hon. Hi		APPLICATION ACCEPTED:
APPLY ATTN	N: Afforda	ble Housing D	ept.						YES
APPLY PHONE	E : 808-94	9-7611 x131			FAX: 946-0		AIL: mschousin	g@hawa	aii.rr.com
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ F1	MINIMI Numb of Peo	oer Numb		CAREGIVER Allowed:
	Studio:					_			
	Bdrm:								
	Bdrm:	57	1260	2.25xRen		_			
Three		7	1400	2.25xRen	t 948		=		
Four	Bdrm:								
RENT INFO: RE 7 units at 30% AN			110	Water	OLOBED.		ES [*]	IMUM W TIMATE IMUM W	AL UNITS: 64 AIT LIST (Months): 12 AIT LIST (Months): 36
AGE CRITERIA:				i.			TO REMA		. ,
Head of househol	d must be	e 18 years or o	lder	WAITI	LIST FOR PAR	KING.			(Months):
				PARKING INI		PET II	NFO:	F	PETS OK: NO
				Parking inclu	ded	Servio	ce animals ok		
4A1 0MA1 DE0U		SSET LIMITS:				O ENE			
AN OWN RESII ASSET LIMIT INF		PROPERTY:	NO	15405			RAL INFO:	icnic Are	ea
				1 year		All un Credi	nits have 2 bathr it check through pts Section 8	ooms	
INCOME CRITER	IA:					Fundi	ing: RHTF		
60% of AMI: 1 person \$54900 2 person \$62700 3 person \$70560 4 persons \$78360				Partly furnish appliances of	edmajor				
 -PERSON MAXIM	MUM MON	NTHLY INCOM	E:	4575					
P-PERSONS MAX	IMUM MC	NTHLY INCO	ME:	5225					

	Last Comp	plete Update:	12/15/2021			AREA:	Palolo
PROJECT NAME:	PALOLO VAL	LEY HOME	S (HPHA-	hon) - NOT A	CCE	PROJECT TYPE:	
ADDRESS:			(PHONE: 808-733	3-9113
ļ						FAX:	
CITY:	Honolulu	STATE: HI	ZIP:	96816		,	
MANAGER:	: Kelsie Tilton			APPLY ADD			0117 05 07175
ADDLYTO	LIDITA			1002 North (Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO:	NOT ACCEPTING A	PPLICATIONS		NOT ACCE	PTING APPLIC	CATIONS	ACCEPTED:
APPLY ATTN:	: Oahu applications of						NO
	NOT ACCEPTING A	PPLICATIONS			EMAIL: h	nphaishereforyou.o	rg
APPLY PHONE:	: 808-832-5961			FAX: 832-3461			
Unit .	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
St	udio:						
One B	Bdrm: 8	0		513	1	4	YES
Two B	34 34	0		676	2	6	YES
Three B	3drm: 40	0		1045	3	8	YES
Four B	32 32	0		1147	4	10	YES
, ,			,	,	,	,	
RENT INFO: REN	NT IS 30% OF INCOM	IE: YES	UTILITIES INC	CLUDED:	_	TOTA	L UNITS: 118
5 Bedroom Units a Minimum Rent: \$0	lso available for Federal Low Incon	ne projects	Water and allo	owance for electricity		MINIMUM W	(8.4 (1)
**************************************		, ,				ESTIMATE	
323323	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
Head of household	I must be 18 years or o	older	WAITL	IST FOR PARKING:		CALL EVERY	(Months):
			PARKING INF	O: NO	PET INFO:		PETS OK: YES
ļ			Included		With Permi	t	
	ASSET LIMITS:	NONE			J		
AN OWN RESID	ENTIAL PROPERTY:	NO			GENERAL		F-1
Cannot own a house			LEASE:		homeless i	NCES: Domestic V n transitional shelte	
			1 year		displaced.		
]					Funding: F	ed Low Inc Pub Hs	sing 100%
INCOME CRITERIA	A:					ons must be 3 yrs a	
ncome Eligibility = Maximum Annual I	80% of AMI ncome: 1 person - \$53	3,250;	FURNISHED: Partly furnished	ad major	Joryotai met	ap.rotao	
4 persons - \$76,10	0; 3 persons - \$68,500 0; 5 persons - \$82,200	0;	appliances on				
6 persons - \$88,30 8 persons - \$100,4	0; 7 persons - \$94,350 50	0;					
1-PERSON MAXIMU	UM MONTHLY INCOM	ME:	4570				
2-PERSONS MAXIN	MUM MONTHLY INCO	DME:	5220				

Last Co	AREA	Palolo				
PROJECT NAME: PALOLO VA	LLEY HOME	S I			PROJECT TYPE	Family
ADDRESS: 2170 Ahe St. CITY: Honolulu	STATE: HI	ZIP:	96816		PHONE: 808-73 FAX: 735-52	
MANAGER: Wanda Samson - APPLY TO: Mutual Housing Astronomes, L.P.		dba Palolo Valley	APPLY ADI 2170 Ahe S Honolulu, H	St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN: APPLY PHONE: 808-733-8650		F	AX: 735-5211	EMAIL:	wsamson@mutua	l-housing.org
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm: 9 Two Bdrm: 64 Three Bdrm: 9 Four Bdrm: 1	668 849 1068		604 860	2 3	6 8	YES YES YES NO
RENT INFO: RENT IS 30% OF INCO	; potential	UTILITIES INCLL Water	JDED:		MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	/AIT LIST (Months): 72
AGE CRITERIA: Head of household must be 18 years of applying. Applicants must have verifiable reside	ntial history.	WAITLIST PARKING INFO: Every unit given	FOR PARKING:	PET INFO	TO REMAIN ON \ CALL EVERY : nimals Only - MD N	(Months): 12 PETS OK: NO
ASSET LIMIT AN OWN RESIDENTIAL PROPERT ASSET LIMIT INFO: Cannot own a house. Assets limited t applicable income for admission or thr limit for continued occupancy.	Y: NO o two times the	LEASE: 1 year; then mon	th-to-month	GENERAL Funding: Funding: Applicatio Available	LIHTC RHTF	office
INCOME CRITERIA: Maximum Annual Income: 1 person - 9 2 persons - \$31,350; 3 persons - \$35,4 4 persons - \$39,180; 5 persons - \$42,6 6 persons - \$45,450; 7 persons - \$48,6 8 persons - \$51,720; 9 persons - \$54,6	280; 330; 600;	FURNISHED: Partly furnished appliances only	major			
T-PERSON MAXIMUM MONTHLY INC	OME:	2287				

	Last Comp	olete Update:	5/16/2023			AREA:	Palolo
PROJECT NAME:	PALOLO VAL		PROJECT TYPE:	Family			
ADDRESS:	2170 Ahe St.					PHONE : 808-733	3-8650
CITY:	Honolulu	STATE: HI	ZIP:	96816		FAX: 735-521	1
	1						
MANAGER	R: Wanda Samson, Pro	pporty Mar		APPLY AD			
APPLY TO	Mutual Housing Assortions, Fig. Homes, L.P.		i dba Palolo Valley	2170 Ahe S Honolulu, F			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	·						
APPLY PHONE	E: 808-733-8650		F	AX : 735-5211	EMAIL:	wsamson@mutual-	housing.org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	studio: 5Bdrm 8	1511	Troquilou.	1345	5	12	
One I	Bdrm: 16	668		478	1	4	YES
Two	Bdrm: 64	849		647	2	6	YES
Three I	Bdrm: 76	1068		880	3	8	YES
Four	Bdrm: 60	1286		1100	4	10	NO
Palolo Homes doe pulled from Section	NT IS 30% OF INCOMes not have a waitlist; non 8 waitlist and units, additional parti	ames are	Water	DLD.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	
applying.	d must be 18 years or o		_	FOR PARKING:	PET INFO		(Months): 12 PETS OK: NO
Applicants must n	ave verifiable residentia	ai nistory.	PARKING INFO: Every unit given of	only 1 stall		nimal ONLY - MD no	
	ASSET LIMITS:	YES					
	DENTIAL PROPERTY:	NO			GENERAL		
	ise. Assets limited to tw		LEASE:	h ta a th	Funding: Funding:		
applicable income limit for continued	for admission or three occupancy.	times that	1 year; then mont	n-to-month	Application Program	ons available through	Section 8
INCOME CRITER					NO RESP	PONSE 2021	
2 persons - \$31,35 4 persons - \$39,15 6 persons - \$45,45	Income: 1 person - \$27 50; 3 persons - \$35,280 80; 5 persons - \$42,330 50; 7 persons - \$48,600 20; 9 persons - \$54,852);););	FURNISHED: Partly furnished appliances only	major			
1-PERSON MAXIM	IUM MONTHLY INCOM	ΛΕ:	2287		Į.		
2-PERSONS MAXI	MUM MONTHLY INCC	ME:	2612				

	Last Comp	lete Update:	12/15/2021			AREA:	McCully
PROJECT NAME:	PAOAKALANI	(HPHA-hor	n) - NOT A	CCEPTING A	PPLI	PROJECT TYPE:	
	1583 Kalakaua Ave.	(11111111111111111111111111111111111111	.,		<u> </u>	PHONE: 808-973	
						FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96826		,	
MANAGER	: Ioane Ah Sam			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	· HDHA			Honolulu, HI	96817		APPLICATION
ALLETTO	NOT ACCEPTING AF	PPLICATIONS		NOT ACCPE	PTING APPLI	CATIONS	ACCEPTED: NO
APPLY ATTN	I: Oahu applications offi NOT ACCCEPTING A						
APPLY PHONE				FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
ATTENTIONE	000 002 000			170. 002 0.0.			
Unit	Type: Number	25115	Minimum INCOME	00.55	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio: 90	0		315	1	2	YES
One I	Bdrm: 60	0		465	1	4	YES
Two	Bdrm:						
Three I	Bdrm: 1						
Four I	Bdrm:						
	NT IS 30% OF INCOME for Federal Low Income 8/2/2016******		UTILITIES INC Electricity and			TOTA MINIMUM W. ESTIMATE MAXIMUM W.	(Months): 24
]		, l				ESTIMATE	(Months): 60
	d or spouse must be 62	2 years or	WAITLI	ST FOR PARKING:	ד	TO REMAIN ON W CALL EVERY	
older, or disabled			PARKING INFO		PET INFO:	F	PETS OK: YES
<u> </u>			Included		Small pets	under 25 lbs. only	
	ASSET LIMITS:	NONE					
	DENTIAL PROPERTY:	NO			GENERAL I		
Cannot own a hou			LEASE:		homeless ir	NCES: Domestic V n transitional shelte	
			1 year		displaced.		
J						s, under age 62 spo ng: Fed Low Inc Pu	
INCOME CRITERI					All conviction	ons must be 3 yrs a	ago, unless it's
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250; ;	FURNISHED: Partly furnishe appliances onl			namphetamine or s	
	IUM MONTHLY INCOM		4570		-		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	10/19/2023			AREA:	Chinatown
PROJECT NAME:	PAUAHI HALE					PROJECT TYPE:	Family
ADDRESS:	126 North Pauahi St.					PHONE: 808-52	4-7233
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
	: Bill Hanrahan, Manage	er		APPLY ADD	PRESS: ani Blvd., Suite	345	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Melby Albano						AGGET TEB.
APPLY PHONE	:: 808-737-2523		F.	AX:	EMAIL: r	malbano@mhkhav	vaii.org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 38	760		120	1	1	YES
One I	Bdrm:						
Two I	Bdrm:						
Three B	Bdrm:						
Four I	Bdrm:						
Minimum rent \$30 15 units must be o \$300 minimum rer equivalent of one r AGE CRITERIA:		o pay the	UTILITIES INCLU Electricity and wa			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 6 /AIT LIST (Months): 12 VAITLIST
Must be over the a	OCCUPANCY (SRO) age of 18		_	FOR PARKING:			,
	ASSET LIMITS:	NONE	PARKING INFO: Not included. Av door for \$40/mon		PET INFO:		PETS OK: NO
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO	O:		LEASE: 1 year				
INCOME CRITERI	IA:		r		Application		
Maximum Annual 50% area AMI)	Income: 1 person - \$40,	260 (below	FURNISHED: Unfurnished.		1 '	m Manager's Offic DNSE IN 2023	e
-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u>	3355				

2-PERSONS MAXIMUM MONTHLY INCOME:

Las	t Complete Update:	4/19/2024			AR	EA: Makiki
PROJECT NAME: PIIKOI VI	STA				PROJECT TY	,
ADDRESS: 1326 Piikoi St.					PHONE: 808	-585-8882
CITY: Honolulu	STATE: HI	ZIP:	96814		FAX : 521	-6897
MANAGER: Paul Hobson				ADDRESS: ahulu Avenue, I	Honolulu HI	OUT-OF-STATE
APPLY TO: Locations			96815	andia / (vende, i	rionolala, rii	APPLICATION ACCEPTED:
APPLY ATTN: Property Mana	agement Division					YES
APPLY PHONE: 808-585-8882			FAX: 808-521-6		ble-rentals.asp	tionsrentals.com/afforda x Loostionshoweii.com
Unit Type: Num of UN Studio:		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number o	f CAREGIVER
One Bdrm: 47	7 1225	2xrent	420			
Three Bdrm:						YES
RENT INFO: RENT IS 30% OF I Food stamps can be used to mee Section 8 certificate holders need gross income requirement.	t min. income.	UTILITIES INC Electric, water,			MINIMUI ESTIMA MAXIMUI	OTAL UNITS: 47 M WAIT LIST ATE (Months): 3 M WAIT LIST ATE (Months): 36
AGE CRITERIA:					TO REMAIN O	
All residents must be 55 or older. Does not require verifiable resider	ntial history	PARKING INFO		PET INF		PETS OK: NO
ASSET L AN OWN RESIDENTIAL PROP ASSET LIMIT INFO: All income from assets is counted eligibility.		\$40 per month all stalls are as occupancy is r tenants withou quest parking	restricted to it cars; some	GENERA Opened Has Vic Commu		ed entry doors, vities, Social Worker
INCOME CRITERIA: 50% AMI: 1 person \$48,750; 2 pe	rsons \$55,700		dmajor nyl floording, AC, d garbage disposa	Applicat Downloa Ask mai Send re envelop	r, Short walk to gritaurants. tion: ad from website nagement to mail quest with self-ad	ldressed stamped
-PERSON MAXIMUM MONTHLY	INCOME:	4063				

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4642

		Last Comp	lete Update:	4/23/2024			AREA:	Kakaako
PROJECT NAME:	POH	JLANI EL	PROJECT TYPE:	Elderly				
ADDRESS:	626 Cor	al St.					PHONE: 808-744	4-6063
CITY:	Honoluli	1	STATE: HI	ZIP:	96813		FAX: 744-658	32
	rioriolaid	u .			30010			
MANAGER	R: DeAnn	Auwae, Mana	ger			ADDRESS: al St. Ste. #507		OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	perties Inc.		Honolulu	ı, HI 96813		APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	E: 808-74	4-6063			FAX : 744-6582		http://hawaiiafforda properties/	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	128	1350	2.5 x rent	425	1	2	YES
One I	Bdrm:	135	1493	2.5 x rent	454	1	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 263
Deposit=same as	rent; acc	epts section 8		Electricity and			MINIMUM W	Į.
No action required information or in re	esponse						ESTIMATE	(Months): 0
Applicaton fee - \$0	U			<u> </u>			MAXIMUM W ESTIMATE	
AGE CRITERIA:							TO REMAIN ON W	
All household mer application. Careg				WAITL	IST FOR PARKIN	IG:	CALL EVERY	
Does not require v	verifiable	residential hist	ory.	PARKING INF	1	PET INFO): F	PETS OK: YES
1			lugue -	month; parkin	n-site parking; \$42 ig at Kauhale 544.88/mo (call	2		
AN OWN RESI		SSET LIMITS: PROPERTY:		District prking		GENERAI	INFO:	
ASSET LIMIT INF				I FASE:		Cargivers	are allowed in both	
Cannot own a majority interest in residential property in fee simple or leasehold, usuitable for a dwelling			LEASE: with			etter; cannot work o all system; Secure o		
unit within the same county.			Stud			s lanai; 3 elevators Meals on Wheels m		
INCOME CRITER	IA:			1		Catholic (tation to Shopping a Charities Hawaii	•
Maximum Annual	Income:			FURNISHED:		Funding: opened 1	State Rental Assista 992	ance 100%
1 person - \$78,000 rsons - \$89,120			Partly furnishedmajor Rec			with lap pool, joggir Itipurpose room	ng path, garden	
Note: Minimum In minimum rent	ncome Re	equired is 2.5 x	the	cable ready, t amount of) wa	ub or (limited			
" 1-PERSON MAXIM	NOM MUI	NTHLY INCOM	IE:	6500		je.		
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	7427				

	Last Complete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HOMES I (HP	HA) - NOT	ACCEPTING A	APP I	PROJECT TYPE:	-
	1638 - 1699 Ahiahi Pl.				PHONE: 808-832	2-3336
	<u></u>				FAX: 832-338	
CITY:	Honolulu STATE: HI	ZIP:	96817		,	
MANAGER	t: Julie Wiggett		APPLY ADDI			
APPLY TO): NOT ACCEPTING APPLICATIONS		1002 North S Honolulu, HI NOT ACCI		ICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: NOT ACCEPTING APPLICATIONS (Oahu applications office)					NO
APPLY PHONE	: 808-832-5961		FAX: 832-3461	EMAIL: h	ohaishereforyou.o	rg
Unit	Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:					
	Bdrm:	<u> </u>				
Three I						
Four I	Bdrm: 14 0		1116	4	10	YES
14 five bdrm units. Minimum Rent: Or Three Bdrm - \$152 funding source: sta	ne Bdrm - \$108; Two Bdrm - \$128; 2; Four Bdrm - \$180	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W.	(Months): 36 AIT LIST (Months): 60
	d must be 18 years or older	\A/A T	ICT FOD DADIVING		CALL EVERY	
		PARKING INF	O: PARKING:	PET INFO:	F	PETS OK: NO
1	ASSET LIMITS: YES	incidaea				
AN OWN RESID	DENTIAL PROPERTY: NO			GENERAL II	NFO:	
ASSET LIMIT INFO		LEASE:			JSING PREFERE	
times the applicab	use on Oahu. Assets limited to two ble income for admission or three continued occupancy.	1 year		Veterans w/ Families of was determ	rly 2.) The Displace service connected deceased veteranged to be service ans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI	IA:				Shelters 7.) All ot	
50% AMI: 1 perso persons \$42,800;	n \$33,300; 2 persons \$38,050; 3 4 person \$47,550.	FURNISHED: Partly furnishe appliances on		Funding: St	ate Pub Hsing 100 ns must be 3 yrs o	
1-PERSON MAXIM	IUM MONTHLY INCOME:	3450		J		
2-PERSONS MAXI	MUM MONTHLY INCOME:	4895				

	Last Cor	mplete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA H	OMES II (HP	HA) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahiahi Pl.					PHONE: 808-832	2-3336
CITY.	J	STATE: UII	71D. F	20247		FAX: 322-063	32
CITY:	Honolulu	STATE: HI	ZIP:	96817			
MANAGER	: Julie Wiggett			APPLY ADI		0.4.7.0.1.0	0117 05 07175
APPLY TO	A NOT ACCEPTING	ADDI ICATIONIC		1002 North	PTING APPLI School St.	CATIONS	OUT-OF-STATE APPLICATION
APPLY IO	: NOT ACCEPTING	APPLICATIONS		Honolulu, H	I 96817		ACCEPTED:
APPLY ATTN	: NOT ACCEPTING						NO
	(Oahu applications	office)			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	:: 808-832-5961			FAX : 832-3461			
Linit	Type: Number		Minimum		MINIMUM	MAXIMUM	Total and the
	Type: Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
	tudio:	-	rtequired.		от георіе	т соріс.	
	Bdrm:						VE2
Two I	Bdrm: 12	0		676	2	6	YES
Three I	Bdrm: 8	0		940	3	8	YES
Four I	Bdrm:						
Minimum Rent: Or Three Bdrm - \$152 funding source: sta	NT IS 30% OF INCO ne Bdrm - \$108; Two 2; Four Bdrm - \$180 ate CLOSED 8/2/2016***	Bdrm - \$128;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	
-	d must be 18 years o	r older	\\/ \ I T I	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	: F	PETS OK: NO
			Included				
	ASSET LIMITS	S: YES					
AN OWN RESID	DENTIAL PROPERTY	Y: NO			GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:			OUSING PREFERE lerly 2.) The Displace	
times the applicab	se on Oahu. Assets le income for admiss continued occupancy	ion or three	1 year		Veterans versions of the veteral veter	w/ service connecte of deceased veteran mined to be service erans 6.) Families re	d disabilities 4.) s whose death connected. 5.) esiding in
INCOME CRITERI	IA:				Transition: Wait	al Shelters 7.) All of	hers - Indefinate
50% AMI: 1 perso persons \$42,800;	n \$33,300; 2 persons 4 person \$47,550.	: \$38,050; 3	Partly furnishe appliances on		Funding: \$	State Pub Hsing 100 cions must be 3 yrs	
1-PERSON MAXIM	IUM MONTHLY INCO	DME:	3450]		
2-PERSONS MAXI	MUM MONTHLY INC	COME:	4895				

	Last Comp	lete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HOI	MES III (HPI	HA) NOT A	CCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahiahi Pl.					PHONE: 808-832	2-3336
CITY	Honolulu	STATE: HI	ZIP:	96817		FAX: 832-338	35
3 111.	lionoidia	OTATE: IT		90017			
MANAGER	t: Julie Wiggett			APPLY ADD	PRESS:	CATIONS	OUT-OF-STATE
APPLY TO	: NOT ACCEPTING AF	PPLICATIONS		1002 North S Honolulu, HI			APPLICATION ACCEPTED: NO
APPLY ATTN	I: NOT ACCEPTING AF Oahu applications offi				EMAU.	hahaish sasfamasa	
APPLY PHONE	: 808-832-5961		ı	FAX: 832-3461	EWAIL:	hphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						V50
	Bdrm: 10	0		504	1	4	YES
	Bdrm: 14	0		676	2	6	YES
Three		0		940	3	8	TES
Four	Bdrm:						
Minimum Rent: Or Three Bdrm - \$15: funding source sta	NT IS 30% OF INCOME ne Bdrm - \$108; Two Bo 2; Four Bdrm - \$180 ate CLOSED 8/2/2016******	drm - \$128;	ITILITIES INCL Vater and allow and gas	UDED: ance for electricity		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	Į.
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
	ASSET LIMITS:	YES					
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O: ise on Oahu. Assets lim	L L	EASE:			OUSING PREFERE lerly 2.) The Displac	
times the applicab	ole income for admission continued occupancy.		1 year		Veterans versions of the Veterans versions of the Veterans versions versions versions versions veterans versions veterans versions version	w/ service connecte of deceased veteran mined to be service erans 6.) Families re	d disabilities 4.) s whose death connected. 5.) esiding in
INCOME CRITER					Transition Wait	al Shelters 7.) All ot	hers - Indefinate
	n \$33,300; 2 persons \$3 4 person \$47,550.	Ī	EURNISHED: Partly furnished- appliances only	major		State Pub Hsing 100 cions must be 3 yrs	
1-PERSON MAXIM	IUM MONTHLY INCOM	E: 3	3450				
2-PERSONS MAXI	MUM MONTHLY INCO	ME: 4	1895				

Lood Commission Underto	10/15/0001				
Last Complete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME: PUAHALA HOMES IV (H	PHA) - NO	T ACCEPTING	S AP	PROJECT TYPE:	Family
ADDRESS: School St. and Lanakila Ave.				PHONE: 808-832	
CITY: Honolulu STATE: HI	ZIP:	96817		FAX : 322-063	2
	,				
MANAGER: Julie Wiggett		APPLY ADD	RESS:		
		NOT ACCEF 1002 North S	PTING APPLIC	ATIONS	OUT-OF-STATE APPLICATION
APPLY TO: NOT ACCEPTING APPLICATIONS HPHA		Honolulu, HI			ACCEPTED:
APPLY ATTN: NOT ACCEPTING APPLICATIONS					NO
Oahu applications office			EMAIL: h	nphaishereforyou.o	rg
APPLY PHONE: 808-832-5961		FAX: 832-3461			
Unit Type: Number	Minimum		MINIMUM	MAXIMUM	CAREGIVER
of UNITS: RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
Studio:					
One Bdrm: 4 0		519	1	4	YES
Two Bdrm: 32 0		662	2	6	YES
Three Bdrm: 4 0		808	3	8	YES
Four Bdrm:					
RENT INFO: RENT IS 30% OF INCOME: YES Minimum Rent: One Bdrm - \$108; Two Bdrm - \$128; Three Bdrm - \$152 ******************CLOSED 8/2/2016************************************	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	-		-	TO REMAIN ON W	
Head of household must be 18 years or older	\\/ \ ITI	IST FOR PARKING:		CALL EVERY	
	PARKING INF		PET INFO:	Р	ETS OK: NO
	Included				
ASSET LIMITS: YES]		
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO:			GENERAL I	NFO: USING PREFERE	NCES:
Cannot own a house on Oahu. Assets limited to two	LEASE:		1.)The Elde	erly 2.) The Displac	ed 3.) Disabled
times the applicable income for admission or three times that limit for continued occupancy.	1 year		Families of was determ	/ service connected deceased veterant nined to be service rans 6.) Families re	s whose death connected. 5.)
INCOME CRITERIA:				I Shelters 7.) All ot	
50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550.	FURNISHED: Partly furnishe appliances on		Funding: S	tate Pub Hsing 100 ons must be 3 yrs o	
1-PERSON MAXIMUM MONTHLY INCOME:	3450		Į		
2-PERSONS MAXIMUM MONTHLY INCOME:	4895				

	Last Comp	lete Update:	11/24/2021			AREA	. Palama
PROJECT NAME:	PUALANI MAN	OR				PROJECT TYPE	
	1216 Pua Ln.					PHONE: 808-84	1-5657
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER APPLY TO):			APPLY ADI	DRESS: ion onsite; brir	ng I.D.	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE			F	AX:	EMAIL:	None	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 62	0	NO	565	2	4	YES
Three I	Bdrm: Bdrm:						
	NT IS 30% OF INCOME		Water	JDED:		MINIMUM V ESTIMATE MAXIMUM V	(Months): 48
AGE CRITERIA: Head of household	d must be 18 years or ol	der	PARKING INFO:	FOR PARKING:	PET INFO:	TO REMAIN ON \ CALL EVERY	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY: O:		Parking included LEASE: 1 year		GENERAL Funding:	INFO: Section 8 100%.	
	IA: Income: 50% AMI. to new HUD guidelines		FURNISHED: Partly furnished-appliances only.	major			

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Com	plete Update:	12/15/2021			4054	Makiki
PROJECT NAME:	PUMEHANA (HPHA-hon	NOT AC	CEPTING AP	PLIC	, u (_ , u	
	1212 Kinau St.	III IIA-IIOII) - NOT AC	CLI IIIG AI		PHONE: 808-586	
	121211111111111111111111111111111111111					FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96814		1721 070 010	,
MANAGER	: Sol Sentous			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING A	APPLICATIONS		Honolulu, HI		ATIONS	APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications of NOT ACCEPTING A				EMAII : b	phaishereforyou.o	NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EIWAIL. II	priaistiereroryou.or	9
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 98	0		454	1	2	YES
One E	Bdrm: 40	0		553	1	4	YES
Two E	Bdrm: 1	0					
Three B	Bdrm:						
Four I	Bdrm:						
	NT IS 30% OF INCOM for Federal Low Incor 8/2/2016*****		Water and allo	CLUDED: owance for utilities		TOTA MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:	d must be 62 years or	older, or			٦	TO REMAIN ON W	AITLIST
disabled		,	WAITL PARKING INF	IST FOR PARKING: O:	PET INFO:	P	ETS OK: YES
			Included			under 25 lbs. only	1.20
AN OWN RESID	ASSET LIMITS DENTIAL PROPERTY:				GENERAL I	NFO:	
ASSET LIMIT INFO		. 110	LEASE:		PREFEREN	NCES: Domestic V	
Cannot own a hou	se on Oahu		1 year		homeless ir displaced.	n transitional shelte	ers; involuntary
						s, under age 62 spo ng: Fed Low Inc Pu	
INCOME CRITERI			=		All conviction	ons must be 3 yrs a	ago, unless it's
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$5: 00; 3 persons - \$68,50 00; 5 persons - \$82,20 00; 7 persons - \$94,35	0; 0;	FURNISHED: Partly furnishe appliances on			namphetamine or s	
	IUM MONTHLY INCOM		4570				

		Last Compl	ete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUNC	CHBOWL	HOMES (HPHA-hor	n) - NOT ACC	EPTIN	PROJECT TYPE:	Elderly
		tain Cook Ave.			,		PHONE: 808-58	6-9724
			_				FAX: 586-97	
CITY:	Honolulu	ı	STATE: HI	ZIP:	96813		000 0	
MANAGER	: Sol Ser	ntous			APPLY AI	DDRESS:		
						h School St.		OUT-OF-STATE
APPLY TO					Honolulu, NOT ACC	EPTING APPLIC	CATIONS	APPLICATION ACCEPTED:
4551 1/ 4771		CCEPTING AP						NO
APPLY ATTN		pplications office CCEPTING AP						
APPLY PHONE	: 808-832	2-5961			FAX : 832-3461	EMAIL:	nphaishereforyou.c	org
74.121.110.112								
Unit	Туре:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:	RENT:	INCOME Required:		Number of People	Number of People:	Allowed:
s	tudio:							
One I	Bdrm:	97	0	,	548	1	4	YES
								YES
Two I	Bdrm:	58	0		711	2	6	152
Three I	Bdrm:	1	0					
Four I	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 *******CLOSED) for Fede	ral Low Income		UTILITIES IN Water and al	ICLUDED: lowance for utilities		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA:								. ,
Head of household	d or spou	se must be 62	vears or				TO REMAIN ON V CALL EVERY	
older, or disabled			,	WAIT PARKING IN	LIST FOR PARKING	6: PET INFO:		PETS OK: YES
				Included	FO: NO		under 25 lbs. only	
ı.								
ANI OWAL DEGIS		SSET LIMITS:				OENEDAL	INICO	
AN OWN RESIDE		PROPERTY:	NO	ļ.		GENERAL	NCES: Domestic \	/iolence victims:
Cannot own a hou		ıhu		LEASE:		homeless	n transitional shelt	
				1 year		displaced.		
							s, under age 62 sp ng: Fed Low Inc P	
INCOME CRITERI	IA:							
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$88,30 8 persons - \$100,4	Income: '00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$53,; sons - \$68,500; sons - \$82,200;		FURNISHED Partly furnish appliances o	nedmajor	crystal med	ons must be 3 yrs thamphetamine or tion to Shopping a harities Hawaii	sex offender
1-PERSON MAXIM	IUM MON	ITHLY INCOME	Ε:	4570		-		
2-PERSONS MAXI	мим мо	NTHLY INCOM	ИЕ :	5220				

	Last Compl	ete Update:	12/15/2021			AREA:	Aiea
PROJECT NAME:	PUUWAI MOMI	(HPHA-h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	
	99-132 Kohomua St.					PHONE: 808-483	B-2550
						FAX: 483-255	
CITY:	Aiea	STATE: HI	ZIP:	96701		•	
MANAGER	: Marcus Asami			APPLY ADD			
APPLY TO	A. LIDLIA			1002 North S Honolulu, HI	96817		OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING AP	PLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications offic						NO
	NOT ACCEPTING AP	PLICATIONS			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	<u>:</u> 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:						
One I	Bdrm: 48	0	,	550	1	4	YES
	Bdrm: 86	0		724	2	6	YES
Three I				1080	3	8	YES
		0		1158	4	10	
Four	Bdrm: 38	0	ļ	1130	1 4	10	YES
RENT INFO: RE	NT IS 30% OF INCOME	: YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 260
	for Federal Low Income		Electricity and			MINIMUM W	Į.
*********CLOSED	8/2/2016*****					ESTIMATE	
						MAXIMUM W	(2.4)
			įt.			ESTIMATE	. ,
AGE CRITERIA:	d must be 18 years or ole	der				TO REMAIN ON W CALL EVERY	
	aac. 20 , ca.c c. c.		WAITL PARKING INF	IST FOR PARKING:	PET INFO:	E	PETS OK: YES
			Included	0.		nimals ok, but only o	
	ASSET LIMITS:	NONE				ries listed below: inder 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INFO			LEASE:		PREFERE	ENCES: Domestic V	
Cannot own a hou	se on Oahu		1 year		homeless displaced.	in transitional shelte	ers; involuntary
					Fundina:	Fed Low Inc Pub H	sina 100%
J						ions must be 3 yrs	
ncome Eligibility =			FURNISHED:			thamphetamine or	
Maximum Annual	Income: 1 person - \$53, 00; 3 persons - \$68,500;		Partly furnishe				
4 persons - \$76,10	00; 5 persons - \$82,200;		appliances on	ly, no carpet			
8 persons - \$100,4	00; 7 persons - \$94,350; 450						
]							
1-PERSON MAXIM	IUM MONTHLY INCOME	E:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	ЛЕ:	5220				

		Last Compl	ete Update:	4/23/2024			AREA:	Downtown
PROJECT NAME:	QUE	EN EMMA	APARTM	ENTS			PROJECT TYPE:	Family
ADDRESS:	1270 Qu	een Emma St.					PHONE: 808-646	6-2660
CITY:	Honolulu	ı	STATE: HI	ZIP:	96813		FAX: 808-490	0-0707
MANAGER APPLY TO		ca Malabey				DDRESS: en Emma Street Hawaii 96813	t	OUT-OF-STATE
APPLY ATTN								ACCEPTED:
APPLY PHONE		6-2660			FAX: 808-490-070		www.queenemmaa manager@queene ~	apartments.com mmaapartments.co
	Type:	Number of UNITS:	RENT: 1238	Minimum INCOME Required: 2 x rent	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: Bdrm:	13	1300 1562	2 x rent	446-680 618-850	2	5	
Three I	Bdrm:							YES
RENT INFO: RE	NT IS 30	% OF INCOME	: -	UTILITIES IN	CLUDED:		TOTA	AL UNITS: 71
LIHTC; Income re Section 8 voucher 4 studios only at 3 Deposit equal to o \$17 background c	strictions rs accepte 30% AMI -	apply. ed. - \$550 mo. o's rent		Water, sewer			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	/AIT LIST (Months): 0
AGE CRITERIA:							TO REMAIN ON V	
Age 18				WAITL	IST FOR PARKING	:	CALL EVERY	(Months): 0
				PARKING INF	1	PET INFO	: .	PETS OK: NO
]	۸٥	SSET LIMITS:		Limited, on-si	ite parking available	Pets not a	llowed.	
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE:		Engaging ceiling wir	social spaces, new dows, 9 ft. ceilings	interiors, floor-to- , walk-in closets,
				12 month		site mana call emerg	e flooring, some uni gement, laundry fac gency maintenance, siness center/comp	cilities, elevator, on- , WiFi in common
INCOME CRITER 30% AMI units - m \$27,510; 2 person 60% AMI maximul \$62,880, 3 - \$70,7	naximum n - \$31,44 m income	0. e for 1 - 55,020,	2 -	FURNISHED: Major applian window cover counter tops	ices, microwave,			entry, bike sotrage
1-PERSON MAXIM	NOM MUI	ITHLY INCOME	≣:	4585				
2-PERSONS MAXI	ІМИМ МС	NTHLY INCOM	ΛΕ:	5240				

		Last Compl	ete Update:	8/7/2023			AREA	Chinatown
PROJECT NAME:	RHF	PAUAHI K	UPUNA H	IALE			PROJECT TYPE	Elderly
ADDRESS:	167 Nor	th Pauahi St.					PHONE: 808-52	24-5844
CITY:	Honolulu	J	STATE: HI	ZIP:	96817		FAX: 949-25	554
MANAGER	R: Sue St	acey			911 N. S	ADDRESS: studebaker Rd.		OUT-OF-STATE
APPLY TO	: Retiren	nent Housing Fo	oundation		Long Bea (562) 25	ach, CA. 90815 7-5100	-4900	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-52	4-5844			FAX:	EMAIL	_: www.rhf.org	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Number of	CAREGIVER Allowed:
S	tudio:	12	0		539	1	1	YES
One I	Bdrm:	36	0		579	1	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE 2023 Update: No a contact informatio	action red			Water, sewer 8			MINIMUM V ESTIMATE MAXIMUM V	(Months): 96
AGE CRITERIA:				įr.				E (Months): 120
Head of household			der, or	\^/^ ITL I	ST FOR PARKIN	IC:	TO REMAIN ON CALL EVERY	
disabled (mobility	impaired))		PARKING INFO		PET INF	O:	PETS OK: YES
]				Parking not av	ailable			
		SSET LIMITS:				J		
AN OWN RESIDE		PROPERTY:	NO			GENERA		MD letter; can work
				LEASE:		outside 62 spou	home. If elderly tense may rent the unit	ant dies, under age
]						_	s: meal site next do	OI .
Maximum Annual persons - \$39,700	Income:	1 person - \$34,	750; 2	FURNISHED: Partly furnishe appliances onl		Project v	: Section 202 will call applicant to	keep application on
							nagement to mail it quest with self-addre	essed stamped
1-PERSON MAXIM	10M MUI	NTHLY INCOME	≣:	2895				
2-PERSONS MAXI	ІМИМ МС	NTHLY INCOM	ΛΕ:	3308				

Last Complete Upo	ate: 8/7/2023		AF	REA: McCully
PROJECT NAME: RHF PHILIP STREE	T APARTMENT:	S	PROJECT TY	PE: Elderly
ADDRESS: 1605 Phillip St.			PHONE: 808	3-949-2555 808-692
<u> </u>			FAX: 949	
CITY: Honolulu STAT	E: HI ZIP:	96826		
MANAGER: Sue Stacey, Manager - Suite 2	200	APPLY ADDRE 911 N. Studeba		OUT-OF-STATE
APPLY TO: Retirement Housing Foundation	n	Long Beach, CA (562) 257-5100	A. 90815-4900	APPLICATION ACCEPTED:
APPLY ATTN:				YES
APPLY PHONE : 808-949-2555		FAX: 949-2554	EMAIL: www.rhf.org	
Unit Type: Number	Minimum		MINIMUM MAXIMUI	
of UNITS: REI	NT: INCOME Required:	∥ e∩ eT· ∥	Number Number of People:)I
Studio: 10	NO	550	1 1	YES
One Bdrm: 24	NO	575	1 2	YES
Two Bdrm:				
Three Bdrm:				
Four Bdrm:				NO
RENT INFO: RENT IS 30% OF INCOME: YES	UTILITIES INC		_ т	OTAL UNITS: 34
2023 Update: No action required unless updating contact information or in response to communicati from project	Electricity and von	water		M WAIT LIST ATE (Months): 96
				M WAIT LIST ATE (Months): 120
AGE CRITERIA: one member of the household must be age 62+,	_		TO REMAIN C CALL EVE	ON WAITLIST ERY (Months):
spouse/partner must be 18+. Other members of th household may be 18+.	e WAITLIS PARKING INFO	ST FOR PARKING: D: YES F	PET INFO:	PETS OK: YES
	Available		One small pet only	,
ASSET LIMITS: NONE	_	J	I	
AN OWN RESIDENTIAL PROPERTY: NO			GENERAL INFO:	
ASSET LIMIT INFO:	LEASE:		Caregivers are allowed woutside home. If elderly	tenant dies, under age
	1 year, then mo		62 spouse may rent unit.	
]			Opened 1993	
INCOME CRITERIA:			Funding: Section 202 100	0%
Maximum Annual Income: 1 person - \$33,550; 2 persons - \$38,350.	FURNISHED: Partly furnished		Application: Ask management to mail	lit
	appliances only	y.	Send request with self-ac envelope Pick up from manager's o	ddressed stamped
1-PERSON MAXIMUM MONTHLY INCOME:	3404		Į	
2-PERSONS MAXIMUM MONTHLY INCOME:	3888			

		lete Update:	5/4/2023			AREA:	Chinatown	
_	RIVER PAUAH	I (Not takin	g applicati	ons)		ROJECT TYPE:	Family	
ADDRESS: 1	I155 River St.				P	PHONE: 808-892	-1812	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: None		
MANAGER:	Luis; Ste. 111			APPLY AD	DDRESS: tly taking applicati	ons	OUT-OF-STAT	
	River Pauahi Apt. c/o		•				ACCEPTED:	
	Certified Occupancy S	Specialist (Lv me		000 4004	EMAIL:			
APPLY PHONE:	808-892-1812		F	AX : 892-1801				
Unit T	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One Bo			NO			3	YES	
Two Bo		0			1		YES	
Three Bo		0	NO		3	5		
Four Bo								
,			,	,		,	,	
NT INFO. REN	T IS 30% OF INCOME		UTILITIES INCLU			MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6	
GE CRITERIA:					TO	O REMAIN ON W		
ad of household	must be 18 years or ol	lder	WAITLIST	FOR PARKING	:	CALL EVERY	(Months):	
			PARKING INFO:		PET INFO:	F	ETS OK: NO	
			No parking.					
	ASSET LIMITS:				051/5511	150		
AN OWN RESIDE SET LIMIT INFO	ENTIAL PROPERTY:				GENERAL IN Funding: Sec			
			LEASE: 1 year		.	ınits 2 - 1 bdrm &	1 - 2 bdrms	
			,					
COME CRITERIA	Λ:							
persons - \$38,000	ncome: 1 person - \$33, 0; 3 persons - \$42,750; 0; 5 persons - \$51,300	;	FURNISHED: Partly furnished-appliances only.					

		Last Comp	lete Update:	6/29/2023			AREA:	Makiki
PROJECT NAME:	ROYAL	_ KINAU	APARTM	ENTS			PROJECT TYPE:	Elderly
ADDRESS:	728 Kinau	St.					PHONE: 808-52	1-3678
CITY	<u> </u>		STATE: HI	7ID. [20240		FAX: 521-293	31
CITT.	Honolulu		STATE. HI	ZIP:	96813			
MANAGER	t: Natasha	James, Com	munity Manage	r		DDRESS: u Street, Honolulu	. HI 96813	OUT-OF-STATE
APPLY TO	: Royal Kin	au Apartme	nts		720 Killac	2 Otroot, Floriolala	, 111 000 10	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	:: 808-521-	3678			FAX: 521-2931		oyalkinaumanager n	@royalkinauapts.co
l lait	Type			Minimum		MINIMUM	MAXIMUM	
		Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
s	tudio:			11094		от сорго	, copie:	
One I	Bdrm:	60	1032	1.5 x rent	541	1	2	YES
Two	Bdrm:	24	1468	1.5 x rent	741	1	4	YES
Three I				1.0 % 16.11				
	Bdrm:							NO
1				,			,	IVO
RENT INFO: RE	NT IS 30%	OF INCOM	E: NO	UTILITIES IN	CLUDED:		TOTA	AL UNITS: 83
No action is requirinformation. Long				Electric, wate	r, and sewer		MINIMUM W	
							ESTIMATE	
Section 8 certifica		need not me	et the min	<u> </u>			MAXIMUM W ESTIMATE	
AGE CRITERIA:							TO REMAIN ON V	Į.
All residents must	be 62 or ol	der		WAITL	IST FOR PARKING	3 :	CALL EVERY	(Months):
				PARKING INF	O: YES	PET INFO:	F	PETS OK: NO
]				Parking include some covered	ded, 57 spaces d			
	ASS	ET LIMITS:	NONE			J		
AN OWN RESIDE		ROPERTY:	YES			GENERAL		
ASSET LIMIT INF	<u> </u>			LEASE:		opened 199 units have	lanais	
				1 year; then r	nonth-to-month	Funding: L Funding: F	HTC, Section 8 RHTF	
]						8 handicap	ped access	
INCOME CRITER						Application	:	
50% AMI: 1 perso persons \$54,250:			52,250; 3	FURNISHED: Partly furnish		Send reque	est with self addres	ssed stamped
				appliances or		Pick up fro Email requ	m manager's office est nanager@ruoyalki	
1-PERSON MAXIM	IUM MONT	HLY INCOM	E:	3771		-		
2-PERSONS MAXI	MUM MON	THLY INCO	ME:	4354				

	Last Compl	ete Update:	11/24/2021			AREA:	Downtown
PROJECT NAME:	SAFE HAVEN/I	MENTAL H	HEALTH KO	OKUA		PROJECT TYPE:	Emergency/Transi
ADDRESS:	126 N. Pauahi St.					PHONE: 808-524	1-7233
CITY	Honolulu	STATE: HI	ZIP:	96817		FAX: 524-035	53
G	Tioriolala	· · · · · · · · · · · · · · · · · · ·		90017			
MANAGER	: Bill Hanrahan			APPLY AD	DRESS:		
				126 N Pau			OUT-OF-STATE
APPLY TO	: Mental Health Kokua Intake Monday - Frida	u from 1 nm . Ar	· ·	Honolulu, F	11 96817		APPLICATION ACCEPTED:
APPLY ATTN		y 110111 1p111 - 4 ₁	וווו				NO
APPLI AIIN					EMAIL:		
APPLY PHONE	: 808-524-7233			FAX : 524-0353	EWAIL.		
Unit	Type: Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
Si	tudio: 25			80	1	1	
One E	3drm:						
Two E	Bdrm:						
Three E	Bdrm:						
Four E							
Tour :	Summ.				,		
RENT INFO: REI	NT IS 30% OF INCOME	:	UTILITIES INCL	LUDED:		TOTA	L UNITS: 25
Rooms with share Includes 3 meals p	d bath and communal di per dav.	ning.	All utilities			MINIMUM W	
	y ill. (bi-polar, Schizophr	enia,				ESTIMATE	(Months): 2
depression). To yis	s of older.					MAXIMUM W. ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	` / [
Head of household	d must be 18 years or ol	der	\\/ A T G	ST FOR PARKING:		CALL EVERY	
			PARKING INFO		PET INFO): F	PETS OK: NO
<u> </u>			No parking				
	ASSET LIMITS:						
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	_ INFO:	
ASSET LIMIT INFO	O:		LEASE:		Clients m	ust be homeless and	d severely
			Month-to-month	า	Funding:	HUD Continuum of (Care for services,
					provided:	& C Esg; State HPH, residential, Case M	
INCOME CRITERI	Δ.				Plcmt Se Activity C	enter (waiting list) - p	provides social
Max income limits			FURNISHED:		rehab,	med/psych svcs, ch dency treatment, co	nemical
			Bed, dresser		integratio	n	,
						es. F 1 - 4pm	
					NO RESE	PONSE IN 2023	

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	12/15/2021			AREA:	Salt Lake
PROJECT NAME:	SALT LAKE (H	PHA-hon)	- NOT AC	CEPTING APE	os e		Family
	2907 Ala Ilima St.	i iiA iioiij	HOT AO	OLI TINO ALI		PHONE: 808-483	,
						FAX: 483-255	
CITY:	Honolulu	STATE: HI	ZIP:	96818		1.00 200	_
MANAGER	: Marcus Asami			APPLY ADD 1002 North S	School St.		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AP	PLICATIONS		Honolulu, HI NOT ACCEF	96817 PTING APPLIC	ATIONS	APPLICATION ACCEPTED: NO
APPLY ATTN	I: Oahu applications office NOT ACCEPTING AP						
APPLY PHONE	: 808-832-5961			FAX: 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:
S	tudio:						
	Bdrm: 28	0		642	1	4	YES
Three E							
Four I	Bdrm:						
	NT IS 30% OF INCOME for Federal Low Income 8/2/2016******		UTILITIES INC	CLUDED: wance for electricity		TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:	d must be 18 years or ol	dor			٦	TO REMAIN ON W	AITLIST
nead of nousehold	a must be 16 years of or	uei	WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: YES
	ASSET LIMITS:	NONE	Included	<u>. </u>	multiple ani	mals ok, but only o ies listed below: nder 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL I		
Cannot own a hou			LEASE: 1 year			NCES: Domestic V n transitional shelte	
					Funding: Fe	ed Low Inc Pub Hs	ing 100%
INCOME CRITERI	IA:					ons must be 3 yrs a	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		FURNISHED: Partly furnishe appliances on	edmajor ly some carpets	Crystal met	таттрпетаттпе от 8	sex offerider
	IUM MONTHLY INCOM		4570				

	Last Compl	ete Update:	3/17/2020			AREA:	Waianae
PROJECT NAME:	SEA WINDS AF	PARTMEN	ITS, H & J We	einberg		PROJECT TYPE:	Emergency/Transi
ADDRESS:	85-295 Kauiokalani Pl.			-		PHONE: 808-696	6-0061
CITY	Waianae	STATE: HI	ZIP:	00700		FAX:	
CITT.	vvaianae	SIAIE. HI	ZIF.	96792			
MANAGER	: Jesse Smith, General	Manager		APPLY ADI			
APPLY TO	: Pick up and drop off at days Thurs./Sat./Sun.			Apartments	nager, Sea Win , 85-295 Kauiok nae, Hawaii 967	alani Pl.	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	: Jesse Smith						NO
APPLY PHONE	808-696-0061		FA	X:	EMAIL: je	esse@hsiservices.	net
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio: 20	975	1600	500	1	4	
One E	Bdrm:						
Two I	30**	1295	2000	770	4	7	
Three E	Bdrm:						
Four I	Bdrm:						NO
RENT INFO: RE	NT IS 30% OF INCOME	: NO	UTILITIES INCLUD	DED:		TOTA	L UNITS: 50
20 Transtional students	dio units with 36 month r	maximum	Water, sewer, trash	า		MINIMUM W	Į.
	bdrm townhouse rentals	s on site				ESTIMATE	, ,
	rents of \$850 - \$1295	on one				MAXIMUM W ESTIMATE	
AGE CRITERIA:					Т	TO REMAIN ON W	
18 and older			WAITLIST F	OR PARKING:		CALL EVERY	
			PARKING INFO:	NO	PET INFO:		PETS OK: YES
1	A COST LIMITO		\$25 month			al household pets e pet agreement fo	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL I	NFO:	
ASSET LIMIT INFO	O:		LEASE:			of Housing Solutio	
HUD Urban Honol	ulu Low Income Limit		1 year		in a homele	is given if applicar ess shelter. udes 1 studio) are	
					handicappe	ed; 2 units (include: hearing disabled.	s 1 studio)
INCOME CRITERI	IA:					•	
\$2000 minimum grafood stamps) for 2	ross monthly income (no	t including minimum	FURNISHED: Drapes, tiled floors	and major		: n manager's office est to Jesse@hsis	
gross monthly inco	ome for studio		appliances (refrige stove top).		Email regul	331 10 00000 @11010	S. VIOGS. II C.
I-PERSON MAXIM	IUM MONTHLY INCOME	:	3665		J		
2-DEDSONS MAYI	MIIM MONTHLY INCOM	1 ⊢ ·	<i>4</i> 185				

		Last Comp	lete Update:	5/30/2024			AREA:	Iwilei
PROJECT NAME:	SENI	OR RESID	DENCE AT	IWILEI		P	ROJECT TYPE:	Elderly
ADDRESS:	888 Iwile	ei Rd.				F	PHONE: 808-888	3-0876
CITY:	Honolulu	J	STATE: HI	ZIP:	96817		FAX: 808-888	3-2565
MANAGER	t: Indigo F	Real Estate			APPLY AD Manager's		lı. ⊔i	OUT-OF-STATE APPLICATION
APPLY TO	: Senior	Residence at I	wilei		96817	.oad #100, 1101101	uiu, i ii	ACCEPTED: YES
APPLY ATTN	I: Manage	er's Office						0
APPLY PHONE	:: 808-888	8-0876		F/	AX : 808-888-256	EMAIL: 55		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	146	1410	1.5 x rent	594			
	Bdrm:	13	1660	1.5 x rent	815			
Three I			1000	1.0 X TOTAL	010			
Four I	Bdrm:							NO
Application fee - \$			NO	Water and sewer	DED.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 2
AGE CRITERIA:						T	O REMAIN ON V	/AITLIST
62+				WAITLIST	FOR PARKING:		CALL EVERY	(Months): 6
				PARKING INFO:	NO	PET INFO:	F	PETS OK: NO
	۸.۵	COUNTY INVITO	NONE	or stalls				
AN OWN RESID		SSET LIMITS: PROPERTY:				GENERAL IN	NFO:	
ASSET LIMIT INFO	O:			LEASE:		Application:		
Income from asse	ts cannot	exceed maxin	num limits.	One-year		Pick up from	ement to mail it n manager's office te office	•
INCOME CRITERI	IA:							
50% AMI \$48,750 60% AMI \$58,500	1 person			FURNISHED: Partly furnishedappliances only; b				
1-PERSON MAXIM 2-PERSONS MAXI				4875 5570]		

		Last Comp	olete Update:	6/6/2023			AREA	: Kaneohe
PROJECT NAME:	SENI	OR RESI	DENCE A	CKANEOH	E		PROJECT TYPE	Elderly
ADDRESS:	45-705	Kamehameha	Hwy.				PHONE: 808-23	35-2898
CITY:	Kaneoh	e	STATE: HI	ZIP:	96744		FAX : 235-08	397
MANAGER	R: Joshua	a Monton, Res	ident Manager		APPLY AD Mail to proj			OUT-OF-STATE
APPLY TO): Bob Ta	anaka, Inc.						APPLICATION ACCEPTED:
APPLY ATTN	1 :							YES
APPLY PHONE	E: 808-23	35-2898			FAX: 235-0897	EMAIL:		
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:							YES
	Bdrm:	74	1025	2x rent	428			TES
	Bdrm:							
Three								
Four	Bdrm:			ļ		1		NO
RENT INFO: RE *44 (HUD) Rents *30 (LIHTC) units Deposit same as Section 8 certifica gross income requ	are 30% are \$102 rent. Mu ate holder	of income; wa 25; waitlist 1-3 st be below 60 rs need not me	itlist 4 - 6 yrs yrs. % AMI	Water & Sewe			MINIMUM V ESTIMATE MAXIMUM V	(Months): 12
AGE CRITERIA:							TO REMAIN ON V	WAITLIST
All residents must	t be 62 o	r older		WAITLI	IST FOR PARKING:	:	CALL EVERY	(Months): 6
				PARKING INFO		PET INFO		PETS OK:
Į.	A	SSET LIMITS:	NONE	Monthly Rent I include paarkii First Come Fir	ng; 48 stalls;	LIHTC - N HUD - PE		
AN OWN RESI		PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF	·O:			LEASE:		Communi Opened 2	ty center, laundry r 001	oom.
				6 months		floor near Units have onsite soo	ial worker	
INCOME CRITER 50% AMI: 1 persor persons \$58,800 60% AMI: 1 persor 2 persons - \$62,70	on \$45,75 on - \$54,9	900		FURNISHED: Partly furnishe appliances onl		Funding: Transport	LIHTC (30 units), S RHTF, Section 20: ation to Shopping a Charities Hawai'I	
 1-PERSON MAXIN	иим мо	NTHLY INCOM	ΛE:	4575				
2-PERSONS MAX	IMUM MO	ONTHLY INCC	ME:	5040				

	Last Comp	lete Update:	5/11/2023			AREA:	Kapolei
PROJECT NAME:	SENIOR RESI	DENCE A	T KAPOLE	11 & 2	-	PROJECT TYPE:	Elderly
	91-1034 Namahoe St.	7202				PHONE: 808-674	1
						FAX: 674-293	
CITY:	Kapolei	STATE:	∃I ZIP:	96707		17511 074 250	
MANAGER	t: Cat Suan, Resident M	1anager			RESS: ace Ste 103 Ho	onolulu, HI	OUT-OF-STATE
	e: Bob Tanaka Inc.			96826			APPLICATION ACCEPTED: YES
APPLY ATTN	I: Ext 24						
APPLY PHONE	: 808-949-4111			FAX: 949-7211	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 79	0		463-500	1	3	
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						NO
60 unit @ 30% AN Namahoe St. 20 u 91-1098 Namahoe Gross maximum r income (if qualified	NT IS 30% OF INCOME MGI at Kapolei 1 - 91-10 units @ 50% AMGI at K e St. ent: \$725/778 month or d) Monthly amount is S	24 apolei 2 - 30% of Subject to				TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:					Т	O REMAIN ON W	
All residents 62+.	Caregiver allowed with	MD letter.	WAITL	LIST FOR PARKING:		CALL EVERY	(Months): 12
			PARKING INF		PET INFO:	F	PETS OK: YES
J			Parking inclu	ded			
	ASSET LIMITS:	NONE	[J		
AN OWN RESIDE	DENTIAL PROPERTY:	NO			GENERAL II		
	o. wn a majority interest in	residential	One-year		property, on		y room, ceiling
INCOME CRITER	IA:					; about a 10 minute	
	son \$25,400; 2 persons son \$45,750; 2 persons		FURNISHED:		Any crimina	ll conviction = ineli	gible
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	3812				

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		Last Comp	lete Update:	5/10/2023			AREA:	Wahiawa
PROJECT NAME:	SILVE	RCRES1	Ī				PROJECT TYPE:	Elderly
ADDRESS:	520 Pine :	St.					PHONE: 808-622	2-2785
CITY:	Wahiawa		STATE: HI	ZIP:	96786		FAX : 621-778	31
APPLY TO) :	eron - Properi	ty Manager		APPLY ADD On-Site #11			OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN		2785			FAX : 621-7781	EMAIL:		
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	Studio:							
One	Bdrm:	78	0	NO	500		3	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE 30% of Adjusted I After application is sent. ALL HAP WORKE ON THE APPLICA AGE CRITERIA: Head of Househol (companion) 18+, legal custody. Ad	Income s received, ERS MUST ATION Id must be minor child	a confirmation STATE THE 62+. Spouse dren allowed in	on letter is EIR NAME	utility allowance	Trash Removal, \$63 e. ST FOR PARKING:	PET INFO:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 24 AIT LIST (Months): 36 /AITLIST
over 18 allowed.	ASS	SET LIMITS:	NONE	Parking include Limited guest parea.	ed if available. parking in outside	1 animal		·
AN OWN RESID		ROPERTY:	YES			GENERAL		
ASSET LIMIT INF	·O:			LEASE: 1 year		denial (ap and sex of regardless	ccept any evictions/s	. Violent, drug, automatic denial -
INCOME CRITER	IIA:					Opened 1	995; Funding: Secti	
Maximum Annual		nanges per H	UD	FURNISHED: Refrigerator, st	ove, carpet, blinds	Laundry F Application Send requ	ommunity room, Lar acilities n: Ask managemen lest with self addres manager's office.	t to mail it

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	5/17/2023			AREA	Chinatown
ROJECT NAME: SMIT	TH BERET	ANIA				PROJECT TYPE	Family
ADDRESS: 1170 N	luuanu Ave.					PHONE: 808-52	
CITY: Honolu	lu	STATE: HI	ZIP:	96817		FAX : 531-66	05
MANAGER: Ko No	orasing-Yun			APPLY AD			OUT-OF-STAT
APPLY TO: Indigo	Real Estate Sei	vices, Inc.			-		APPLICATIO ACCEPTED
APPLY ATTN:	***WAITLIST (CLOSED SINC	E 2018***				
APPLY PHONE: 808-5	21-6486		F.	AX : 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:							VEC
One Bdrm:	82	0	NO	548	1	2	YES
Two Bdrm:	82	0	NO	719	2	4	YES
Three Bdrm:							
Four Bdrm:					J		NO
No action required unless imely response to commu			Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 2
GE CRITERIA: Head of household must b	ne 18 vears or old	der				TO REMAIN ON V	
load of Household Illust E	or to yours or on	301.	WAITLIST PARKING INFO: Parking included	FOR PARKING	PET INFO		PETS OK: NO
Α	SSET LIMITS:	NONE					
AN OWN RESIDENTIA	L PROPERTY:	YES			GENERAL	_ INFO:	
ASSET LIMIT INFO:			LEASE:		Accepts r	new applicants only ks after announcem	when announced. ent, applications
			1 year			outed and accepted	
					A lottery i	s performed to sele	ct applicant's # for
NCOME CRITERIA:					Funding:	Section 8 100%	
Maximum Annual Income: persons - \$41,850; 3 pe persons - \$52,300; 5 pe persons - \$60,700; 7 pe persons - \$69,050	rsons - \$47,100; rsons - \$56,500;	650;	FURNISHED: Partly furnished appliances only, o				
PERSON MAXIMUM MO	NTHLY INCOME	≣ :	3517		<u> </u>		
PERSONS MAXIMI IM M		1 ⊢ ·	4017				

	Last Comple	ete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	SPENCER HOL	JSE (HPHA	<mark>\-hon) - N</mark>	IOT ACCEP	TING A	PROJECT TYPE:	Family
ADDRESS:	1035 Spencer St.	•				PHONE: 808-58	6-9724
CITY	Honolulu	STATE: HI	ZIP:	00000		FAX: 586-97	28
CITT.	Honolulu	STATE. HI	ZIF.	96822			
MANAGER APPLY TO	: Sol Sentous : HPHA NOT ACCEPTING API	PLICATIONS		1002 Nor Honolulu	ADDRESS: rth School St. , HI 96817 CEPTING APPL	LICATIONS	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	: Oahu applications offic NOT ACCEPTING API						NO
APPLY PHONE		PLICATIONS		FAX: 832-3461	EMAIL	: hphaishereforyou.c	org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
One E	dudio:						
Two E	3drm: 1	0					YES
Three E	3drm: 16	0		798	3	8	YES
Four E	3drm:]		
	NT IS 30% OF INCOME for Federal Low Income 8/2/2016******		UTILITIES INC Water and ga electricity	CLUDED: s + allowance for		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 /AIT LIST
AGE CRITERIA:	d 40 a a a la	la a				TO REMAIN ON V	
Head of nousehold	d must be 18 years or old		WAITL PARKING INF	IST FOR PARKING	G: PET INFO		PETS OK: YES
	ASSET LIMITS:	NONE	T AKKING INI	C. JNO	multiple the cate one doa	animals ok, but only gories listed below: (under 25 lbs) or ca	one from each of
AN OWN RESID	DENTIAL PROPERTY: D:	NO			GENERA	AL INFO: RENCES: Domestic \	/iolence victims:
Cannot own a hous			LEASE: 1 year		homeles displace	s in transitional shelt d.	ers; involuntary
					_	: Fed Low Inc Pub H	
INCOME CRITERI ncome Eligibility =			FURNISHED:			ctions must be 3 yrs nethamphetamine or	
Maximum Annual I 2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,2 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		Partly furnish appliances or	edmajor			
1-PERSON MAXIM	UM MONTHLY INCOME	i:	4570				

		Last Comp	lete Update:	6/7/2023			AREA:	Mililani
PROJECT NAME:	THE C	COURTY	ARDS AT N	/ILILANI I	MAUKA		PROJECT TYPE:	Family
ADDRESS:	95-1015	Koolani Dr.					PHONE: 808-62	6-9455
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX: 626-94	56
MANAGER	t: Tiffany (Gates, Reside	ent Manager		APPLY ADD		o 05 1015	OUT OF STATE
APPLY TO	: The Cou	urtyards at Mil	liani Mauka			agement Offic Mililani, HI 96		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-626	3-9455			FAX : 626-9456	EMAIL:	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:
	Bdrm:	12	979	2.25xRent	636			
	Bdrm:	24	1147	2.25xRent				
Three	Bdrm:	12	1319	2.25xRent	1068			
Four	Bdrm:							YES
RENT INFO: RE	NT IS 30%	% OF INCOME	E: NO	UTILITIES INC	CLUDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 /AIT LIST
AGE CRITERIA:							TO REMAIN ON V	, ,
Head of househol	d must be	18 years or o	lder	WAITL	IST FOR PARKING:		CALL EVERY	(Months): 6
	4.0	OFT LIMITO	NONE		d; Max 2 stalls, but d to have 2nd stall,	PET INFO	:	PETS OK: NO
AN OWN RESI		SET LIMITS: PROPERTY:		guest parking	available	general	. INFO:	
ASSET LIMIT INF	O:			LEASE:		LIHTC		
Cannot own a maj properties.	ority intere	est in resident	aı	1 year		Accepts S	Section 8 & Rent Su	ipplement
INCOME CRITER	IA:						n: I from website om manager's offic	е
60% of AMI: 1 per persons \$70,740;			\$ \$62,880; 3	FURNISHED: Partly furnishe appliances or				
-PERSON MAXIN	IUM MON	THLY INCOM	IE:	4585]		

Last Complete Update:	3/3/2020			AREA:	Kalihi
PROJECT NAME: THE TOWERS AT KUHI	O PARK		P	ROJECT TYPE:	Family
ADDRESS: 1475 Linapuni St.			F	PHONE: 808-888	3-2816
CITY: Honolulu STATE: H	ZIP:	96819		FAX: 888-063	31
MANAGER: Andrew Kopecky, Manager -Tower Tyrone Colding, Manager -Tower B-		APPLY ADD	DRESS:		OUT-OF-STATE APPLICATION
APPLY TO: The Michaels Organization					ACCEPTED:
APPLY ATTN:					
APPLY PHONE : 808-888-2816	FAX:	888-0631	EMAIL: to	wers@tmo.com	
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm: 1356	3280	579			
Two Bdrm: 1627	3937	792			
Three Bdrm: 1880	4268	944			
Four Bdrm:					
RENT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INCLUDE	D.		TOTA	L UNITS: 555
Rent listed is for Tax Credit units. Apply directly to	Water, electricity and			MINIMUM W	
The Towers at Kuhio Park for market units. Subsidized units - apply via Hawai'i Public Housing				ESTIMATE	
Authority				MAXIMUM W ESTIMATE	
AGE CRITERIA:			T	O REMAIN ON W	
Head of household must be 18 years or older	WAITLIST FO			CALL EVERY	
	PARKING INFO: Parking included. Ea	NO	PET INFO:	F	PETS OK: NO
ASSET LIMITS:	2 unassigned stalls. open lot.				
AN OWN RESIDENTIAL PROPERTY: UNKNOW			GENERAL IN	IFO:	
ASSET LIMIT INFO: If asset generates income, then it is counted toward	LEASE:		Newly renov Fitness cent		
income	One-year			ces program for a y Section 8 okay nits	
INCOME CRITERIA:	•		24-hour mai	ntenance and sec	urity
2x rent	FURNISHED:		NO RESPO	NSE IN 2021	
1-PERSON MAXIMUM MONTHLY INCOME:	4220				

		Last Compl	ete Update:	12/16/2021			AREA	. Downtown
ROJECT NAME:	THOI	MAS BUIL	DING				PROJECT TYPE	Family
ADDRESS:	Unknow	/n					PHONE:	
CITY:	Honolul	u	STATE: HI	ZIP:	0		FAX:	
MANAGER	₹:				APPLY AD	DRESS:		OUT-OF-STA
APPLY TO): Housir	ng Solutions, Ind	> .					APPLICATIO ACCEPTED
APPLY ATTN	: BUILD	ING IS NOT OF	PEN OR IN OP	ERATION				
APPLY PHONE	: :			F	AX:		Website: https://w Email: Unknown	ww.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	itudio:		0					
	Bdrm:		0					
	Bdrm:		0					
Three			0					
Four	Bdrm:		0		J			
ENT INFO: RE				UTILITIES INCLU			MINIMUM V ESTIMATE MAXIMUM V	VAIT LIST (Months):
				WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:		Y (Months):
				PARRING INFO.		· FET INFO.	·	i E i o oix.
AN OWN RESI		SSET LIMITS: PROPERTY:				GENERAL	INFO:	
SSET LIMIT INF	·O:			LEASE:		. Honolulu.	ry, century-old stru Residential floors throoms, opening 2	
ICOME CRITER	IA:			1				
				FURNISHED:				
PERSON MAXIM	IOM MUN	NTHLY INCOM	E:	0				
PERSONS MAXI	ІМИМ МО	ONTHLY INCOM	ΜE:	0				

	Last Com	plete Update:	5/18/2023			AREA:	Manoa
PROJECT NAME:	VANCOUVER	HOUSE				PROJECT TYPE:	Family
ADDRESS:	2019 Vancouver Dr.					PHONE: 808-947	7-7181
CITV	Honolulu	STATE: HI	ZIP:	96822		FAX : 944-397	76
GITT.	Honordia	STATE: HI	2	90022			
MANAGER	: Chris Gerson			APPLY ADD			
APPLY TO	: Housing Solutions, I	nc.		homeless sh	outreach agen	cy or	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Chris Gerson						NO
APPLY PHONE	: 947-7181			FAX: 944-3976	EMAIL: o	chris@hsiservices.i	net
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:						
One E	3drm: 25	1100		460	2	4	
Two E	Bdrm: 8	1400		580	5	7	
Three E	Bdrm:						
Four E	Bdrm:						NO
	NT IS 30% OF INCOM ; \$1400 for 2-bdrm	ME: NO	UTILITIES INCI Electricity, wate disposal	LUDED: er, sewer, and refuse	3	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6 AIT LIST
AGE CRITERIA:						TO REMAIN ON W CALL EVERY	
or at least 6 month	least 1 minor child (18 ns pregnant	and under)	WAITLIS PARKING INFO	ST FOR PARKING: D: YES	PET INFO:		PETS OK: NO
AN OWN RESID	ASSET LIMITS		no guest parkir parking for resi	g at \$50 per 6-12 mon waitlist; ng on site. Street dents and guest st come first serve.	GENERAL I	INFO:	
ASSET LIMIT INFO	0:		LEASE:		Homeless	or at risk families with at lea	at and minor shild
			Month to Month	١	under 18 ye	ears.	vorking at least 19
J					hours a we		
INCOME CRITERI Less than 50% AM			FURNISHED:			currently unshelte shelter or at risk o	
			No			I Housing for Empl	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	11/24/2021			AREA:	Ewa Beach
PROJECT NAME:	VILL	AGES OF	MOA'E KU	- PHASE	1		PROJECT TYPE:	Family
ADDRESS:							PHONE: 808-681	-3000
							FAX: 681-300	
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706			
	Mercad	wasaki, Mgr; Ja do, Admin Asst Villages of Moa		sing Agent; Be	tty APPLY AD 91-1655 Pa Ewa Beach	ahika St.		OUT-OF-STATE APPLICATION ACCEPTED:
ADDLY ATTN	1-							YES
APPLY ATTN	i .					EMAIL:	www.eahhousing.or	g
APPLY PHONE	: 808-68	31-3000			FAX: 681-3004			
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	6	1279	2.5x rent	674	1	3	
Two I	Bdrm:	32	1524	2.5x rent	797	2	5	
Three I	Bdrm:	25	1750	2.5x rent	1119	3	7	
Four I	Bdrm:							
RENT INFO: REI Based on 2019 MT to Change AMI % - 30/50/60			Subject	UTILITIES INC			TOTA MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE	(Months): 12
AGE CRITERIA:							TO REMAIN ON W	
18+ Multi-Family F	Property			WAITL	LIST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO:		ETS OK: NO
]	AS	SSET LIMITS:	YES	basis. Currer insurance, sa		Notify mar Assistance	agement if have a s animal	Service or
AN OWN RESID	DENTIAL	PROPERTY:		registration re	equired	GENERAL	INFO:	
ASSET LIMIT INFO		Α		LEASE:			king property - smok on the property, inc	
Doponas on input				1 year		Playgroun	d/Totlot, Community	/ Meeting Room,
INCOME CRITERI		limita aubia at t	a abanga	FURNISHED:			RHTF, LIHTC, CDB	G, NSP, HOME,
Maximum monthly annually	rincome	iiiiiis subject ii	Johnste		stove, rangehood,	, HMMF NO RESP	ONSE IN 2021	
1-PERSON MAXIM				4220]		

		Last Comp	olete Update:	11/24/2021				Ewa Beach
DDO IECT NAME.	V/II I /				- 11		AREA: PROJECT TYPE:	1
PROJECT NAME:			WOA'E KU	J - PHASE	<u> </u>			1
ADDRESS:	91-1655	Panika St.					PHONE: 808-681	
CITY:	Ewa Bea	ach	STATE: HI	ZIP:	96706		FAX : 681-300)4
			r	,				
MANAGER		vasaki, Mgr; Ja lo, Admin Ass	anna Kekoa, Lea t.	sing Agent; Be	•	' ADDRESS: 5 Pahika St.		OUT-OF-STATE
APPLY TO): EAH - \	Villages of Mo	a'e Ku		Ewa Be	each HI 96706		APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-68	1-3000			FAX: 681-300		.: www.eahhousing.o	rg
Unit	Туре:	Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People		Allowed:
S	tudio:							
One I	Bdrm:	9	1222	2.5xrent		1	3	
Two I	Bdrm:	37	1457	2.5xrent		2	5	
Three I	Bdrm:	29	1671	2.5xrent		3	7	
Four I	Bdrm:			ļ		J		YES
RENT INFO: RE	NT IS 30	% OF INCOM	F. NO	UTILITIES IN	CLUDED:		TOTA	AL UNITS: 75
Max rent is around			L. NO	Water/sewer/			MINIMUM W	
AMI % - 30/50/55 Based on 2020 M	TSP/VLI i	ncome limits					ESTIMATE	-
2021 Update: Wai							MAXIMUM W ESTIMATE	-
AGE CRITERIA:							TO REMAIN ON W	
18+					LIST FOR PARKI		CALL EVERY	
				PARKING INF	FO: an "As needed"	PET INF	O: F	PETS OK: NO
Į.				basis. Currei	nt drivers license,	,		
AN OWN RESID		SSET LIMITS:		insurance, sa registration re		GENERA	AL INEO:	
ASSET LIMIT INFO		TROFERTT.		LEASE:		Playgrou	und/Totlot, Communit	y Meeting Room,
Depends on inpute	ed income	е		1 year			Room, Picnic Area, Ged internet	Computer with
						No Smo	king on Property	
INCOME CRITERI	ΙΔ.					Funding	: RHTF, LIHTC, CDE	BG, HOME, HMMF
Maximum monthly		limits subject t	o change	FURNISHED:	:	_ '		
annually				Refrigerator, blinds	stove, rangehood	d,		
1-PERSON MAXIM	IUM MON	ITHLY INCOM	1E:	4042				
2-PERSONS MAXI	мим мо	NTHLY INCO	ME:	4620				

	Last Comp	olete Update:	3/5/2020				Ewa Beach
DDO JECT NAME.			DUACE	11		AREA: PROJECT TYPE:	1
	VILLAGES OF	MOA'E KU	- PHASE I	II			J
ADDRESS:	91-1655 Pahika St.					PHONE: 808-681	-3000
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		FAX:	
	: Gary Iwasaki, Mgr; Ja Mercado, Admin Assi : EAH - Villages of Mo	istant	ng Agent; Betty	APPLY ADD 91-1655 Pal Ewa Beach,	hika Street		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						YES
APPLY PHONE	: 808-681-3000			FAX: 681-3004	EMAIL: \	www.eahhousing.or	g
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:	0					
One E	3drm: 4	1279	2.5x rent	674	1	3	
Two E	3drm: 28	1524	2.5x rent	797	2	5	
Three E	3drm: 20	1750	2.5x rent	1119	3	7	
Four B	Bdrm:	0					YES
	NT IS 30% OF INCOM TSP/VLI Income Limits.		ITILITIES INCL Vater/Sewer/Tr			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 12
AGE CRITERIA:						TO REMAIN ON W	
18+ Multi-Family F	Property		WAITLIS	T FOR PARKING:		CALL EVERY	
	ASSET LIMITS:		ARKING INFO Assigned on an pasis. Current d nsurance, safet	"As needed" Irivers license,	PET INFO: Notify man Assistance	agement if have a	ETS OK: NO
AN OWN RESID	DENTIAL PROPERTY:		egistered requi	red	GENERAL	INFO:	
ASSET LIMIT INFO			EASE:			ing property - smok	
Depends on inpute	ed income				Playground	d/Tot lot, Communit oom, Picnic Area, C	y Meeting Room,
INCOME CRITERI						HTF, LIHTC, CDBG	B. HOME. HMMF
Maximum monthly annually	income limits subject t	F	URNISHED: Refrigerator, sto blinds	ove, rangehood,	Application Download		, , , , , , , , , , , , , , , , , , , ,
	IUM MONTHLY INCOM		1220]		

		Last Comp	lete Update:	6/1/2023			AREA:	Kapolei
PROJECT NAME:	VILL	AS AT A'E	ELOA				PROJECT TYPE:	Family
ADDRESS:	91-1118	Namahoe St.	(Mailing addres	ss: 91-1130 Nam	ahoe St.)		PHONE: 808-674	1-4245
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 674-42	46
	<u>, ' </u>			ļ				
MANAGER	: Amano	da Mercado			91-1130	ADDRESS: Namahoe St.		OUT-OF-STATE
APPLY TO	: Locatio	ons LLC			Kapolei	, HI 96707		APPLICATION ACCEPTED:
APPLY ATTN	l: Afforda	able Housing D	ept.					
APPLY PHONE	: 808-67	′ 4-4245			FAX : 674-4246		: locationsrentals.co rentals.aspx	m/affordable-
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:	19	1100	2.25x rent	637			
	Bdrm:	32	1200	2.25x rent				
Three I		20	1500	2.25x rent	1068			
Four	Bdrm:					J]	YES
RENT INFO: RE	NT IS 30)% OF INCOME	E: NO	UTILITIES IN	CLUDED:		TOTA	AL UNITS: 71
Section 8 applicat	ions are			Water and Se			MINIMUM W	
income requireme Must be below 50°	% & 60%						ESTIMATE	(Months): 12
Minimum Income 1 bdrm: \$2182.50-	-\$2322.5	0					MAXIMUM W ESTIMATE	
AGE CRITERIA:	CO /KN /	W1					TO REMAIN ON V	` '
Head of household	d must be	e 18 years or o	lder	WAITI	IST FOR PARKIN	NG:	CALL EVERY	
				PARKING INF		PET INFO): F	PETS OK: NO
				1 assigned pa	arking stall include	ed		
		SSET LIMITS:				J		
AN OWN RESIDE		. PROPERTY:	NO			GENERAI		
ACCET ENVIT IIVI	<u>. </u>			LEASE:	acath to month	_	•	
				year; then r	nonth to month	Accepts		
							or 60%AMI or 50% AMI	
INCOME CRITER		0. 2 noroons \$6	50.050.0	FURNISHED:		Maximum	n Monthly Income be	elow based on 60%
50% AMI: 1 perso persons \$58,800,	4 person	s \$65,300,		Partly furnish	edmajor	- AMI		
persons \$70,560,	60% AMI: 1 person \$54,900, 2 persons \$62,700, 3 persons \$70,560, 4 persons \$78,360, 5 persons \$84,660, 6 persons \$90,900			appliances or	nly	Donwnloa	Application: Donwnload from website Pick up from manager's office	
						NO RESI	PONSE IN 2021	
1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4220		-		
2-PERSONS MAXI	NALINA NAC	NITUI V INICO	ME.	4820				

	Last Comp	lete Update:	6/7/2023			AREA	: Kapolei
PROJECT NAME:	VILLAS AT MA	LU'OHAI				PROJECT TYPE	Family
ADDRESS:	91-1025 Kaiau Ave.					PHONE: 808-88	38-2377
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX:	
MANAGEF	R:			APPLY ADI 91-1025 Ka			OUT-OF-STATE
APPLY TO	D: Villas at Malu'Ohai			Kapolei, HI	96707		APPLICATION ACCEPTED:
APPLY ATTN	N: Resident Manager						YES
APPLY PHONE	E: 808-943-9314			FAX: 946-0572		https://www.locationalicalicalicalicalicalicalicalicalicalic	onsrentals.com/afford
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
	Bdrm: 55	1112	2.25xrent	713			
Three	Bdrm: 16	1329	2.25xrent	940			
Four	Bdrm:						NO
Minimum income voucher. Credit ev tenants. Tenants	requirements waived wi valuation will be done fo must have good landlord meet minimum criminal	th Sec 8 r all d	water, sewer	JEODED.		MINIMUM V ESTIMATE MAXIMUM V	(Months): 12
AGE CRITERIA:			Į.				(Months):
Head of Househo	old 18+		WAITI	IST FOR PARKING:		TO REMAIN ON CALL EVERY	
			PARKING INF		PET INFO:		PETS OK: NO
]	ACCET LIMITO	NONE	2 designated punit	parking stalls per			
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O: own a majority interest in	n residential	LEASE:			oom, air condition schools and recre	
properties	, ,		1 year		Application Pick up ou	n: itside of building n	ear entry door.
INCOME CRITER	RIA:		-				
3 persons \$58,80 60% AMI: 1 perso 3 persons: \$70,56 5 persons: \$84,66	on \$45,750; 2 persons \$: 0; 4 persons \$65,300 on: \$54,900; 2 persons: 60; 4 persons: \$78,360 60; 6 persons: \$90,900 00; 8 persons: \$103,440	\$62,700	Partly furnishe appliances on				
" 1-PERSON MAXIN	MUM MONTHLY INCOM	IE:	4575		ı		
2-PERSONS MAX	IMUM MONTHLY INCO	ME:	5225				

		Last Comp	lete Update:	7/16/2020			AREA	Liliha
ROJECT NAME:	WAE	NA APAR	TMENTS				PROJECT TYPE	Family
ADDRESS:	1320 A	ala St.					PHONE: 808-55	0-0440
CITY:	Honolu	lu	STATE: HI	ZIP:	96817		FAX : 525-68	11
MANAGER	R: Shery	l Oschin, on-site	e manager		APPLY AD			OUT-OF-STAT
APPLY TO):				Honolulu, H			APPLICATION ACCEPTED:
APPLY ATTN	1 :							
APPLY PHONE	E: 808-5	50-0440			FAX : 525-6811	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:							
One	Bdrm:	60	1680	2.5x rent	543			
Two	Bdrm:	196	1840	2.5x rent	745			
Three	Bdrm:	157	2040	2.5x rent	823			
Four	Bdrm:	55	2320	2.5x rent	1046			
Rent subject to ch market value. The 2/13/15	nange or e above	a daily basis d rent pricing bas	ue to ed on				MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0 /AIT LIST (Months): 0
AGE CRITERIA: Head of Househol	ld 18+						TO REMAIN ON V	
Toda of Floudonion	101			WAITLI PARKING INFO		PET INFO		PETS OK: NO
	Д	SSET LIMITS:						
AN OWN RESID		L PROPERTY:				GENERAL		
ASSET LIMIT INF	O:			LEASE:		NO RESI	PONSE IN 2023	
				6 or 12 month	lease			
NCOME CRITER	IA:			,				
Max income limits	s - 140%	AMI		FURNISHED:				
PERSON MAXIN	иим мо	NTHLY INCOM	IE:	7828				
PERSONS MAXI	RSONS MAXIMUM MONTHLY INCOME: 8948							

			lete Update:	12/15/2021			AREA:	Wahiawa
PROJECT NAME:	WAH	<mark>IAWA TE</mark> I	RRACE (H	I <mark>PHA-cen)</mark>	- NOT ACCEP	PTIN	PROJECT TYPE:	Family
ADDRESS:	337 Pali	m St.					PHONE: 808-622	2-6360
CITY:	l Wahiaw	a	STATE: HI	ZIP:	96786		FAX : 622-636	52
MANAGER	! .limarv	Quinones			APPLY ADD	DRESS:		
		Qu			1002 North			OUT-OF-STATE
APPLY TO					Honolulu, H NOT ACCEI	l 96817 PTING APPLIO	CATIONS	APPLICATION ACCEPTED:
		CCEPTING AF						NO
APPLY ATTN		applications office of the community of						
EMAIL: hphaishereforyou.org APPLY PHONE: 808-832-5961 FAX: 832-3461								
					-			
Unit	Туре:	Number	55115	Minimum INCOME	00.55	MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:							
One I	Bdrm:	12	0		547	1	4	YES
Two I	Bdrm:	16	0		691	2	6	YES
Three I	Bdrm:	24	0		936	3	8	YES
Four I	Bdrm:	8	0		1200	4	10	YES
RENT INFO: RE Minimum Rent: \$0	for Fede	eral Low Incom		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	. ,
Head of household	d must be	e 18 years or o	lder	WAITI	IST FOR PARKING:		CALL EVERY	(Months): 12
				PARKING INF		PET INFO:	F	PETS OK: YES
]	AS	SSET LIMITS:	NONE			the catego	imals ok, but only ories listed below: nder 25 lbs) or cat	
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INFO		hu		LEASE:			NCES: Domestic Vin transitional shelter	
Carinot own a nou	ise on Oa	ariu		1 year		displaced.		,
						Funding: F	ed Low Inc Pub Hs	sing 100%
INCOME CRITERI	IA:						ons must be 3 yrs	
ncome Eligibility =			050	FURNISHED:		crystal me	thamphetamine or	sex offender
Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	00; 3 pers 00; 5 pers 00; 7 pers	sons - \$68,500 sons - \$82,200	· ; ·	Partly furnishedmajor appliances only, no carpet				
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	4570		-		
2-PERSONS MAXI	NALINA NAC	NTHI V INCO	ME:	5220				

	Last Comple	ete Update:	12/15/2021			4054	Waianae
PRO IECT NAME:	WAIMAHA/SUN	IEI OWED	/UDUA_IA	a) - CLOSED		AREA: PROJECT TYPE:	
	85-186 McArthur St.	IFLOWER	(HIFHA-IC	e) - CLOSLD		PHONE: 808-697	J. 4
ADDITEOU.	05-160 MCAITIUI St.				'	FAX: 697-717	
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX. 697-717	4
MANAGER	: Mandy Miyamoto			APPLY ADD			
ADDLY TO	A. LIDLIA			1002 North S Honolulu, HI	96817		OUT-OF-STATE APPLICATION
APPLY TO): HPHA			NOT ACCEF	PTING APPLICA	ATIONS	ACCEPTED:
APPLY ATTN	I: Oahu applications offic	ce					NO
					EMAIL: hp	ohaishereforyou.o	rg
APPLY PHONE	<u>:</u> 808-832-5961			FAX : 832-3461			
Unit	: Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:						
One I	Bdrm: 52	0		513	1	4	YES
Two	Bdrm: 46	0		650	2	6	YES
Three I	Bdrm: 32	0		991	3	8	YES
Four I	Bdrm:						
Minimum Rent: \$5 Security Deposit is *********WL CLOS Timoly response to	NT IS 30% OF INCOME 50 for Federal Low Incomes equal to rent amount EED 8/2/2016*****	e projects		owance for electricity	Т	TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W. CALL EVERY	(Months): 36 AIT LIST (Months): 60 AITLIST
	, , , , , , , , , , , , , , , , , , ,		WAITL PARKING INF	IST FOR PARKING:	PET INFO:	P	ETS OK: YES
			Included	0.	Subject to a		2.0 0.0 [120
	ASSET LIMITS:	NONE					
AN OWN RESI	DENTIAL PROPERTY:				GENERAL IN	NFO:	
ASSET LIMIT INF	O:		LEASE:			CES: Domestic V	
			1 year		displaced.	transitional short	ors, involuntary
					Funding: Fe	d Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:	,				ns must be 3 yrs a	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,2 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		FURNISHED: Partly furnishe appliances on		crystal meth	amphetamine or s	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛE:	5220				

		Last Comp	lete Update:	10/16/2023				AREA:	Waimanalo
PROJECT NAME:	WAIN	MANALO A	APARTME	NTS			PRO	JECT TYPE:	Family
ADDRESS:	41-545	Hihimanu St.					PHO	NE: 808-259	9-5649
CITY:	Waimar	nalo	STATE: HI	ZIP:	967	95	F	EAX : 259-970	05
MANAGER	R: Linda \	/illarrreal, Resi	dent Manager		41-5		S: Street, Waima	analo,	OUT-OF-STATE
APPLY TO): Waima	inalo Apartmen	ts		нам	aii 96795			APPLICATION ACCEPTED:
APPLY ATTN	1 :								YES
APPLY PHONE	E: 808-25	9-5649			FAX: 259-9		EMAIL: waim: waim:	analo@cmi.ne analoapartme	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ F	T. NU	-	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio:					_			YES
	Bdrm:	37	1473	2.5xrent	576			3	YES
	Bdrm:	28	1768	2.5xrent	720 864			7	YES
Three		8	2043	2.5x rent	1134	= =	_	9	
Four	Bdrm:	2	2280	Z.JX Territ	113			9	YES
RENT INFO: RE Rent range - 1 bdrm - \$1093 - \$ 2 bdrm - \$1312 - \$ 3 bdrm - \$1516 - \$ 4 bdrm - \$1691 - \$	\$1312 \$1575 \$1819, 2	bath	E: NO	UTILITIES INC				MINIMUM W ESTIMATE MAXIMUM W	(Months):
AGE CRITERIA:				le.			TOD	ESTIMATE EMAIN ON W	` '
Head of household	d must be	e 18 years or o	lder	\^/^ T	IST FOR PAF	DKINO:	_	CALL EVERY	
				PARKING INF	_		T INFO:	F	PETS OK: NO
]				Parking includ	ed				
	AS	SSET LIMITS:	NONE			<u> </u>			
AN OWN RESIDE		PROPERTY:	YES				ENERAL INFO		raitlist; vacancies
A COLUMN III	<u> </u>			LEASE: 6 months		ar Ba	re filled on a fil arbecue area,	st-come, firston on bus line	-serve basis.
							tp://www.waim	•	
INCOME CRITER Maximum Annual 2 persons - \$62,86 4 persons - \$78,66	Income: 80; 3 per			FURNISHED: Partly furnishe appliances onl		A: Scien	nsite mgmt by pplication: sk manageme end request w nvelope ick up from ma equest throug	nt to mail it ith self-addres	ssed stamped
1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4585		P			
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	5240					

	Last Comple	ete Update:	10/16/2023			AREA:	Waimanalo
PROJECT NAME:	Waimanalo Em	ergency S	<mark>helter; p</mark> i	reviously We	einber	PROJECT TYPE:	Emergency
ADDRESS:	41-490 Saddle City Rd.					PHONE: 808-204	I-0982
CITY:	Waimanalo	STATE: HI	ZIP:	96795		FAX : 744-061	6
MANAGER	t: Destiny, Site Manager			APPLY A	DDRESS:		OUT-OF-STATE
APPLY TO) :						APPLICATION ACCEPTED: NO
APPLY ATTN	l:						NO
APPLY PHONE	: 204-0982			FAX: 744-0616	EMAIL:	www.kahumana.org	J
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio: 8		1	180	2	4	
One	Bdrm: 8			420	3	4	
Two	Bdrm: 7			550	3	6	
Three	Bdrm: 7			950	5	10	
Four	Bdrm:						NO
RENT INFO: RE Emergency Shelte 30%; cap \$250/me			JTILITIES INC	CLUDED:		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 0
AGE CRITERIA: 18yo						TO REMAIN ON W CALL EVERY	
		ı	WAITL PARKING INF	IST FOR PARKING	S: PET INFO); F	PETS OK: NO
				,	ADA certi	fied with documenta	
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:	NO			GENERAI	_ INFO:	
ASSET LIMIT INF	O:		EASE:		Must part casework	icipate in programs a er.	as determined by
			Program agre	eement: 90 Days	Must follo	nd on site. ow Program Rules. villing to work if not c	disabled.
INCOME CRITER	IA:						
None			Stove refrige	rator, no carpet,	-		
			inflatable mat	tress if needed			
1 DEDCON MAYIN	IUM MONTHLY INCOME						

	Last Comple	ete Update:	12/15/2021			AREA:	Waimanalo
PROJECT NAME:	WAIMANALO H	OMES I 8	k II (HPHA	-wind) - NOT	ACC	PROJECT TYPE:	Family
	Humuniki St. & Humuna			, ,		PHONE: 808-233	3-3766
						FAX: 233-376	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		1200	-
MANAGER	R: Roberta Kahele			APPLY AD			OUT-OF-STATE
APPLY TO): HPHA NOT ACCEPTING APF	PLICATIONS		Honolulu, I		IT APPLI G APPLICATIONS ACC	
APPLY ATTN	I: Oahu applications offic NOT ACCEPTING APP						NO
APPLY PHONE	E: 808-832-5961			FAX: 832-3461	EMAIL: h	nphaishereforyou.o	rg
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
	Bdrm: 19			077			YES
Three		0		1017	3	8	YES
	Bdrm: 4	0		1171	4	10	YES
	NT IS 30% OF INCOME: 0 for Federal Low Income 8/2/2016******		Water and alloand gas	SLODED: owance for electricity	′	MINIMUM W ESTIMATE MAXIMUM W	(Months): 36 AIT LIST
AGE CRITERIA:						ESTIMATE TO REMAIN ON W	
Head of household	d must be 18 years or old	er	WAITL	IST FOR PARKING		CALL EVERY	
			PARKING INF	O:	PET INFO:		PETS OK: YES
1	ASSET LIMITS:	NONE			the categor	imals ok, but only ories listed below: nder 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INF	-		LEASE: 1 year		victims; ho Displaced.	NCES:(A) domest meless in transitior (B) substandard h (C) others = indefin	nal shelter; invol. sing; rent >50%
INCOME CRITER	IΔ·				Funding: F	ed Low Inc Pub Hs	ing 100%
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$53,2 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	:50;	FURNISHED: Partly furnishe appliances or		All convicti	gibility=80% of AMI ons must be 3 yrs a champhetamine or s	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		į.		
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

		Last Comple	ete Update:	6/24/2024			AREA:	Waipahu
PROJECT NAME:	WAIPA	HU HAL	L ELDER	LY			PROJECT TYPE:	Elderly
ADDRESS:	94-1060 W	/aipahu St.					PHONE: 808-671	I-3801
							FAX: 680-045	56
CITY:	Waipahu		STATE: HI	ZIP:	96797		,	
	Kelsey Cl		ior Community istant Commur ent Inc.		APPLY AD Waipahu H 94-1060 W Waipahu, H	all aipahu St., Offi	ce	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	:: 808-671-	3801			FAX : 680-0456	EMAIL:	waipahu@cmiweb.	net
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	72	0		636	1	3	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE Max rent is \$1465			YES	UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 18 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	
Head of household disabled. Other m children, grandchil of age and older.	nembers of	the household	d may be	WAITL PARKING INF	1.20	PET INFO:	CALL EVERY	(Months): YES (some
	ASS	ET LIMITS:	NONE]	,	1
AN OWN RESID		ROPERTY:	NO			GENERAL		
Income from asse maximum income set n the near futu	ts cannot p . Asset limit			LEASE: 1 year, then n	nonth-to-month	Bbq Area of Recreation A gated co	enter & social activi & lush landscaping n room with tv ommunity on buslind anagement rcom system	
INCOME CRITERI		 person - \$48.7	750: 2	FURNISHED:		Recycling Transporta	program ation to Shopping a	vailable through
persons - \$55,700			,	Partly furnishedmajor Applica appliances only, laminate tile floor, tub shower. Reque			harities Hawai'l n: y email waipahu@c gement to mail it ım Manager's office	
1-PERSON MAXIM	IUM MONT	HLY INCOME	<u>:</u>	4062		J.		

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4642

Last (Complete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME: WAIPAHU	I (HPHA-lee) -	NOT ACC	EPTING APPS	<u>s</u> 1	PROJECT TYPE:	Family
ADDRESS: 94-111 Pupuole					PHONE: 808-483	3-2550
					FAX: 483-255	52
CITY: Waipahu	STATE: HI	ZIP:	96797		,	
MANAGER: Marcus Asami			APPLY ADD			
			1002 North \$ Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO: HPHA NOT ACCEPTION	NG APPLICATIONS			PTING APPLICA	ATIONS	ACCEPTED:
APPLY ATTN: Oahu applicatio	ns office					NO
	NG APPLICATIONS			EMAIL: h	phaishereforyou.o	ra
APPLY PHONE : 808-832-5961			FAX: 832-3461		p	.9
		Minimum		MINIMUM	MAXIMUM	
Unit Type: Number of UNIT		INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
OI UNIT	S. KENT.	Required:	3011.	of People	People:	Allowed.
Studio:						
One Bdrm:						
Two Bdrm: 13	0		650	2	6	YES
Three Bdrm: 6	0		817	3	8	YES
Four Bdrm:						
		,		,		
RENT INFO: RENT IS 30% OF IN	COME: YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 19
Minimum Rent: \$0 for Federal Low I	ncome projects	Water and ele	ctricity		MINIMUM W	AIT LIST
********* CLOSED 8/2/2016*****					ESTIMATE	
					MAXIMUM W	
J		įt			ESTIMATE	(Months): 60
AGE CRITERIA: Head of household must be 18 year	es or older			Т	O REMAIN ON W CALL EVERY	
Tread of flodsefloid flidst be 10 year	3 Of Older		IST FOR PARKING:	DET INIEO		
		PARKING INF	O:	PET INFO:	mals ok, but only o	PETS OK: YES
		moluucu		the categori	es listed below:	
	MITS: NONE			,	der 25 lbs) or cat	
AN OWN RESIDENTIAL PROPE ASSET LIMIT INFO:	RTY: NO			GENERAL II	NFO: ICES: Domestic \	/iolence victims:
Cannot own a house on Oahu		LEASE:		homeless in	transitional shelt	
		1 year		displaced.		
				Funding: Fe	ed Low Inc Pub Hs	sing 100%
INCOME CRITERIA:					ons must be 3 yrs namphetamine or	
ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person	- \$53 250·	FURNISHED:		Crystal meti	iamphetamine or	sex offerfider
2 persons - \$60,900; 3 persons - \$6	8,500;	Partly furnishe appliances on				
4 persons - \$76,100; 5 persons - \$8 6 persons - \$88,300; 7 persons - \$9		''	,			
8 persons - \$100,450						
]		1]		
1-PERSON MAXIMUM MONTHLY IN	ICOME:	4570				
2-PERSONS MAXIMUM MONTHLY	INCOME:	5220				

		Last Compl	ete Update:	12/15/2021			4054	Waipahu
PPO IECT NAME:	\A/ A I E	У ПП П /П	DHA Ioo)	NOT ACC	EPTING APP	2	AREA: PROJECT TYPE:	Family
		Pupupuhi St.	PHA-lee)	- NOT ACC	CEPTING APP	<u> </u>		<u> </u>
ADDITEOU.	94-132	r upupuni St.					PHONE: 808-483 FAX: 483-255	
CITY:	Waipah	u	STATE: HI	ZIP:	96797		FAX. 463-255	2
MANAGER APPLY TO): HPHA	s Asami	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCEF	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		applications offic CCEPTING AP				EMAIL -	h.m.b. a.; a.b. a.m.afa.m. a.v. a.	NO
APPLY PHONE	: 808-83	2-5961			FAX : 832-3461	EMAIL:	hphaishereforyou.o	⁻ g
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:							
Two	Bdrm:	16	0		635	2	6	YES
Three	Bdrm:	4	0		822	3	8	YES
Four	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 ***********************************) for Fede	eral Low Income		UTILITIES INC			MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE	(Months): 36
AGE CRITERIA: Head of household	d muet h	a 18 years or old	der				TO REMAIN ON W CALL EVERY	
li lead of flouserion	u must b	e to years or on	Jei	WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: YES
	A	SSET LIMITS:	NONE	Included	O.	multiple an	nimals ok, but only or ries listed below: nder 25 lbs) or cat	
AN OWN RESI	DENTIAL	. PROPERTY:	NO			GENERAL	INFO:	
Cannot own a hou		ahu		LEASE:			NCES: Domestic V in transitional shelte	
						1 '	ed Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:					All convict	ions must be 3 yrs a	ago, unless it's
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 per 00; 5 per 00; 7 per	1 person - \$53,2 sons - \$68,500; sons - \$82,200;	250;	FURNISHED: Partly furnishe appliances on		crystal me	thamphetamine or s	sex offender
1-PERSON MAXIM	10M MUI	NTHLY INCOME		4570		k		
2-PERSONS MAXI	NALINA NAC	NITHI Y INCOM	1 ⊑·	5220				

Last Comple	te Update: 10/16/20	023		AREA:	Waipahu
PROJECT NAME: WAIPAHU TOW	ERS			PROJECT TYPE:	Family
ADDRESS: 94-337 Pupumomi St.				PHONE: 808-75	3-9440
CITY: Waipahu	STATE: HI ZII	P: 96797		FAX:	
MANAGER: Sonja Tupua			ADDRESS: aialae Avenue, S	Suite 200	OUT OF STATE
APPLY TO: Mark Development, Inc			u, HI 96816	ouite 200	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:					YES
APPLY PHONE : 808-735-9099		FAX: (781)295		L: https://www.mdiha	waii.com/waipahutow
Unit Type: Number of UNITS:	RENT: Minim INCC Requ	OME SO ET.	MINIMUM Number of People	Number of	CAREGIVER Allowed:
One Bdrm: 2	0	482	1	4	
Two Bdrm: 62	0	684	2	5	YES
Three Bdrm:					YES
30% of household's income	Electricit	y and water		MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:	Į.			ESTIMATE TO REMAIN ON V	
Head of household must be 18 years or old	er	AITLIST FOR PARKIN	NG:	CALL EVERY	
	PARKING		PET INF	O: I	PETS OK: NO
ASSET LIMITS:		included a charge for additional			
AN OWN RESIDENTIAL PROPERTY:			GENERA	AL INFO:	
ASSET LIMIT INFO:	LEASE:		Amenitie Laundry	es: Recreation Area, Room	Playground,
	1 year		Funding	: Project based Sec 8	3
INCOME CRITERIA:			Credit &	Criminal checks	
Maximum Annual Income: 1 person - \$42,2 2 persons - \$48,200; 3 persons - \$54,350; 4 persons - \$60,250; 5 persons - \$65,100		rnishedmajor		ion:https://www.mdih Pick up from manage	
-PERSON MAXIMUM MONTHLY INCOME	: 3516				

	Last Compl	ete Update:	12/16/2021			AREA:	Moilili
PROJECT NAME: W	EINBERG HA	LE			F	PROJECT TYPE:	Singles or Couple
ADDRESS: 273	34 S. King St.					PHONE: 808-946	6-6953
CITY: Ho	nolulu	STATE: HI	ZIP:	96826		FAX: 973-060	05
MANAGER: C	hris Gerson			APPLY AD	DRESS: m case manager		OUT-OF-STATE
APPLY TO: H	ousing Solutions, Inc	÷.		1.0.0.1.0.1	caccaage.		APPLICATION ACCEPTED:
APPLY ATTN: C	hris Gerson						NO
APPLY PHONE: 94	46-6953		ı	FAX : 973-0605	EMAIL: ch	nris@hsiservices.i	net
Unit Typ	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studi	io : 60	1250		266	1	2	
One Bdr	m:						
Two Bdr	m:						
Three Bdr	m:						
Four Bdr	m:						
RENT INFO: RENT Security Deposit \$125 Section 8 accepted Shelter + Care progra or other housing vouc	m		JTILITIES INCL			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1 AIT LIST (Months): 6
AGE CRITERIA: Head of household mi	ust be 18 years or ole	der			Т	O REMAIN ON W CALL EVERY	
	·	F	WAITLIS PARKING INFO	T FOR PARKING: YES	PET INFO:	F	PETS OK: YES
	ASSET LIMITS:	F	Tenant parking sore approved by guest parking is	\$40/month; when management,	Under 25 po	unds; limit 1 per u	unit
AN OWN RESIDEN	ITIAL PROPERTY:	NO	oetween 7am to	10pm.	GENERAL IN	NFO:	
ASSET LIMIT INFO:			EASE: Month to month		Funding: Shelter + Ca Funding: RI	areProgram and S HTF	ection 8 100%
INCOME CRITERIA:			URNISHED:	ize refrigerator,	Application: Ask manage Send reques envelope Pick up from	ement to mail it st with self-addres n manager's office st to maretta@hs	
-PERSON MAXIMUM	MONTHLY INCOME	<u> </u>	1230		J		

	Last Co	omplete Update	7/16/2020			AREA:	Lanakila
PROJECT NAME:	WEINBERG	SENIOR F	RESIDENCE	AT MALUHI	A	PROJECT TYPE:	Elderly
ADDRESS:	1111 Hala Dr.					PHONE: 808-842	2-1082
CITY	J	CTATE.	710.	200/=		FAX: 843-015	57
CITY:	Honolulu	STATE:	HI ZIP :	96817		·	
MANAGER	: Canary McClintor	n, Resident Mana	ager	APPLY A	ADDRESS:		
APPLY TO	: Bob Tanaka, Inc.				o Place, Suite 10 , HI 96826	03	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						YES
APPLY PHONE	: 808-949-4111			FAX : 949-7211	EMAIL:		
Unit	Type: Number of UNITS	: RENT:	Minimum INCOME Required	E CO ET.	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One E	3 9	0		400+	1	3	YES
	Bdrm:						
Three F							
Fourt	sariii.	J			,	,	
Preference is no lo frail (needing help living eg: eating, d	NT IS 30% OF INC onger given to appli with at least 3 activ ressing, shopping, sit equal to 1 month er)	cants who are rities of daily etc.) Minimum	UTILITIES IN	NCLUDED: utility allowance		MINIMUM W ESTIMATE MAXIMUM W	(Months): 12 AIT LIST
AGE CRITERIA:	·		,			ESTIMATE TO REMAIN ON W	
Head of household	d and co-tenants mo application. Caregio		PARKING IN	TLIST FOR PARKING NFO: YES uded but limited	G: PET INFO	CALL EVERY	
1	ASSET LIMI	TS: NONE		adda bat iiiiiitda			
AN OWN RESID	DENTIAL PROPER				GENERAL	_ INFO:	
ASSET LIMIT INFO Must not wholly ov real estate.	O: vn a majority interes	st in residential	LEASE:		accessibl shoot and lanai area allowed w	hower and closet, we, community center distandry room on eas, storage lockers. With MD letter; can we have the standard to the	r. Lounge, trash ach floor. Covered Caregivers are ork outside home
INCOME CRITERI	A:				site mana	s there's other care t ager, interior landsc Activity Coordinator;	aped courtyard.
MUST BE LESS T (Project follows Ht			disposal, Fu	gerator, garbage ully furnishedexcept rpet and vinyl	Funding:	HUD PRAC 202	Opened 1990
1-PERSON MAXIM	IUM MONTHLY INC	COME:	3821				

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		Last Compl	ete Update:	5/14/2024			AREA:	Ewa
PROJECT NAME:	WES	T LOCH E	LDERLY \	/ILLAGE			PROJECT TYPE:	Elderly
ADDRESS:	91-1472	Renton Rd.					PHONE: 808-681	-0562;
CITY:	Ewa Bea	ach	STATE: HI	ZIP:	96706		FAX: 681-414	10
]		ļ					
	Lisa Oa	ti Lauaki - Resio asay - Project A Affordable Pro	Admin Assistant		APPLY AI 91-1472 R 96706	DDRESS: Renton Road, Ewa	a Beach, Hi	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	:: 808-68	1-0562			FAX: 681-4140	EMAIL: k	oanetil@hawaiiaffo	ordable.com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	90	865	2x rent	556	1	2	YES
One I	Bdrm:	60	940	2x rent	686	1	3	YES
	Bdrm:							
Three I								
Four I	Bdrm:							NO
RENT INFO: RE No application fee Limited number of check with manag Waitlist purged ev respond or will be AGE CRITERIA:	subsidie ement co	es available (ma ompany. onths; applicants	x of \$170)	Gas (for stove water	CLUDED: e and water heater) :		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 AIT LIST (Months):
All residents must				\A/A ITI	LIST FOR PARKING		O REMAIN ON W CALL EVERY	
be 55+. Handicap age requirement.	or disab	oled persons ne	ed to meet	PARKING INF		PET INFO:	F	PETS OK: YES
J.	AS	SSET LIMITS:	YES	Stalls assigned	There 3 parking stalls. ed on first come	1 cat, birds, Reg. w/ mg	fish, or 1 dog und mt & vets "clean b	er 30 pounds. ill of health"
AN OWN RESID		. PROPERTY:	NO	first serve and	d waitlist.	GENERAL I		
only if income from income. Rental unit must b	n assets		over	LEASE: 1 year		has a sepa Funding: Pa Asst Prgm Recreation	hall with tv, 24/7 S	sliding door. City Housing Rntl ent Supplmnt Prgm security; Resident
INCOME CRITERI Maximum Annual 1 person - \$55,000 2 persons - \$62,88 *60% AMI	Income: 0;			FURNISHED: Partly furnish appliances or stove, 1 bdrm fan, bathtub		Shopping a Hawaii; ope walk-up, lar	oordinator; Transpo vailable through C ened 1993; no elev nais p Accessible Units	atholic Charities ator: two-story
1-PERSON MAXIM	IUM MON	NTHLY INCOMI	E:	4583				

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	Last Comp	lete Update:	7/16/2020			AREA:	Salt Lake
PROJECT NAME:	WESTLAKE A	PARTMENT	ΓS			PROJECT TYPE:	Family
	3139 Ala Ilima St. Honolulu	STATE: HI	ZIP:	96818		PHONE: 808-839 FAX: 834-710	
APPLY TO	R: Dana Montero, Reside D: Hawaiian Properties L	•		APPLY ADDRESS: 1165 Bethel St., 2nd Fl. Honolulu, HI 96813			OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	e: 808-839-2027			FAX: 521-2714	EMAIL:	None	
Unit	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Three	Bdrm: 96 Bdrm: Bdrm:	0		872	3	6	
RENT INFO: RE section 8 (project	NT IS 30% OF INCOME based)		UTILITIES INCL Water	LUDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA: Head of househol	d must be 18 years or o		WAITLIS PARKING INFO		PET INFO	TO REMAIN ON V CALL EVERY	
AN OWN RESII ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:		LEASE:	ax 2 stalls	Funding:	_ INFO: g pool, picnic area, Section 8 100% PONSE IN 2021	laundry area
INCOME CRITER 50% AMI 5 persons - \$63,0 6 persons - \$67,6	00		FURNISHED:				

	Last Comple	ete Update:	11/2/2023				AREA:	Wahiawa
PROJECT NAME:	WHITMORE CIP	RCLE APAF	TMENT	S			PROJECT TYPE:	Elderly
ADDRESS:	111 N Circle Makai St.						PHONE: 808-753	3-3973
CITY	<u></u>	STATE: HI	ZID.		00700		FAX: eFax: 3	23-648-8212
CITY:	Wahiawa	STATE: HI	ZIP:		96786		-	
	: Laura Lynn Daniels - Pi				APPLY ADDR 3165 Waialae Hawaii 96816		Honolulu,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Mark Development - 73	5-9099						YES
APPLY PHONE	: 808-753-8474			FAX:	(781)295-3427		http://www.mdihawa laurad@mdihawaii.	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 40	0	<u> </u>		516	1	2	YES
	Bdrm: 4	0		- <u> </u> -	645	1	3	YES
Three E	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE deposit \$1,155 - 1 bedroor \$1,355 - 2 bedroor		V	TILITIES INC /ater and ga esidents are	s include			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	
	d must be 62 years or old nembers of the household		WAITL	LIST FOR	R PARKING:		CALL EVERY	(Months): 6
any age, including	children if head of house		ARKING INF	-O:	N/A	PET INFO:	F	PETS OK: YES
legal guardian.	_	F	arking includ	ded		Pets are a	llowed with restriction	ons
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:	YES				GENERAL	INFO:	
ASSET LIMIT INFO	O:	LI	EASE:				s are allowed with Mome. Caregiver inco	
		1	year			eligibility.3 Built in 199 Pictures a	handicapped acce	ssable units.
INCOME CRITERI	IA:					Smoke Fre	ee; Coin Operated nal Room equipped	laundry facility
50% of Honolulu N	Median Income	F	JRNISHED: artly furnish ppliances or	edmajo	or	television a Educational Open gaze Application	and computers with al and social activiti ebo and outside lou n:Download from m om manager's office	printer es nge area dihawaii.com
1-PERSON MAXIM	IUM MONTHLY INCOME	: 3	004]		
2-PERSONS MAXI	MUM MONTHLY INCOM	E: 3	433					

Last Complete Update:	12/26/2023	AREA: Makiki
PROJECT NAME: WILDER VISTA		PROJECT TYPE: Family
ADDRESS: 1618 Punahou St.		PHONE: 808-947-4846
CITY: Honolulu STATE: HI	ZIP: 96822	FAX : 956-1446
MANAGER: Yvette James, Resident Manager APPLY TO: Locations	APPLY ADI P.O. Box 22 Honolulu, H	2420 OUT-OF-STATE
APPLY ATTN: Property Management Division		YES
APPLY PHONE : 808-738-3100	FAX : 735-1978	EMAIL: http://www.locationsrentals.com/afforda ble-rentals.aspx
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required: SQ FT:	MINIMUM Number of of People MAXIMUM Number of People: CAREGIVER Allowed:
One Bdrm: 6 500	2.5x rent 525	
Two Bdrm: 48 1260 Three Bdrm:	2.5x rent 600	
Four Bdrm:		YES
RENT INFO: RENT IS 30% OF INCOME: NO LIHTC property Section 8 certificate holders need not meet the min gross income requirement.	UTILITIES INCLUDED: Water & Sewer	MINIMUM WAIT LIST ESTIMATE (Months): ESTIMATE (Months):
AGE CRITERIA:		TO REMAIN ON WAITLIST
Head of household must be 18 years or older	WAITLIST FOR PARKING: PARKING INFO: NO	CALL EVERY (Months): 6 PET INFO: PETS OK: NO
	61 parking stalls	
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES		GENERAL INFO:
ASSET LIMIT INFO: All income from assets is verified to determine	LEASE: 6 months; then month-to-month	open January 2004 bathroom has linen closet and pantry in 2bdrm units
eligibility.	o monars, aren monar to monar	Funding: LIHTC, RHTF, Section 8
INCOME CRITERIA:	,	
Food stamps accepted to help meet min. income criteria. 30% of AMI: 1 Person \$27,510, 2 persons \$31,440 50% of AMI: 1 Person \$45,850 2 persons \$52,400	FURNISHED: Partly furnishedmajor appliances only. No carpet.	
1-PERSON MAXIMUM MONTHLY INCOME:	3820	

		Last Comp	lete Update:	7/16/2020			AREA:	Wahiawa
PROJECT NAME:	WILI	KINA PAR	K				PROJECT TYPE:	
ADDRESS:							PHONE: 808-622	2-6125
CITY	 		STATE: HI	ZIP:	00700		FAX: 622-612	
CITY:	Wahiawa	a	STATE: HI	ZIP:	96786		·	
MANAGER	R: Debra I	Fong			APPLY AD	DDRESS:		OUT-OF-STATE
APPLY TO): Wilikina	a Park Apartm	ents		On-Site			APPLICATION ACCEPTED:
APPLY ATTN	1 :							YES
APPLY PHONE	E: 808-62	2-6125			FAX: 622-6127	EMAIL: \	wilikinapark@sand	alwoodmgt.com
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:	45	800	2xrent	479	1	2	YES
One	Bdrm:	19	875	2xrent	627	1	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
Market Rents: stu Longer waits for o At move in: must equivalent deposit	dio - \$800 ne bedroo pay ONE	O, one bdrm - \$ om. full month's re	875.	UTILITIES INC Water, trash ar			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
AGE CRITERIA:				įt.			ESTIMATE	
One member mus				\A/AITI I	ST FOR PARKING		TO REMAIN ON W CALL EVERY	
18+, roommate ca allowed over 18yrs				PARKING INFO		PET INFO:	F	PETS OK: YES w/
]	AS	SSET LIMITS:	NONE	Long w/l for pa is included	rking, but parking	Birds, fish, note.	and small dogs Ol	K with doctor's
AN OWN RESI	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF	·O:			LEASE: 1 year		clubhouse, maintenand 5 handicap	CCH shopping van trash chute on eve ce person lives on ped units (3 for mo	ery floor, site.
INCOME CRITER	IA:					impairment Funding: L	ow Income Housin	g Tax Credit &
MAXIMUM incom 1 person - \$43,98 2 people - \$50,220	0			Partly furnishe appliances on! Bathtubs in all ground floor.		-	istance Program ONSE IN 2021	
 1-PERSON MAXIN	MUM MON	NTHLY INCOM	IE:	3665		<u> </u>		
2-PERSONS MAXI	IMUM MC	NTHLY INCO	ME:	4185				

		Last Comp	lete Update:	5/8/2023			AREA:	Chinatown
ROJECT NAME:	WINS	STON HAI	LE				PROJECT TYPE:	Family
ADDRESS:	1055 R	iver St.					PHONE: 808-744	4-1307
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX: 744-13	08
MANAGER	R: Justin	Gonsalves, Sit	e Manager		APPLY ADD			OUT-OF-STAT
APPLY TO): Hawai	ii Affordable Pro	operties Ltd.		Honolulu, HI			APPLICATION ACCEPTED:
APPLY ATTN	l : Manaզ	ger						
APPLY PHONE	: 808-7 <i>4</i>	44-1307			FAX: 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
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
Timely reponses t required	o comm	unication by pro	oject is	Gas, electricity	and water		MINIMUM W ESTIMATE MAXIMUM W	(Months):
AGE CRITERIA:			, i				ESTIMATE	` / P
Head of househole	d must b	e 18 years or o	lder	\A/AI T I I			TO REMAIN ON V CALL EVERY	
				WAITE PARKING INF	O: NO	PET INFO:		PETS OK: NO
	Δ	SSET LIMITS:	NONE	Parking not av	railable	Per reasor managem	nable accomodation ent.	n from
AN OWN RESI						GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE:		Funding: u	ınknown	
				1 year				
NCOME CRITER	IA:							
Maximum Annual 1 person - \$54,90 2 persons - \$62,70	0;			FURNISHED: Partly furnishe allpiances only				
-PERSON MAXIM	1UM MO	NTHLY INCOM	IE:	4220]		
PERSONS MAXI	МИМ М	ONTHLY INCO	ME:	4820				

		Last Comp	ete Update:	5/14/2024			AREA:	Ala Moana
PROJECT NAME:	WIST	ERIA VIS	TA				PROJECT TYPE:	Elderly
ADDRESS:	1239 Sc	outh King St.					PHONE: 808-808	3-597-8963
CITY:	Honolul	u	STATE: HI	ZIP:	96814		FAX : 735-197	78
MANAGER	R: Kayla l	Kedro, Residen	t Manager		APPLY ADD			
APPLY TO): Wisteri	ia Vista			1239 S King Honolulu, HI			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Reside	ent Manager						YES
APPLY PHONE	: 808-59	7-8963			FAX: 808-735-1978		http://www.locationsble-rentals.aspx	srentals.com/afforda
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	91	805	Ovront	384			YES
-	Bdrm:	91	805	2xrent	304			
Three								
Four	Bdrm:							YES
SNAP benefits ca income requireme need not meet the	nt. Section	on 8 certificate	holders	Water & Sewe	r		MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
				Į.			ESTIMATE	ļ
AGE CRITERIA: All residents must	: be 62 or	older		\\/ \ I.T. I	IST FOR PARKING:		TO REMAIN ON W	
				PARKING INF		PET INFO:	. F	PETS OK: NO
]	AS	SSET LIMITS:	NONE	stalls are assistis restricted to	2 stalls; once all sgned, occupancy tenants without a			
AN OWN RESID		PROPERTY:	YES	vehicle.		GENERAL		
ASSET LIMIT INF	<u>o.</u>			1 Year		conditione and multi- social wor Walking d	able and phone sep ed units. Coin-opera purpose room on si ker available on site istance to grocery s its. Has emergency	ated laundry room te. Library. CCH e 2x per week. tore, bus line and
INCOME CRITER		200/ ABAI		ELIDA"OLIES		opened 20		
Maximum annual 1 person - \$45,8: 2 persons - \$52,40	50	ou% Aivii:		FURNISHED: Partly furnishe appliances, vir window mini b bathtub.			ation to Shopping a Charities Hawaiʻl	vailable through
I 1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	3820		Į.		
2-PERSONS MAXI	IMUM MO	ONTHLY INCOM	ME:	4366				