		Last Comp	lete Update:	4/16/2024			AREA	.: Makiki
ROJECT NAME:	1506	P'IKOI AI	PARTMEN	TS			PROJECT TYPE	Family
ADDRESS:	1506 Piil	koi St.					PHONE : 808-53	86-1506
CITY:	Honolulu	I	STATE: HI	ZIP:	96822		FAX:	
MANAGER	R: Pam Sa	akai			APPLY AD	DDRESS:		OUT-OF-STAT
APPLY TO	: Contac	t Pam Sakai fo	or an application					APPLICATION ACCEPTED:
APPLY ATTN	۷:							
APPLY PHONE	E: 808-536	6-1506			FAX: 973-0605	EMAIL:	pams@hsiservice	s.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:		800			1	2	
One	Bdrm:		900			1	3	
Two	Bdrm:		1200			4	5	
Three	Bdrm:		1500			5	7	
Four	Bdrm:							
RENT INFO: RE			, in to	Electricity, wat	er, sewer, and refus	se	MINIMUM V ESTIMATE MAXIMUM V	VAIT LIST
AGE CRITERIA:				įt.				(Months):
18 and older				\A/A T	CT FOD DADKING		TO REMAIN ON CALL EVERY	
				PARKING INF	ST FOR PARKING O: YES	PET INFO	:	PETS OK: NO
	AS	SSET LIMITS:						
AN OWN RESI		PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	·O:			LEASE:		Call for apoffice Two 3 & 2 All applica	on: Request by ema opointment to pick 2 story walk up buil ants must be exper eness, sheltered or	up from manager's dings. iencing
INCOME CRITER Must not exceed 5 \$45,850; 2 person \$65,500; 5 - \$70,7	50% of HU ns - \$52,40	00; 3 - \$58,950); 4 -	FURNISHED:		to resider convictior offender.	ncy at the project. In two years prior; no Must show legal rofust be able to pay	No violent criminal o registered sex esidency if not a
-PERSON MAXIM	MUM MON	ITHLY INCOM	E:	3821				
-PERSONS MAXI	IMUM MO	NTHLY INCO	ME:	4367				

		ete Update:	4/12/2024			AREA:	,
ROJECT NAME: 1727		ERETANIA	STREET			PROJECT TYPE:	
ADDRESS : 1727 S. I	Beretania St.					PHONE: 808-944	
CITY: Honolulu	I	STATE: HI	ZIP:	96826		FAX : 955-591	5
MANAGER: Josephi	ine Michael			APPLY ADI	DRESS:		OUT-OF-STA
APPLY TO: Housing	g Solutions, Ind	÷.					APPLICATIO ACCEPTED
APPLY ATTN:							
APPLY PHONE: 808-944	4-5020			FAX: 955-5915		/ebsite: https://ww mail: josephine@l	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:	18	942		600	2	4	
Two Bdrm:	5	1131		700	5	7	
Three Bdrm:	0						
Four Bdrm:	0]		
ENT INFO: RENT IS 309	% OF INCOME	: ι	JTILITIES INC	CLUDED:		TOTA	L UNITS: 23
plicants must be homeles meless and have at least dates are required every waitlist.	one child unde	er age 18.	Vater/sewer			MINIMUM W ESTIMATE	(Months):
		Į.				MAXIMUM W ESTIMATE	
E CRITERIA: or older.					Т	O REMAIN ON W CALL EVERY	
0. 0.00			WAITL PARKING INF	IST FOR PARKING: O: YES	PET INFO:	F	PETS OK:
		į	7 II	0. 120			
AS AN OWN RESIDENTIAL	PROPERTY:				J GENERAL II	NFO:	
SET LIMIT INFO:			EASE:			e permanent housi o-bedroom apartm	
			Month-to-mon	th	size of 2-5. risk of being	Applicants must by homeless and ha	e homeless or at ave at least one
COME CRITERIA:		Į.			fee.		
ax \$25,260 1 bdrm ax \$33,930 2 bdrm		F	FURNISHED:				
PERSON MAXIMUM MON	ITHLY INCOM	 ::	0				

	Last Comple	ete Update:	4/11/2024			AREA:	Wahiawa
PROJECT NAME:	220 California					PROJECT TYPE:	Elderly
ADDRESS:	220 California Ave.					PHONE: 808-220)-7671
CITY:	Wahiawa	STATE: HI	ZIP:	96786		FAX: 808-484	1-4051
	: Darlene Higa			APPLY ADD 98-030 Heka Aiea, Hawaii	aha Street #26		OUT-OF-STATE APPLICATION
	Property Profiles Inc. Attn: Darlene Higa						ACCEPTED:
APPLY ATTN	: Property Management	Division					
APPLY PHONE	: 808-220-7671		F	FAX: 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:
	Bdrm: 41	925	1470	403	1	2	
	Bdrm:						
Three F							NO
Fixed rent of \$925 ertificate holders n income requireme	need not meet the miniment.	um gross	ITILITIES INCLU III utilities includ Indone \$25 per month)	JDED: ed except cable & Basic cat	ble	TOTA MINIMUM W ESTIMATE	
	er is sent after application management if contact in					MAXIMUM W ESTIMATE	
AGE CRITERIA:	he 55 or older					TO REMAIN ON W CALL EVERY	
All residents must	be 35 of older		WAITLIST ARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: NO
		-	stall for each u		TET INTO.	<u> </u>	LTO OK. MO
	ASSET LIMITS:				0=11=0.11		
AN OWN RESIL	DENTIAL PROPERTY: O:				GENERAL Opened 20	07. Picnic Area, C	Community
		_	EASE:		area, victor manager. 2 handicap	om, elevator, priva ry garden, visitor pa ped accessible uni	arking, on-site
INCOME CRITERI	IΔ·	,			*Failure to	ted laundry on eac respond to commu	inication from
50% AMI: 1 perso	on \$45,850; 2 persons \$5 epted to help meet min. in	ncome F	URNISHED: Partly furnished- appliances; vinyl garbage disposa shower.	flooring,		ent in a timely manu	
 1-PERSON MAXIM	IUM MONTHLY INCOME	E: 3	3820]		

Last Complete Update	4/12/2024		AREA: Waikiki
PROJECT NAME: 436 ENA ROAD - CLO	SED	PRO	JECT TYPE: Family
ADDRESS: 436 Ena Rd.		РНС	NE:
CITY: Honolulu STATE:	HI ZIP : 96815	F	AX:
MANAGER: UNDER CONSTRUCTION	APPLY AD Appointment		OUT-OF-STATI APPLICATION
APPLY TO:			ACCEPTED:
APPLY ATTN:		EMAIL:	
APPLY PHONE:	FAX:	LWAL.	
Unit Type: Number of UNITS: RENT: Studio: One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: RENT INFO: RENT IS 30% OF INCOME:	Minimum INCOME Required: SQ FT:		MAXIMUM Number of People: 2 TOTAL UNITS: 32
	Electric and water		MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months):
AGE CRITERIA:			EMAIN ON WAITLIST
	WAITLIST FOR PARKING:	_	CALL EVERY (Months): 6
	PARKING INFO:	PET INFO:	PETS OK: NO
ASSET LIMITS:			
AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:		GENERAL INFO	:
ACCE I EMINI IIW C.	- LEASE:		
INCOME CRITERIA:	T. FURNIOUER		
	FURNISHED:		
-PERSON MAXIMUM MONTHLY INCOME:	0]	
2-PERSONS MAXIMUM MONTHLY INCOME:	0		

		Last Comp	lete Update:	8/1/2024			AREA	.: Waikiki
PROJECT NAME:	AINA	HAU VIST	ГА				PROJECT TYPE	Elderly
ADDRESS:	2428 Tus	sitala St.					PHONE: 808-92	26-6700
CITY:	Honolulu	I	STATE: HI ZIP:		96815		FAX:	
MANAGER	R: Bernad	ette Tai			APPLY ADI 2428 Tusita Honolulu, H	ıla St		OUT-OF-STATE APPLICATION
APPLY TO					rionolala, ri	30013		ACCEPTED:
APPLY ATTN		nt Manager's (3-3100	Office		FAX: 735-1978	EMAIL:	/ainahau-vista-1/	ousing.org/apartments
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio: Bdrm:	99	1305	2xrent	403			
	Bdrm:	7	1566	2xrent	607			
Three	Bdrm:							YES
11 Units - 30%AM 88 Units - 50% AM	RENT INFO: RENT IS 30% OF INCOME: NO 11 Units - 30%AMI studio - \$783 88 Units - 50% AMI 1 Bedroom - \$1305 7 Units - 50%AMI 2 Bedroom - \$1566		_	UTILITIES INCLUDED: Electric, water, and sewer			MINIMUM V ESTIMATE MAXIMUM V	(Months): 6
AGE CRITERIA:				Įt.			TO REMAIN ON V	(Months): 12
All residents must	t be 62 or	older		WAITL PARKING INF	IST FOR PARKING:	PET INFO	CALL EVERY	
	AS	SSET LIMITS:	NONE	18 tenant/ 5 h \$40/mo. Once assigned, occ	andicap stalls all stalls upancy to be			TETO OIL MO
AN OWN RESI		PROPERTY:	YES	own a vehicle	enants who do not	GENERAL INFO: Opened 2007. Has Social Worker on site part time. 6 handicapped units. Community room		
				1 year		park/Victo 6 visitor p floor. Fur	en; picnic area, trai ory Garden arking stalls, coin l nding: Low Income	
INCOME CRITER 30% of AMI: 1 per 50% of AMI: 1 per Food stamps accirciteria. Sect 8 cc min. income requi	rson \$29,2 rson \$48,7 epted to h ertificate h	750; 2 persons elp meet min.	\$55,700 income	FURNISHED: Partly furnishe appliances on window blinds flooring, walki	lly; has A/C, s, disposal, vinyl	Credits (50 % of	AMI)	
" 1-PERSON MAXIN	MUM MON	ITHLY INCOM	E:	4062		Į.		
2-PERSONS MAX	IMUM MO	NTHLY INCO	ME:	4641				

	Last Comp	lete Update:	8/1/2024			AREA	.: Waikiki
ROJECT NAME: AIN	AHAU VIS	ΓΑ ΙΙ				PROJECT TYPE	Elderly
ADDRESS: 2426	Tusitala St.					PHONE: 808-92	26-6700
CITY: Hono	lulu	STATE: HI	ZIP:	96815		FAX:	
MANAGER: Berr	nadette Tai			APPLY ADI 2428 Tusita			OUT-OF-STA
APPLY TO: Aina	ıhau Vista II			Honolulu, H			APPLICATIO ACCEPTED
APPLY ATTN: Res	ident Manager's (Office					
APPLY PHONE: 808-	738-3100		I	FAX:		/ainahau-vista-2/	ousing.org/apartment
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	15	1218	2x rent	377			
One Bdrm:	47	1305	2x rent	420			
Two Bdrm:							
Three Bdrm:							
Four Bdrm:							YES
6 units - 30% AMI stud 9 units - 50% AMI stud 11 units - 50% AMI 1 be 6 units - 60% AMI 1 be	io - \$1218 per mo drroom - \$1305 ¡	onth oer month	Electricity, Wate	r, Sewer		MAXIMUM V	VAIT LIST
AGE CRITERIA:						TO REMAIN ON	
55+			WAITLIS	T FOR PARKING:		CALL EVER	
			PARKING INFO		PET INFO		PETS OK: NO
	ASSET LIMITS:		22 parking stalls to 50% and 60% month	s, available only 6 AMI @ \$40 per			
AN OWN RESIDENTI	AL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:		Locked er Communit	ry room for recreat al activities	ional and
NCOME CRITERIA:							
Maximum Income 1 Per 30% AMI \$29,250 50% AMI \$48,750 50% AMI \$58,500	/yr \$33,420/y /yr \$55,700/y	/r /r	FURNISHED: Range/Oven, Ga Refrigerator/Fre floor covering, V Coverings, walk	Vindow			
-PERSON MAXIMUM M			4062]		

	Last Comp	olete Update:	8/1/2024			AREA	McCully
PROJECT NAME:	ARTESIAN VI	STA				PROJECT TYPE	Elderly
ADDRESS:	1828 Young St.					PHONE: 808-94	9-5936; 808-947-4
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX: 949-52	38
MANAGER	₹:			APPLY ADD			OUT-OF-STATE
APPLY TO	: Artesian Vista			Honolulu, HI	96826		APPLICATION ACCEPTED:
APPLY ATTN	: Resident Manager's	Office					YES
APPLY PHONE	E: 808-738-3100			FAX: 735-1978	EMAIL:	https://www.eahho /artesian-vista/	using.org/apartments
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 53	1305	2xrent	420			
	Bdrm: 33	1303	ZXIGIIL	420			
Three	Bdrm:						
Four	Bdrm:						YES
6 units at 30% AM 47 units at 50% A 2 handicapped un to meet min incom		can be used	JTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
<u> </u>	quired to meet min. incl	ome.				ESTIMATE	
AGE CRITERIA: All residents must	be 55 or older		\\/ \ I.T.I	IST FOR PARKING:		TO REMAIN ON V	
		F	PARKING INF		PET INFO	:	PETS OK: NO
]	ASSET LIMITS:		14 parking sta	ills; \$40/ month			
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF	O:		EASE:		is received Has comp closet in b	outer area and com pathroom, walk in sl ub, has kitchen par	munity room, no
INCOME CRITER		- ¢22 420	FURNISHED:			ocial worker	
50% of AMI: 1 per preference for 30%	rson \$29,250; 2 persons rson \$48,750; 2 persons % units given to lowest num income is 2x rent	s \$55,700 income	major appliand	ces, vinyl flooring, linds, a/c. garbage		prox. 9/2006 LIHTC, RHTF, Sect	tion 8
					NO RESP	PONSE IN 2020. LA	ST UPDATE 2019
1-PERSON MAXIN	NUM MONTHLY INCOM	ΛE:	4062				
2-PERSONS MAXI	IMUM MONTHLY INCC	DME:	4641				

	Last Compl	ete Update:	8/27/2024			AREA:	Palama
PROJECT NAME:	BANYAN STRE	ET MANO	R			PROJECT TYPE:	Family
ADDRESS:	1122 Banyan St.					PHONE: 808-843	3-0021
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 376-004	12
MANAGER	t: Shanted Rivera			APPLY ADD 1122 Banyar Honolulu HI	n St.		OUT-OF-STATE APPLICATION
APPLY TO	: Banyan Street Manor			i ioriolala i ii	90017		ACCEPTED:
APPLY ATTN	: Shanted Rivera						YES
APPLY PHONE	E: 808-843-0021			FAX: 376-0042	EMAIL:	manager@banyans	streetmanor.com
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 12			438	1	4	
Two	Bdrm: 42			651	1	6	
Three	Bdrm:						
Four	Bdrm:						NO
30% of adjusted m	NT IS 30% OF INCOME nonthly gross income. ommunication from man r or be removed from war	agement	UTILITIES INC	:LUDED: vater, Trash, Sewer		MINIMUM W ESTIMATE MAXIMUM W	(Months): 24 AIT LIST
AGE CRITERIA:		,				ESTIMATE TO REMAIN ON W	
	d must be 18 years or ol	der at the	WAITLI	ST FOR PARKING:		CALL EVERY	
ите от аррисацог			PARKING INFO	O: NO	PET INFO:	F	PETS OK: NO
1	ASSET LIMITS:	NONE					
AN OWN RESIDE	DENTIAL PROPERTY:				GENERAL		
AGGET ENVIT IN	<u>o.</u>		LEASE: 1 Year		Send reques	n. gement to mail it or est with self-addres om manager's office	ssed stamped
INCOME CRITER					NO RESP	ONSE IN 2023.	
Maximum Annual 1 person: \$48,744 2 ppl: \$55,700 3 ppl: \$62,650 4 ppl: \$69,600			FURNISHED: Partly furnishe appliances onl			d 8/24/2024. ent has changed fro ivera	om Jodie Sakai to
I-PERSON MAXIM	IUM MONTHLY INCOME	:	4062		1		
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛΕ:	4642				

			lete Update:	8/1/2024			AREA	
ROJECT NAME:	BIRC	H STREE	T APARTI	MENTS			PROJECT TYPE	Family
ADDRESS:	916 Birc	h St.					PHONE: 808-59	
CITY:	Honolulu	J	STATE: HI	ZIP:	9681	4	FAX : 589-28	97
MANAGER:	Reside	nt Manager				.Y ADDRESS:		OUT-OF-STA
APPLY TO:	APPLY TO: Birch Street Apartments					lulu, HI 96814		APPLICATIO ACCEPTED
APPLY ATTN:	Reside	nt Manager						YES
APPLY PHONE:	808-73	8-3100			FAX: 735-19		L: https://www.eahho /birch-street-aparti	ments/
Unit 1		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT	MINIMUN Number of People	Number of	CAREGIVER Allowed:
One B	udio: drm:							
Two B		52	1879	2	600			YES
Three B								
Four B	drm:				ļ.			YES
ENT INFO: REN				UTILITIES INC			TOT	AL UNITS: 52
ection 8 certificate ross income requi		s need not mee	et the min	Water, sewer	& trash		MINIMUM V ESTIMATE	
							MAXIMUM V ESTIMATE	
GE CRITERIA: ead of household	must be	19 voore er e	ldor				TO REMAIN ON V	
lead of flousefloid	must be	e to years or o	idei		IST FOR PARI			
				PARKING INF	O: NO	PET INF	- 0:	PETS OK: NO
	AS	SSET LIMITS:	NONE					
AN OWN RESIDI	ENTIAL	PROPERTY:	NO			GENER	AL INFO:	
SSET LIMIT INFO):			LEASE:		Funding	g: LIHTC, RHTF	
				1 year		Applica Downlo	itions: ead from website	
NCOME CRITERIA	\ :							
Maximum Yearly In person \$58,500 persons \$66,840 persons \$75,180 persons \$83,520	come			FURNISHED: Partly furnishe appliances on				
PERSON MAXIMU	JM MON	NTHLY INCOM	E:	4875				
PERSONS MAXIM	IUM MC	NTHLY INCO	ME:	5570				

	Last Com	plete Update:	8/27/2024			AREA:	Chinatown
PROJECT NAME:	CHINATOWN	GATEWAY	PLAZA			PROJECT TYPE:	Family
ADDRESS:	1031 Nuuanu Ave.					PHONE: 808-524	l-3737
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 528-529	9
	rioriolala	017.1.2.		90017			
	: Nua Vaovasa, Site N Sheng Huang, Resic Randeatte McEnroe : Hawaiian Affordable : Dolores Ma	dent manager Property Manager	APPLY ADDRESS: Chinatown Gateway Pla. 1031 Nuuanu Avenue Honolulu, Hawaii 96817				OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 808-524-3737		F.	AX:		shenh@hawaiiafforo https://www.chinato	dable.com wngatewayplaza.co
Unit	Type: 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 I	3drm: 199	1200	2160	555	1	3	YES
Two I	Bdrm:						
Three I	3drm:						
Four I	Bdrm:						YES
Rent posted is the 1 Bedroom - 60% AMI - \$1200; \$1400; 140% AMI accept section 8	NT IS 30% OF INCOM low rent of a range. 80% AMI - \$1300; 120 - (Market) \$1500.	0% AMI -	UTILITIES INCLU Water + Sewer	DED:		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6
AGE CRITERIA:						TO REMAIN ON W CALL EVERY	
time of application	d must be 18 years or .		_	FOR PARKING:	DET INFO		
	ASSET LIMITS		PARKING INFO: Parking starts at (maybe depends amount.)		PET INFO: Service an request	imals need reasona	PETS OK: NO
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO			LEASE: 1 year		Rental Ass	ng in the City Housi sistance Program. n deck with bbq grill	
INCOME CRITERI	A:		,				
60% AMI \$5 80% AMI 7 120% AMI 1	erson 2 person 3 p 52,920 \$60,480 \$6; 70,500 80,600 90 105,800 120,900 13 123,450 141,050 15	8,040),650 36,000	FURNISHED: Partly furnished appliances only. (Washer/dryer in 6	Carpet or tile.			
1-PERSON MAXIM	IUM MONTHLY INCOM	ME:	1		J.		

		Last Compl	ete Update:	4/12/2024			AREA:	Chinatown	
PROJECT NAME:	CHIN	IATOWN N	//ANOR				PROJECT TYPE:	Family	
ADDRESS:	175 Nor	th Hotel St.					PHONE: 808-545	5-1996	
CITY:	Honoluli	u	STATE: HI	ZIP: 96817			FAX : 536-6808		
MANAGER	t: Susan	Chen			APPLY AD	DDRESS:		OUT-OF-STATE	
APPLY TO	: Chinate	own Manor						APPLICATION ACCEPTED:	
APPLY ATTN	I: Winnie	Louie						YES	
APPLY PHONE	: 808-54	15-1996		FA	X : 536-6808	EMAIL:	winniel@hawaiiaffo	rdable.com	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	89	612	2.5x rent	310	1	2	YES	
One I	Bdrm:								
	Bdrm:								
Three I									
Four	Bdrm:]		NO	
RENT INFO: RE 310 sq ft \$612 330 sq ft \$636 450 sq ft \$646 Must respond to c in a timely mannel	ommunic	cation from man	agement	Water	DED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6 AIT LIST (Months):	
AGE CRITERIA: Head of household	d must be	e 18 years or ol	der at the	MAITHOT			TO REMAIN ON W CALL EVERY		
time of application	1.			PARKING INFO:	FOR PARKING	: PET INFO:	F	PETS OK: NO	
				Parking not availab	ole				
AN OWN RESID	DENTIAL	SSET LIMITS: . PROPERTY:				GENERAL			
ASSET LIMIT INF	O:			LEASE:		.	open until decision		
				1 year			undry facility and co	ommunity room	
NCOME CRITER	IA:								
Maximum Annual 2 persons - \$66,84		1 person - 58,5	500	FURNISHED: Partly furnishedm appliances only, tu					
-PERSON MAXIM	1UM MUI	NTHLY INCOMI	E:	4875]			

	Last Complete Up	date: 7/27/2023				- Fun
DDO IECT NAME.			VIII ACE ELD	EDI	AREA: PROJECT TYPE:	Ewa
	D.E. THOMPSON V	ILLAGE (EWA	VILLAGE ELD	EKL		
ADDRESS:	91-1295 Renton Rd.				PHONE: 808-681	
CITY:	Ewa Beach STA	TE: HI ZIP:	96706		FAX : 681-496	60
		, ,	·			
MANAGER	: Susan Lee, EAH		APPLY AD	DRESS:		
APPLY TO	: D.E. THOMPSON VILLAGE (EWA VILLAGE ELDER	RLY)			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Resident Manager's Office					YES
APPLY PHONE	: 808-681-4960		FAX:	EMAIL:		
		Lag.		Lans us as mar	DAANGA II A	
Unit	Type: Number of UNITS: RE	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 I	Bdrm:					
Three I	Bdrm:					
Four I	Bdrm:					NO
,						
	NT IS 30% OF INCOME: YES aximum of \$1165 minus \$68 ut		CLUDED:	_	TOTA	L UNITS: 84
allowance = \$1001			•		MINIMUM W. ESTIMATE	-
responsible for up	dating any change in informatio		nce is subject to chan	ge	MAXIMUM W	
such as phone nui	mber and address.	ĮL			ESTIMATE	-
AGE CRITERIA:		_			TO REMAIN ON W CALL EVERY	
older, or disabled	spouse, must be 62 years or (section 515). If disabled, pleas	se	IST FOR PARKING:			
	note (disability does not need to of SSI/SSDI benefit letter.	o be PARKING INF	1.10	PET INFO:	imal only, with MD	PETS OK: YES
,	ACCET LIMITO, VEC		aca	Corvide an	imai omy, with MD	etter, max oo ios.
AN OWN RESID	ASSET LIMITS: YES DENTIAL PROPERTY: YES			general	INFO:	
ASSET LIMIT INFO		LEASE:		Renovated	I in 2023. Acc units:	
income from asset	ts cannot put applicant over inc	ome 1 year			· w/ 1 for sight impa pairment. Priority g	
					are allowed with M me. If elderly tenan	
				62 spouse	may rent unit, mus inding: Farmers Ho	t be income
Minimum income:	Tenant must have adequate	FURNISHED:		Administra	tion. CCH Shopping 92. Must respond to	g van available,
	nt to afford own basic living	Partly furnish	,	from mana	gement in a timely	manner to remain
expenses (ress, s.		appliances or	nly, vinyl	on waitlist.	17/24 now acceptin	g applications
1-PERSON MAXIM	IUM MONTHLY INCOME:	4575]		
O DEDCONO MAYI	MUINA MONITUU VUNCOME.	E22E				

		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	-4000
OLTY			07475				FAX: 681-400)1
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706		•	
		unity Director - 0		eng	91-1471	ADDRESS: Miula St, 7000 ach, HI 96706		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Attn: L	easing Office						YES
APPLY PHONE	:: 808-68	31-4000			FAX: 681-4001	EMAIL:	assistant@Francisc www.Franciscanvis	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:		1000	OVerest	500			
		126	1290	2Xrent	530	1	n/a	
Three I	Bdrm:	23	1512	2Xrent	750	1	n/a	
Four I								YES
RENT INFO: RE 6 - 1 bedroom unit w/\$664 rent with n \$1176 - \$1380; Mi certif. holders. Min Stamp/Rent subsid	ts w/\$571 ninimum n. incom n income	1 rent and 2 - 2 l income requirer e not needed fo	pedroom ment of r Sec 8	UTILITIES INC Water, Sewer			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	/AITLIST
62 years of age at applicants.	the time	of application a	nd for all	WAITL	IST FOR PARKIN	G:	CALL EVERY	(Months):
аррисанть.				PARKING INF	O: YES	PET INFO): F	PETS OK: NO
]				Parking based 102 stalls tota	d on availability, I	Service a	nimals ok	
AN OWN RESID		SSET LIMITS: . PROPERTY:	YES			GENERAI	_ INFO:	
ASSET LIMIT INFO				LEASE:			s: Community cente room, kitchen, activ	
Assets are taken i income eligibility.	nto cons	ideration in dete	rmining	1 year		room, fitn laundry ir	ess room, salon and n each building.	l lap pool. On-site
INCOME CRITERI	IA:			,			30% AMGI, 1 unit @ @ 60% AMGI	2 50% AMGI
30% AMI - 1 perso		- \$27,510, 2 per	rson max -	FURNISHED:		Application	on:	
\$31,440 60% AMI - 1 perso max - \$55,020	on - max	- \$52,880, 2 per	rson -	refrigerator, di	electric range, isposal, air nd walk in shower.	nciscanvistasewa.co agement to mail it rom manager's office		
1-PERSON MAXIM	10M MUI	NTHLY INCOME	:	4410				

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'OJECT NAME: ⊩								-
Į.		WA VIEV	N				PROJECT TYPE:	1
ADDRESS:	99-009 F	Kalaloa St.					PHONE: 808-48	
CITY:	Aiea		STATE: HI	ZIP:	96701		FAX: 486-61	50
MANAGER	: Tammy	/ K. Lopez			APPLY AD 99-009 Kali			OUT-OF-STA
APPLY TO	: Halawa	View Apts.			Aiea HI 96			APPLICATIO ACCEPTED
APPLY ATTN	: Manag	ement Office						NO
APPLY PHONE	: 808-48	8-3613		F	AX: 486-6150	EMAIL:	tammy@pacificdg.	com
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:							
Two E	3drm:	52	0		630	1	5	YES
Three E	3drm:	56	0		840	3	7	YES
Four E	3drm:	12	0		1080	4	9	YES
ENT INFO: REI	NT IS 30	% OF INCOM	E: YES	UTILITIES INCLU	JDED:		TOTA	AL UNITS: 120
mited number of vo bdrm: \$948 - iree bdrm: \$1053	\$1500 m	aximum.		Electricity, gas ar	nd water		MINIMUM W ESTIMATE	
our bdrm: \$1147- bdates not requir	ed to rer	nain on waitlis	t unless				MAXIMUM W ESTIMATE	
SE CRITERIA:							TO REMAIN ON V	
ead of household	d must be	e 18 years or o	older		FOR PARKING:	-	CALL EVERY	
				PARKING INFO: Parking included	NO No	PET INFO:		PETS OK: NO
	۸۵	SSET LIMITS:	NONE	when asking for				
AN OWN RESID						GENERAL	INFO:	
SET LIMIT INFO				LEASE:		OPEN FO	R APPLICATIONS	
				1 year; then mon	th-to-month	- mdihawa - pick up f	all.com from manager's off	ice
						Called 8/2	7/2024, no respons	se
COME CRITERI	Δ.			,				
ax Income for Se	ec. 8 unit		\$24,750; 3	FURNISHED:		.		
ersons: \$27,850; 4 persons: \$30,900 MGI 30%, 50%, and 60% 2014 HHFDC income nit for LIHTC			Partly furnishedmajor appliances only.					

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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	
CITY:	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]		

	La	st Comple	te Update:	6/	/30/2023					AREA:	Ala Moana
PROJECT NAME:	HALE KE	WALO	APAR [*]	TMEN	ITS (C	losed	l for app	licati	PROJE	CT TYPE:	Family
ADDRESS:	450 Piikoi St.				•				PHONE	E: 808-589	-1845 ext 15
									FAX	: 589-184	.1
CITY:	Honolulu		STATE:	41	ZIP:		96914				
MANAGER	: Hawaii Afford	dable Prop	erties, Inc.				APPLY AD				
APPLY TO) :							lo Apartment St. Suite 101 14			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:										
APPLY PHONE	:: 808-589-184	5 x15				FAX:		EMAIL	_: https://w	ww.halekev	valo.com/
Unit		nber NITS:	RENT:		Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	Nur	XIMUM mber of eople:	CAREGIVER Allowed:
S	tudio:		0								
		27	1116] [[[530	1		2	
		71	1612	<u> </u>		_	1071	5		7	
Three I		29	1841				1071				VEC
Four I	Barin:		0					,	,		YES
RENT INFO: RE	NT IS 30% OF	INCOME:	NO	UTII	LITIES INC	CLUDE	D:			TOTA	L UNITS: 127
30% AMI 1 Bdrm \$656 (7 ap 50%AMI	,,	` ' '			ar Hot Wa sh Collecti		ing, Sewer, water			NIMUM W. STIMATE	
1 Bdrm \$ 1,116 (2 60% AMI	• /-	`	. ,							XIMUM W. STIMATE	
AGE CRITERIA:										IAIN ON W	AITLIST
One person in the older	household mu	st be 18 ye	ears or		WAITL	IST FO	R PARKING:		CAL	L EVERY	
				PAF	RKING INF	O:		PET INF			ETS OK: YES
1	ASSET	LIMITS:						weighing	g no more t	han 25 lbs;	(2) small cat; (3) on not exceeding
AN OWN RESID		PERTY:						GENERA			
ASSET LIMIT INFO	<u>o.</u>			LEA	SE:			Standfo	Honolulu 96	elopment -	1100 Alakea
INCOME CRITERI	IA·								mus pay fotosty, cable, a		such as:
Income Limit AMI 30%		60%		FUF	RNISHED:			Rents a	nd Income	are subjec	to change
1 person \$27,45 2 persons \$31,35	50 \$45,750	N/A \$62,700						Applicat	ion fee of \$	315	
3 persons \$35,28 4 persons \$39,18	\$58,800	\$70,560 \$78,360						Called 8	3/27/24,10/2	21/24, no re	esponse
1-PERSON MAXIM	IUM MONTHLY	Y INCOME		_	0			J.			
2-PERSONS MAXI	MUM MONTHI	LY INCOM	E:		0						

		Last Comple	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		07475				FAX: 678-08	37
CITY:	Waipahu		STATE: HI	ZIP:	96797		,	
MANAGER	: Marisa	Olmeda-Macias	s, Res. Mgr.		APPLY ADD			
APPLY TO		66-7722 - Trish 702-259-1903	na Bauman, CC	OS; or Marisa Olme	2550 Univers St. Paul, MN eda-		, #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	% OF INCOME	YES	UTILITIES INCLU Water	JDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:							TO REMAIN ON V	P.
Head of household have a qualifying of		18 years or old	der and		T FOR PARKING:	DET 11/150	CALL EVERY	
				PARKING INFO: Minimum parking	NO NO a available	PET INFO:		PETS OK: YES
	۸۵	SET LIMITS:			-			
AN OWN RESID			NO			GENERAL	INFO:	
ASSET LIMIT INF				LEASE:		covered la	nai w/ bbq, roll in s	howers, drapes,
						units, height	ent center, ceiling ht-adjustable work 2000 IUD Section 811/P	stations
INCOME CRITERI	IA:						Res Manager are o	
Maximum annual i 1 person \$36,650; \$47,100; 4 person	2 person		ersons	FURNISHED:		1	off = caretaker and ONSE IN 2021 - La 10/2017	
						Called 8/27	7/2024, 10/21/2024	No response.
1				1		J.		

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	plete U _l	odate:		1/21/2022				AREA:	Aiea
PROJECT NAME:	HALE	LAULIN	IA (H	PHA-	lee) - NOT	ACCEPT	ING	APP	PROJECT TYPE:	
ADDRESS:										PHONE: 808-483	3-2550
CITY	J		_ cT/	ATE: HI	_	ZID. F		0.1		FAX: 483-255	52
CITY:	Alea		317	(IE: HI		ZIP:	967	01			
манастр		Ot:					400				
MANAGER	: Marissa	Chai							DRESS: n School St.		OUT-OF-STATE
APPLY TO	: HPHA						Hone	olulu, I	HI 96817 EPTING APPL	ICATIONS	APPLICATION ACCEPTED:
		CEPTING A		ATIONS			NOT	ACCI	LI TINO ALLE	ICATIONS	NO
APPLY ATTN		plications of CEPTING A		ATIONS							
APPLY PHONE	: 808-832-	5961					FAX: 832-3	461	EMAIL:	: hphaishereforyou.o	rg
Unit	Type:	Number	$\overline{}$			Minimum			MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:	R	ENT:		INCOME Required:	SQ F	T:	Number of People	Number of People:	Allowed:
S	tudio:		\vdash		ĺ						
One I	Bdrm:		Ë		ĺ						
Two B	Bdrm:	20	Ë				771		2	6	YES
Three I	Bdrm:	16	Ë				893		3	8	YES
Four I	Bdrm:		Ë								
RENT INFO: REI Minimum Rent: \$0 the waitlist are to g change or check the password is neede	o. All HPH/ go to: hpha heir status. ed to acces	A applicants .myhousing. A usernames their acco	who are .com to ne and			TILITIES IN ater and all	CLUDED: lowance for ele	ctricity	/	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	₽ <i>!つ!</i> つ∩1 <i>ፎ</i> **፣	***								TO REMAIN ON W	
Head of household	d must be	18 years or o	older			\\/ \ ITI	LIST FOR PAR	KING		CALL EVERY	
					PA	RKING INI	_	KING	PET INFO): F	PETS OK: YES
					In	cluded				nimals ok, but only ories listed below:	one from each of
	ASS	BET LIMITS:	NON							under 25 lbs) or cat	
AN OWN RESID		ROPERTY:	NO						GENERAL		
Cannot own a hou		u				ASE:			homeless	ENCES: Domestic V s in transitional shelt	
						year			displaced		
]									Funding:	Fed Low Inc Pub Hs	sing 100%
INCOME CRITERI										etions must be 3 yrs ethamphetamine or	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 00; 3 perso 00; 5 perso 00; 7 perso	person - \$53 ns - \$68,500 ns - \$82,200	0; 0;		Pa	IRNISHED: artly furnish opliances of				·	
1-PERSON MAXIM	IUM MONT	HLY INCOM	ИЕ:		45	570			P		

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	Last Comp	lete Update:	8/28/2024				
	·					, t=,	Moiliili
	HALE MAKAN	A O MOILIIL	_		F	PROJECT TYPE:	Elderly
ADDRESS:	2139 Algaroba St.				F	PHONE: (808) 20	1-9921
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
	,		,				
MANAGER	: Harvey Mendosa, Pro	perty Manager		APPLY ADD	RESS:		
APPLY TO	2: 2139 Algaroba St.			3165 Waialae Honolulu, HI	e Avenue, Suite 96816	200,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	https://mdihawaii.com	/rentals/hale-mak	ana-o-moiliili/				YES
APPLY PHONE	E: 808-735-9099			FAX: 781-292-3427		tps://mdihawaii.cc akana-o-moiliili/	om/rentals/hale-
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio: 80	962		262	1	2	
One I	Bdrm: 25	1024		452	1	3	
Two	Bdrm:	0					
Three I	Bdrm:	0					
Four I	Bdrm:	0					YES
30%AMI Studio (4 50% AMI Studio (7 60% AMI Studio (4 30%AMI One bdrr 50%AMI One bdrr	72 units) \$962; 4 units) \$1166 m (2 units) \$587; m (20 units) \$1024;		JTILITIES INC water, sewer, t			TOTA MINIMUM WA ESTIMATE MAXIMUM WA ESTIMATE	(Months): 12 AIT LIST
AGE CRITERIA:	m (2 unita) \$1242 - Drofe	oronoo for			т	O REMAIN ON W	
Age 55 plus for all	residents.		WAITL	IST FOR PARKING:	·	CALL EVERY	
		<u> </u>	PARKING INF	O: YES	PET INFO:	Р	ETS OK: NO
]	ASSET LIMITS:			ntly full. 10 ppl on enough parking for	Service anin documentati	nals are allowed won.	rith proper
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERAL IN	NFO:	
ASSET LIMIT INF	O: gs does not go over max	threshold -	EASE:		Laundry roo on-site.	m and community	resource center
n to long do odming	go dood not go over max		1 year		Roof top spa	ace for residents.	
					Apply directl manager.	y online, goes to t	the property
INCOME CRITER	IA:		FURNISHED:		Fob needed	for all community	rooms.
			partly Furnishon appliances on shower.				
1-PERSON MAXIM	IUM MONTHLY INCOM	E: .	4575		J		
2-PERSONS MAXI	MUM MONTHLY INCO	MF:	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	144 :		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: ove, Refrige	erator			and these are on the	
2 persons \$24 3 persons \$27 4 persons \$30 5 persons \$32		ove, Keinge	siatoi		NO RESP update 5/2	ONSE in 2021. Las 27/20.	st completed			
1-PERSON MAXIM	IUM MON	ITHLY INCOME	:	23	346			Į.		

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		Last Compl	ete Update:	8/28/2024			AREA:	Kapolei	
PROJECT NAME:	HALE	MOENA	KUPUNA				PROJECT TYPE:	Elderly	
ADDRESS:	1020 W	akea St.					PHONE: 808-466	S-0801	
							FAX: 466-080		
CITY:	Kapolei		STATE: HI	ZIP:	96707		,		
APPLY TO	The Mi	cheals Organiza	ommunity Mang	er	APPLY AD 1020 Wake Kapolei, HI	a Street, Suite	110,	OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN		6-0801			FAX: 466-0802		Vebsite: www.oahu Email: HMK@tmo.o	useniorrentals.com com	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	28	1258	2.5x rent	350	1	2		
One E	Bdrm:	109	1417		540	1	3		
Two I	Bdrm:	21	1701		765	1	5		
Three E								NO	
RENT INFO: REI Section 8 accepte Non-refundable ap money order (no c \$500-\$1000 Secur order (no cash or or	d. oplication cash). rity Depo	fee of \$30 in check or neds).	neck or	UTILITIES INC			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 6	
AGE CRITERIA:						-	ΓΟ REMAIN ON W		
Applicants must be	e 55 or o	lder.		WAITLI	ST FOR PARKING:		CALL EVERY	(Months): 4	
				PARKING INFO	1.14	PET INFO:		PETS OK: YES	
AN OWN RESID		SSET LIMITS: PROPERTY:	YES	is ample stree	ved basis. There		eight limit of 30lbs	\$350 one-time pet	
ASSET LIMIT INFO				LEASE:			wers and grab bars ows that open; Bre		
Assests will be ver	rified.			6 month for tax section 8 vouc	x credit, 1 year for her	Undercabir Lobby, Tras Covered Pa		ge d stalls), 9,166 Sq.	
INCOME CRITERI						the property	y I elevators, walkab	le neighborhood;	
Maximums: 30% A 1 persons \$29, 2 persons 33,4 3 persons 37,5 4 persons 41,7 5 persons 45,1	250 \$53 20 61, 90 n/a 60 n/a	3,625 \$58,500 270 66,840 75,180		AC though out building, window blinds, garbage disposal, high ceilings Trash			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 8.28.2024		
1-PERSON MAXIM	IUM MON	NTHLY INCOME	<u>:</u>	0		0.20.2024			

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		Last Comp	lete Update:				AREA:	Kapolei
PROJECT NAME:	HALE	MOENA	OHANA				PROJECT TYPE:	Family
ADDRESS:	1055 AI	ohikea St.					PHONE: (808) 4	66-0801
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 808-46	6-0802
	The Mi	King-Schreur, Cicheals Organiz	community Mana cation	ager	APPLY ADI Hale Moena 1055 Alohik Kapolei HI 9	a Ohana ea Street #110)	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN					тарынг	,0,0,0		YES
APPLY PHONE		166-0801			FAX: 808-466-080		hmo@tmo.com https://halemoena.	com/
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:		1370					
One E	3drm:		1470					
Two E	3drm:		1769					
Three E	3drm:		2045					
Four E	3drm:							NO
RENT INFO: REI \$30 per adult appli certified bank chec \$99-\$1000 Securit (security deposit d screening).	icant (mo ck, no ca y Depos	oney order or sh). it due at Move-	in	UTILITIES IN			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA:							TO REMAIN ON V CALL EVERY	
				WAITI PARKING INF	LIST FOR PARKING:	PET INFO:		PETS OK: YES
	A	SSET LIMITS:				One time	pet fee: \$350 cat/dobreed restrictions a	og weight limit of
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO	O:			LEASE:		controlled communit	parking garage, laur access, elevator, t y center, lobby, rec y garden and bike r	rash chute, reational deck,
NCOME CRITERI	A:							
Max Income: 60% 1 person \$55,0 2 persons 62,8 3 persons 70,7 4 persons 78,6 5 persons 84,9 6 persons 91,2 7 persons 97,5	020 80 40 00 00 00			FURNISHED:				
-PERSON MAXIM	IOM MU	NTHLY INCOM	E:	4585				
-PERSONS MAXII	MUM MO	ONTHLY INCO	ME:	5573				

		Last Comp	lete Update:	8/28/2024				AREA:	Pearl City
PROJECT NAME:	HALE	MOHAL	U II Family	1			PROJEC1	TYPE:	Family
		9 Kamehamel					PHONE:	808-456	G-9420
CITY:	Pearl City	/	STATE: HI	ZIP:	96782		FAX:	808-456	6-9406
]								
	CBM Gr	•	-			ADDRESS: nehameha Hwy	., Pearl City,		OUT-OF-STATE APPLICATION
APPLY TO) : 785 Kan	nehameha Hv	y,, Pearl City, F	lawaii 96782	riawan e	70102			ACCEPTED:
APPLY ATTN	1 :								_
APPLY PHONE	≣: 808-456	-9420			FAX: 456-9406		L: http://www. ble-rentals.		srentals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Numb	er of	CAREGIVER Allowed:
	Bdrm:								
	Bdrm:	126	1250	2.5x rent	595 751	1 2	7		
Three	Bdrm:	42	1775	2.0x Tone	751				YES
Tour	Burni.				,	,			150
RENT INFO: RE 10 2-Bdrm Units 116 2-Bdrm Units 42 3-Bdrm Units	s at 30% A s at 50% A	MGI MGI	E: NO	Water & sewe			EST MAXI	MUM W IMATE MUM W	L UNITS: 168 AIT LIST (Months): 6
ACE CRITERIA.				Įt.					(Months): 24
AGE CRITERIA: No requirements				\^/^ T	IST FOR PARKIN	10.	TO REMAI CALL	-	(Months): 6
				PARKING INF		PET INF	·O:	F	PETS OK: NO
	AS	SET LIMITS:			ing, 2nd parking and no chanrge			erivice a	nimal with proper
AN OWN RESI		PROPERTY:				GENER	AL INFO:		
ASSET LIMIT INF	<u>O:</u>			LEASE: 1 year, and re- year	certification every	4 handi On-site Landsc	capped units; manager aped commur ng stalls with 3	nity areas	ME, HMMF Bond; s nits
INCOME CRITER	IA:					Applica			
30% of AMI: 1 Per 50% of AMI: 1 Per 60% of AMI: 1 Per	rson \$42,2	20, 2 persons	\$48,200		osal, refrigerator, window coverings	walk in office elements, 2020 Up		om Webs	
1-PERSON MAXIN	MUM MON	THLY INCOM	E:	3517		1			
2-PERSONS MAXI	IMUM MOI	NTHLY INCO	ME:	4017					

	Last	Complete Update:	8/28/2024			AREA	Pearl City
PROJECT NAME:	HALE MOH	HALU II SENIC	OR		Р	ROJECT TYPE	Elderly
ADDRESS:	785 Kamehameh	na Hwy			P	HONE: 808-45	6-9420
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX: 456-94	06
	,		,				
MANAGER	R: Lisa Esteron, R CBM Group	esident manager			anagement Divisi		OUT-OF-STATE
APPLY TO):			Kapahulu A Hawaii 968	Ave., Suite 102, Ho 15	onolulu,	APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	E: 808-456-9420			FAX: 456-9406	we		66c4/files/uploaded/
	Type: Number of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 164	1470	2 x rent	432	1	2	
	Bdrm:						
Three	Bdrm:						
Four	Bdrm:					J	YES
PRENT INFO: RE 9 Units - 30%Al 130 Units - 60% A Food stamp &/or h used to meet min.	MI - \$565 MI - \$925 nousing subsidy (\$		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
J	income.		Į.			ESTIMATE	
AGE CRITERIA: All residents must	be 55 and older a	at occupancy.	\A/A ITI	IOT FOR RADIVINO		O REMAIN ON V CALL EVERY	
Applications accepapplicant reaching		hs prior to	PARKING INF	IST FOR PARKING: O:	PET INFO:		PETS OK: NO
]	ASSET LIN	MITS: NONE	Parking availa first serve bas	able on a first come sis.			·
	DENTIAL PROPE	RTY: YES			GENERAL IN		
ASSET LIMIT INF	O:		LEASE:		155 unit plus purpose build	8 handicap-acc ding with activitie	essible ones; multi- es and social
			6 months - mo year - some u		laundry; two convenient to	ked entry doors; elevators at both b bus and shopp pager. Financed	n buildings;
INCOME CRITER						TČ, RHTF, HMN	
Maximum Income 1 Pers 30% AMI \$26,46 60% AMI \$52,92	on 2 Perso 60/yr \$30,340	/yr	refrigerator/fre	garbage disposal, eezer, vinyl flooring, ings,air conditioner	(application because 2021 Update	oox outside of re - Information fro NSE IN 2023. La	om Website
 1-PERSON MAXIN	IUM MONTHLY IN	NCOME:	4410]		
2-PERSONS MAXI	MUM MONTHLY	INCOME:	5040				

		Last Comple	ete Update:	8/28/2024			AREA:	Pearl City
PROJECT NAME:	ΗΔΙΙ	F MOHALL	I SENIOR	ΔΡΔΡΤΜΙ	FNTS		PROJECT TYPE:	
ADDRESS:			OLITION	AI AITHI	LITTO		PHONE: 808-456	
7.5511.200.	000 1111	iid Ot.					FAX: 456-088	
CITY:	Pearl C	ity	STATE: HI	ZIP:	96782		170-000	55
	CBM (e Tarcenas, Res Group Mohalu Office	ident manager		APPLY AE 800 Third Pearl City	St.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	:: 808-45	56-0368			FAX: 456-0885	EMAIL:	halemohalu@cbmg	roup.net
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	43	878	2x rent	420	1	2	YES
One I	One Bdrm: 135 898		898	2x rent	516	1	2	YES
	Bdrm:							
Three F								YES
RENT INFO: RE 132 efficiency one people, \$898mon 32 regular one bed Must respond in a from management	bedrooidroom a	m apts, 436 sq ft pts \$973/mon nanner to commi	, max 2	UTILITIES INC Water, sewer,			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 AIT LIST
AGE CRITERIA:							TO REMAIN ON W	/AITLIST
One member mus be any age	t be 55+	; The other mem	nber can	WAITL PARKING INF	IST FOR PARKING	: PET INFO	CALL EVERY	(Months): 0 PETS OK: YES
AN OWN RESID		SSET LIMITS:			ded; First come first uaranteed.120		s under 40 lbs, neut license. \$100 pet d	
ASSET LIMIT INFO		- I KOI EKIT.	120	LEASE:		Funding:	RHTF	
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					nonth to month	outside he Must have	Caregivers are allowed with MD letter; can work outside home. Must have 5 years landlord history and 2 personal references	
INCOME CRITERI						Communi	ity room, laundry, bb	oq area
Min. income = 2x r Maximum Annual \$48,750 2 persons (efficiency/1bdrm) \$66,840;	Income: s- \$55,70	50% AMI- 1 per 00 (studio)		Partly furnishe appliances on	edmajor lly. Ceiling fans, tub	>7 yrs fo	ap accessible units r criminal record HOME subsidies	
1-PERSON MAXIM	IUM MO	NTHLY INCOME		3798				

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	Last Com	plete Update:	8/28/2024			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: 455-438	34	
APPLY TO		nager		APPLY ADI On-Site; Ma		ice (#102)	OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	: 808-455-4744			FAX : 455-4384	EMAI	L: ohauoli@cmiweb.n www.haleohauoli.co		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUI Number of People	Number of	CAREGIVER Allowed:	
One	Bdrm: 99	0		497	1	3	YES	
Three Four	Bdrm:						NO	
	NT IS 30% OF INCOM aximum rent, 30% of ir		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST	
AGE CRITERIA: Head of househole	d must be 62 years or o	older, or	14/AI T I 1			TO REMAIN ON W	/AITLIST	
disabled, spouse of	can be 18 and older.		PARKING INFO			ize dogs or cats, but n		
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				with de	ying they need a pet. I posit depending on rer AL INFO:		
ASSET LIMIT INF			LEASE:	onth-to-month	outdoor busline shoppir Manage tour.	r garden and activity re , beautifully landscape ng, on-site laundry er on site - Unit #102, o	d, close to	
INCOME CRITERIA: None.			appliances, line cabinet space,	denergy efficient en closet,lots of self-cleaning ady, blinds, carpets	Section Transp	Funding: Low Income Housing Tax Credit 50 Section 8 Transportation to Shopping available through Catholic Charities Hawaii		

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	5/28/2024			AREA:	Chinatown
PROJECT NAME:	HALE	PAUAHI	TOWERS				PROJECT TYPE:	Family
ADDRESS:	155 Nor	th Beretania St	i.				PHONE: 808-532	2-3535
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 532-353	36
MANAGER		el Johnson, Bui a, Ocuupancy S			APPLY AD On-Site	DRESS:		OUT-OF-STATE
APPLY TO) :							APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 808-53	32-3535			FAX : 532-3536	EMAIL: n	ı/a	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	110	1277	2.5xrent	560	1	3	YES
	Bdrm:	214	1532	2.5x rent	729 - 745	2	5	YES
Three	Bdrm:	72	1771	2.5xrent	937 - 959	3	7	YES
Four	Bdrm:							NO
RENT INFO: RE Must have verifiab Must respond to c in a timely manne	ole reside	ntial history. cation from mar	nagement	UTILITIES INCI Water Sewer Trash pick up	LODED.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA: Head of household	d must b	e 18 vears or o	lder at the			٦	TO REMAIN ON W CALL EVERY	
time of application		,		WAITLIS PARKING INFO	ST FOR PARKING: NO	PET INFO:	F	PETS OK: YES
	A:	SSET LIMITS:	NONE	\$60/month - 1s \$90/month - 2 of below market re		Birds and F documentar	ish, and any other tion.	pets require
AN OWN RESI	DENTIAL			\$40/mo check	with pro park	GENERAL I	NFO:	
ASSET LIMIT INF	O:			LEASE: 1 year, month t	o month	Send reque envelope Send reque	ement to mail it est with self addres	ssed stamped
INCOME CRITER Maximum Annual person - \$77,950 (\$100250; 4 person \$120,300; 6 person \$138,100; 8 person \$138	Income f 2 person ns - \$111 ons - \$12	s - \$89,100; 3 p 350; 5 persons 2,200; 7 persor	persons -	FURNISHED: Partly furnished appliances only drapes, garbag	/. Tub, carpet,	Fully equip	ped Laundry Roon oms, sprinkler/smo	n bke/audio alarm
1-PERSON MAXIM	10M MOI	NTHLY INCOM	E:	5642		P		
2-PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	6446				

	Last Con	plete Update:	8/29/2024			AREA:	Lanakila
PROJECT NAME:	HALE PO'AI	NOT ACCE	PTING A	PPLICATIONS		PROJECT TYPE:	Elderly
ADDRESS:	1001 North School S	t.				PHONE: 808-832	2-3445
CITY	J	STATE: HI	ZIP:	2221		FAX: 832-179	95
CITT	Honolulu	STATE: HI	ZIP:	96817		·	
MANAGER	: Joseph Baxa, Resid	dent Manager		APPLY ADI Apply On-Si			OUT-OF-STATE
APPLY TO	: Hawaii Affordable F	roperties Inc.		7477			APPLICATION ACCEPTED: YES
APPLY ATTN	l: Joanna Li						
APPLY PHONE	: 808-832-3445			FAX : 832-1795		http://hawaiiaffordal properties/	ole.com/residential-
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 80	170	NO	390	1	2	YES
One I	Bdrm: 126	195	NO	544	2	2	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						NO
Rent is 30% of inc 1bdrm \$195. All h floor Security Deposit e	NT IS 30% OF INCO come with studio mining landicapped units are equal to 1 month's ren ED 8/2/2016*****	num of \$170, on the first	UTILITIES IN			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 60 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	
One member mus (Caregivers must l	t be 62+; spouse mus be 18+)	st be 55+.		LIST FOR PARKING:		CALL EVERY	
			PARKING INF	1.10	PET INFO:	: Final with proper doc	PETS OK: NO
1	ASSET LIMITS	s. VES	parking in bac		SCI VICE UII	iiinai witii proper det	Sumontation
AN OWN RESID	DENTIAL PROPERTY				GENERAL	. INFO:	
ASSET LIMIT INFO			LEASE:			s are allowed with M	
1 person: \$38,60 2 people: \$44,100			1 year; renew following rece		move to a the 1st flo Yearly inc	s, spouse may rema studio unit. 18 han or. ome recertification multi-purpose room	dicap units all on
INCOME CRITERI	IA:				Transport	ation to Shopping av	
Maximum Annual 2 persons - \$52,40	Income: 1 person - \$4 00	15,850	FURNISHED: Partly furnish appliances or	edmajor	Must resp managem waitlist.	ond to communicati ent iin a timely man ty laundry room	
1-PERSON MAXIM	IUM MONTHLY INCC	ME:	2858]		

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		Last Compl	ete Update:	8/28/2024			AREA:	Barbers Point
PROJECT NAME:	HALI	E UHIWAI	NALU (Bu	ı <mark>ildings 34</mark>	and 35)		PROJECT TYPE:	Single Veterans
ADDRESS:	91-1078	8 Yorktown St.	•		-		PHONE: 808-682	2-1949
CITY	 Kapolei		STATE: HI	ZIP:	06707		FAX : 682-197	70
OIII.	Kapolei		SIAIL.	2	96707			
APPLY TO	RTaylo 91-107 Kapolo	lle Taylor, Direct or@Cantwell-An 78 Yorktown St. ei HI 96707	derson.com	-	APPLY ADI 91-1078 Yo Kapolei HI S On-site drop	rktown St. 96707		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN: Cloudbreak Hawaii LLC / Leasing APPLY PHONE: 682-1949				aiii	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	1375	1.5 x rent	208-374	1	1	
One I	3drm:							
Two I	3drm:							
Three E	3drm:							
Four I	Bdrm:							NO
RENT INFO: REI A clean + sober er \$1200 - \$1350 Bldg 34 - 80 units; Accept HUD VASI subsidies. All unit	nvironme Bldg.35	ent for veterans. 5 - 50 units. er and other ren	t	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
Accords spetion 9			,	į.			ESTIMATE	
AGE CRITERIA: SINGLE ADULT V 18+ and live indep					IST FOR PARKING:		TO REMAIN ON W CALL EVERY	(Months): 6
				PARKING INF	O: NO	PET INFO:	ŀ	PETS OK: NO
AN OWN RESID		SSET LIMITS:	YES	serve	,	GENERAL	INFO:	
ASSET LIMIT INFO	0:			LEASE:			RHTF, Formerly US	S Vets
\$50,000				1 year, month	to month	5 handicar Case Man	August 2001 o units agement Services, nachines, Elevator	Coin laundry,
INCOME CRITERI	A:					Application		antwell-
INCOME CRITERIA: Affordable housing \$250 - \$84,600 per year (Depending on subsidy type) State guideline for 30 50 60 AMI			FURNISHED: Partly furnished, building 34 comes with microwave, stovetop burner, icebox, Building 35 full stovetop w/ oven and icebox			Email: CloudbreakHawaii@Cantwell-Anderson.com ask management to email it Updated 8/28/2024 Applications are fgood for 90 days		

2-PERSONS 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.locationsble-rentals.aspx	YES srentals.com/afforda	
	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;					renewing Locked lo parking, c	Vaitlist applicants are contacted via mail when enewing interest is needed. ocked lobby doors, security cameras, visitor arking, coin-op laundry facility on each floor. onsite manager's office.		

1-PERSON MAXIMUM MONTHLY INCOME: 2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	olete Update:	10/18/2021			AREA	: Waianae
PROJECT NAME: HA	LE WAI VIS	STA II				PROJECT TYPE	Family
ADDRESS: 86-0	086 Farrington Hwy	y.				PHONE: 808-69	
CITY: Wai	anae	STATE: HI	ZIP:	96792		FAX : 696-82	259
MANAGER: Ba	rbara Ramos			APPLY A	DDRESS: arrington Highway		OUT-OF-STAT
APPLY TO: Lo	cations LLC			Waianae,		y	APPLICATION ACCEPTED
APPLY ATTN:							YES
APPLY PHONE: 808	8-696-8258			FAX : 696-8259		http://www.location ble-rentals.aspx	nsrentals.com/afford
Unit Type	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrn]				
Two Bdrn		1250	2.5 x rent	595			
Three Bdrn		1425	2.5 x rent	751			
Four Bdrn	1:	J					YES
RENT INFO: RENT IS (7)Two Bdrm (30% AN (83)Two Bdrm (50% A (60% AMI) end units -= 33 3 Bdrm (60% AMI*) * AMI- see income elig	MI*) = \$677 MI*) = \$1177; (11 : \$1202; 33; = \$1374		UTILITIES INC			MINIMUM V ESTIMATE MAXIMUM V	(Months):
AGE CRITERIA:	, , , , ,		įt.			ESTIMATE TO REMAIN ON V	
Head of household mu	st be 18 years or o	older	WAITI	IST FOR PARKING		CALL EVERY	
			PARKING INF	O: NO	PET INFO:		PETS OK: NO
	ASSET LIMITS:	NONE	1st stall free, a \$50/month	additional stalls	fish ok		
AN OWN RESIDENT					GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:		Funding: L	awaiʻi Housing De .ow Income Housi	
			12 months		RHTF Handicap a bdrm	accessible units -	Five 2 bdrm & 3 3
NCOME CRITERIA:			,		Application locations re		
30% of AMI: 1 person 5 50% of AMI: 1 person 5 60% AMI: 1 person 52,	\$44,100; 2 persons	s \$50,400;	FURNISHED: Stove, Oven, disposal, blind	Refrigerator only, Is	pick up fro Waitlist ap	m manager's offic	e cted via mail when
-PERSON MAXIMUM	MONTHLY INCOM	ΛΕ:	4410				
-PERSONS MAXIMI IN		ME.	5040				

Last Com	plete Update:	5/28/2024			AREA:	
PROJECT NAME: HALEIWA SE	NIOR CITIZE	N HOUS	NG CENTER		PROJECT TYPE:	Elderly
ADDRESS: 66-477 Paalaa Rd.					PHONE: 808-637	7-6455
CITY: Haleiwa	STATE: HI	ZIP:	96712		FAX:	
MANAGER: Thomas Dulan, Resi	dent Manager		APPLY ADD 1165 Bethel Honolulu, HI	St. 2nd Fl.		OUT-OF-STATE APPLICATION
APPLY TO: Hawaiian Properties						ACCEPTED:
APPLY ATTN:				EMAIL:		
APPLY PHONE: 808-637-6455			FAX : 637-7044			
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 63						
One Bdrm: 63	0	ļ				
Three Bdrm:			-			
Four Bdrm:						
1 00. 20		,			,	
RENT INFO: RENT IS 30% OF INCOM		JTILITIES INC		_	TOTA	AL UNITS:
Deposit of market rent - \$885	l V	Vater, \$85 util	ity allowance		MINIMUM W	
					ESTIMATE	
					MAXIMUM W ESTIMATE	
AGE CRITERIA:					TO REMAIN ON W	
Head of household OR spouse must be or mobility-disabled. Family members ca	in be		ST FOR PARKING:		CALL EVERY	
children. Roommate must be 18+, careo	_	PARKING INFO		PET INFO	: F	PETS OK: NO
		imited.	ciuded and is			
ASSET LIMITS AN OWN RESIDENTIAL PROPERTY:				J GENERAL	INFO:	
ASSET LIMIT INFO:		EASE:		Funding:	100% Section 8 buil	ilding
	[8 handica	pped units	
NCOME CRITERIA:						
Follows HUD guidelines.	F	FURNISHED: Partly furnishe appliances onl shower	dmajor y, tub or walk in			
-PERSON MAXIMUM MONTHLY INCOI	ME:	1254]		

	Last Comple	te Update:	5/23/2024			AREA:	Kakaako
PROJECT NAME:	HALEKAUWILA	PLACE A	PARTME	NTS	Р	ROJECT TYPE:	Family
ADDRESS:	665 Halekauwila St.				P	PHONE: 808-537	7-9000
						FAX:	
CITY:	Honolulu	STATE: HI	ZIP:	96813		,	
MANAGER	: Danielle Delgado			APPLY AD			
APPLY TO	: Indigo Real Estate Serv	vices, Inc.			enter, 665 Halekau nolulu, Hi. 96813	uwila	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Live@halekauwilaplace	apts.com					
APPLY PHONE	: 808-537-9000			FAX : 728-0985	EMAIL: wv	vw.halekauwilapla	aceapts.com
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio: 26	1329	2 x Rent	396	1	2	
One E	3drm: 72	1410	2 x Rent	535	1	3	
Two E	Bdrm: 82	1660	2 x Rent	684	2	5	
Three E	3drm: 18	1889	2 x Rent	1511	4	7	
Four E	Bdrm: 0	0					YES
Call for availability Based on 60% AM may be approved score of 774 & ear	NT IS 30% OF INCOME: Mon-Fri; no waitlist is ma II; Credit score between 3 with cosigner (who has m rns 4 x rent) or increased ave unconditional approva	aitained. 350 - 624 iin. credit deposit;	\$60 - Internet/water/sewer/tr	Wi-Fi/TV/phone		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:					TO	O REMAIN ON W	/AITLIST
			WAITL	IST FOR PARKING:		CALL EVERY	
			PARKING INF	,,,,,	PET INFO:	F	PETS OK: YES
1	ASSET LIMITS:		1 free parking Contact Diam additional stal	ond Parking for		per apartment all Pet rent is \$25. B	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL IN		
ASSET LIMIT INFO	O.		LEASE: 12 months		Square foota	ige range - Studio 35 - 597; 2 bdrm	
INCOME CRITERI	A·					g building, laundr cess building	y on site,
Maximum annual i 1 peson: \$55,020 2 persons: \$62,88 3 persons: \$70,74 4 persons: \$78,60	ncome: 5 persons: \$0 6 persons: \$0 7 persons: \$90	91,200	FURNISHED: Tub, ceiliing fa carpeting in b			uwilapalceapartm manager's office	
	IUM MONTHLY INCOME		4875 5570		1		

Last Comple	ete Update: 7	/16/2020			AREA	Chinatown
ROJECT NAME: HALEWAI'OLU	SENIOR RE	SIDENCE	S		PROJECT TYPE	: Elderly
ADDRESS: 1331 River St.					PHONE: 808-80	8-1331
CITY: Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER: Michaels Management Fautanu	; Resident Manager	- Cheryl-Anne	APPLY ADD			OUT-OF-STAT
APPLY TO: drop by						APPLICATIO ACCEPTED
APPLY ATTN:						
APPLY PHONE : 808-439-6490		F/	AX:		https://info.tmo.co LiveAtHSR.com	m/hsr
Unit Type: Number of UNITS:	DENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:	1304	2 X Rent				
Two Bdrm:	1627	2 X Rent				
Three Bdrm:						
Four Bdrm:						
EENT INFO: RENT IS 30% OF INCOME: 6/2023 - \$99 deposit for \$1304 units with o ree rent. Minimum income need not be met with Secondary or appropriate savings. 60%AMI - 8 units, 1 bedroom only.	ne month Wa	LITIES INCLU ter, sewer & tra			TOT. MINIMUM V ESTIMATE MAXIMUM V ESTIMATE	VAIT LIST
GE CRITERIA:					TO REMAIN ON \	
Ill residents must be 55 and older.		WAITLIST	FOR PARKING:		CALL EVERY	
		RKING INFO:		PET INFO:		PETS OK: YES
ASSET LIMITS:	unr	eserved garag	e parking	1 per perso	on, 30 lb. limit unle mal.	ess a certified
AN OWN RESIDENTIAL PROPERTY:				GENERAL	INFO:	
SSET LIMIT INFO:	LEA	ASE:		private dog room with	access to building g park; 2 activity rok kitchen; communi alking track; bike p	ty courtyard and
NCOME CRITERIA:						
Units priced for 30, 60 & 80% AMI. 10% AMI - 1 person - \$27,450; 2 person - \$ 10% AMI - 1 person -\$54,900; 2 person - \$ 10% AMI - 1 person - \$73,200; 2 person - \$	31,350 62,700 A.C	RNISHED:				
PERSON MAXIMUM MONTHLY INCOME	:: 610	00]		
PERSONS MAXIMUM MONTHLY INCOM	IE· 696	27				

		Last Comp	lete Update:	8/29/2024			AREA:	Lanakila
PROJECT NAME:	HALI'A	HALE -	NOT ACC	EPTING AF	PLICATION	S	PROJECT TYPE:	Elderly
ADDRESS:	851 North S	School St.					PHONE: 808-586	6-7595
CITY:	Honolulu		STATE: HI	ZIP:	96817		FAX: 586-752	26
	t: Thomas L		-		APPLY ADD			OUT-OF-STATE APPLICATION
): Hawaii Aff		perties inc.					ACCEPTED: NO
APPLY ATTN				ļ	FAX:		http://hawaiiafforda properties/	ble.com/residential-
Unit		lumber f UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	31	170	NO	408	1	1	YES
One	Bdrm:	10	195	NO	540	2	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
rent is 30% of incc \$195. Security deposit e Wait time for 1 bd Wait time for 2bdr AGE CRITERIA: One member mus	ome minimu qual to 1 mo drm 72 mont m: 60 month	m studio \$1 onth's rent. hs ns	70, 1bdrm	UTILITIES INCL Electricity and w	ater		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 72 AIT LIST (Months): 72 /AITLIST
Caregivers must b				WAITLIS PARKING INFO	T FOR PARKING: YES	PET INFO:	F	PETS OK: NO
				Parking included	1			į
AN OWN RESI	DENTIAL PR	ET LIMITS: ROPERTY:				GENERAL		
ASSET LIMIT INF Asset Limit: 1 per		00		LEASE:			are allowed with Na, spouse must trar	MD letter. If elderly asfer to studio unit.
2 persons - \$44,1				1 year; renewab following recerti			995 is Hale Po'ai ated laundry	
INCOME CRITER		• • •				Meeting ro	om w/kitchen and v	wheelchair
Maximum Annual 2 persons - \$52,4		erson - \$45		FURNISHED: Partly furnished appliances only.		Funding: U NO RESP update 3/1	ONSE IN 2021. La:	st completed
 1-PERSON MAXIN	IUM MONTH	HLY INCOM	E:	2858		J.		
2-PERSONS MAXI	MUM MONT	THLY INCO	ME:	3266				

		Last Comp	olete Update:	2/7/2022	2		AREA:	Chinatown
PROJECT NAME:	HARE	BOR VILL	AGE				PROJECT TYPE	Family
ADDRESS:	901 Rive	er St.					PHONE: 808-52	8-2753
CITY:	Honolulu	1	STATE: HI	ZIP:	96817	7	FAX : 566-09	15
MANAGER	R: DEBOR	RAH GONSAL	VES, SITE MAN	NAGER	901 Ri	Y ADDRESS:		OUT-OF-STATE
APPLY TO	: Locatio	ns LLC			Honoit	ulu, HI 96817		APPLICATION ACCEPTED:
APPLY ATTN	I: Afforda	ble Housing D	ept.					YES
APPLY PHONE: 808-625-9573					FAX: 521-27		AIL: locationsrentals.co	m/affordable-
	Туре:	Number of UNITS:	RENT:	Minimur INCOM Require	E CO ET.	MINIML Number of Peop	er Number of	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	60	1495		575	1	3	
Two	Bdrm:	30	1990		750	2	5	
Three I	Bdrm:				_	_		
Four	Bdrm:							YES
60% AMI: 1 Bdrm 1 Bdrm \$1,270; 2 120% AMI: 1 Bdrn 140% AMI: 1 Bdrn AGE CRITERIA:	Bdrm \$13 n \$1410; n \$1495;	355; 2 Bdrm \$1710 2 Bdrm \$1990);	Water + Se	wer	IING:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months):6 /AIT LIST (Months):36 VAITLIST
				PARKING I	NFO: NO	PET IN	IFO:	PETS OK: NO
]	AS	SSET LIMITS:	NONE	Parking inc	cluded		e animals are allowed nentation.	with proper
AN OWN RESID		PROPERTY:	NO				RAL INFO:	
ASSET LIMIT INF	O:			LEASE:		2020 (JPDATE - Info from we	ebsite
				1 year		NO RE compl	ESPONSE in 2021. La eted - prior to 2020.	st update
INCOME CRITER	IA:							
1 60% \$49,020 \$55 80% \$65,360 \$74 120%\$98,040 \$11 \$151,200 (5 perso	5,980 \$63 1,640 \$84 1,960 \$1:	,000 \$93,280	\$100,800	FURNISHE Partly furnis appliances	shedmajor			
1-PERSON MAXIM	IUM MON	ITHLY INCOM	1E:	8170		į.		
2-PERSONS MAXI	мим мс	NTHLY INCO	ME:	9330				

		Last Comp	olete Update:	1/21/2022				Kalihi
PROJECT NAME:	НАП	KI HOME	C (HDH A-I	han) - NOT	ACCEPTING	ADD	AREA: PROJECT TYPE:	
		373 Meyers St.		1011) - 140 1	ACCEPTING	AFF	PHONE: 808-832	
ADDITEOU.	1304-10	or o Meyers of.					FAX: 832-338	
CITY:	Honolul	u	STATE: HI	ZIP:	96819		1700 002 000	55
MANAGER APPLY TO	Christia Christia Christia	Viggett , Acting ana Brown, de			APPLY ADI 1002 North Honolulu, H NOT ACCE	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		applications off CCEPTING A				EMAIL.	ha haia ha wafa wa ca	NO
APPLY PHONE	E: 808-83	32-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	org
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:							
Two	Bdrm:	20	0		786	2	6	YES
Three I	Bdrm:	16	0		1034	3	8	YES
Four	Bdrm:	10	0		1110	4	10	YES
RENT INFO: RE Minimum Rent: Or Three Bdrm - \$15: applicants who are hpha.myhousing.c status. A usernan	ne Bdrm 2; Four B e on the v com to ch me and pa	- \$108; Two B drm - \$180. A waitlist are to g	drm - \$128; III HPHA go to:	UTILITIES INC	CLUDED: owance for electricity		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36
AGE CRITERIA:	int						TO REMAIN ON W	
Head of household older		•		PARKING INF		PET INFO:	CALL EVERY	
]		SSET LIMITS:		first come first	t serve			
AN OWN RESIDE		. PROPERTY:	NO			GENERAL STATE HO	INFO: DUSING PREFERE	NCES:
Cannot own a hou times the applicab times that limit for	use on Oa ole incom	e for admissio		LEASE: 1 year		1.)The Eld Veterans v Families o was detern	lerly 2.) The Displace N/ service connecter f deceased veterant mined to be service erans 6.) Families re	ced 3.) Disabled ed disabilities 4.) as whose death connected. 5.)
			20.050.2	ELIDA (10.115			al Shelters 7.) All of	
persons \$42,800; must be <50% are	NCOME CRITERIA: 50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550. Family income must be <50% area AMI unless displaced by government action, then <80% median is OK.			FURNISHED: Partly furnishe appliances on		Funding: State Pub Hsing 100% All convictions must be 3 yrs old.		
1-PERSON MAXIM	10M MUI	NTHLY INCOM	1E:	3450]		

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		Last Comp	lete Update:	10/20/2021			AREA:	Moiliili
PROJECT NAME:	HAUS	TEN GA	RDENS				PROJECT TYPE:	Elderly
ADDRESS:	808 Hau	sten St.					PHONE : 808-947	7-3423
CITY:	Honolulu		STATE: HI	ZIP:	96826		FAX: 955-610	05
MANAGER APPLY TO	Indigo F	Real Estate Se	Business Manaervices, Inc.	ger	APPLY ADD 808 Hauster Honolulu HI	n St.		OUT-OF-STATE APPLICATION
APPLY ATTN								ACCEPTED: YES
APPLY PHONE		_			FAX: 955-6105		nanager@hausten www.indigorealesta	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm:	49	0		550	1	2	YES
Three E								NO
RENT INFO: REI	of income	. Contact info		UTILITIES INC \$47 allowance water, sewer a	for electricity and all		MINIMUM W ESTIMATE MAXIMUM W	(Months): 48 AIT LIST
AGE CRITERIA: Head of household				WAITL	IST FOR PARKING:	-	ESTIMATE TO REMAIN ON W CALL EVERY	/AITLIST
must be 62+. Can proof of caregiving	J	er 18 allowed.		PARKING INF Parking includ available	O: YES	PET INFO:	F ALLOWED. Service	PETS OK: YES Dogs Allowed
AN OWN RESIDE	DENTIAL			LEASE:		courtyard a Funding: S	anai" area in front irea on each floor ection 8 100%	of units in central
INCOME CRITERI Maximum Annual 50% Income Limit 1 person \$42,200 2 persons \$48,200	Income: s			FURNISHED:	icrowave. Vinyl	Onsite laun Application Send reque envelope	dry facilities	
1-PERSON MAXIM 2-PERSONS MAXI				3517 4017]		

	Last Comp	lete Update:	8/29/2024			AREA:	Waipahu	
OJECT NAME:	HIBISCUS HIL	LS APARTN	IENTS			PROJECT TYPE:	Family	
ADDRESS:	94-1121 Ka Uka Blvd.					PHONE: 808-676		
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX: 808-676	6-3533	
MANAGER	: Marla Jimenez, Resid	dent Manager		APPLY AD On-site dro			OUT-OF-ST	
APPLY TO	:						APPLICATI ACCEPTE	
APPLY ATTN	:						YES	
APPLY PHONE	: 808-676-3533			FAX : 676-3533		www.EAHHousing. hi-management@e		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One E	3drm: 80		2.5x rent	588	1	4		
Four E							YES	
1876-\$3166		V	Vater, sewer,	trash		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):	
GE CRITERIA:	d 18 i					TO REMAIN ON V		
ead of Flouserion	u IO T		ARKING INF	IST FOR PARKING: O: NO \$75 2nd stall	PET INFO:		PETS OK: NO	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INFO:		
SET LIMIT INFO	D:		EASE:		On-site ma	On-site manager On-site laundry facilities		
			1 year			s. Manger prefers e	e-mail submissio	
COME CRITERI	A:				Call or ema	ail to request applic		
ax income for 50 units is 80% AMI income limits on 30 units		F	FURNISHED: Partly furnishedmajor appliances only; ceiling fans; air condition		. `	m manager's office Housing.org 9/2024	9	

		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	14-9260			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	avaliable.	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:	HOO	KIPA KAH	IALUʻU (H	PHA-wind) - NOT ACCE	PTIN	PROJECT TYPE:	
	_	Ahuimanu Rd.			,		PHONE: 808-233	3-3766
01774			07475				FAX: 233-376	69
CITY:	Kaneoh	е	STATE: HI	ZIP:	96744		,	
MANAGER	: Robert	a Kahele			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	: HPHA				Honolulu, HI	96817	APPLI	
		CCEPTING AP	PLICATIONS		NOT ACCE	TING APPLIC	CATIONS	ACCEPTED: NO
APPLY ATTN		applications office CCEPTING AP						110
APPLY PHONE			1 210/11/0110		FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
ATTETTTIONE	000 00	2 000 1			TAX. 002 0101			
Unit	Type:	Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	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:							
RENT INFO: RE Minimum Rent: \$0 the waitlist are to go change or check the password is neede), All HPH go to: hpl heir statu ed to acc	HA applicants wha.myhousing.cus. A username ess their accou	rho are on com to e and	UTILITIES INC Water and allo	CLUDED: wance for electricity		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	01010N1 <i>E</i>	*****					TO REMAIN ON W	
Head of household	d must be	e 18 years or ol	der	\Λ/ΔΙΤΙ	IST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO:	F	PETS OK: YES
]	A:	SSET LIMITS:	NONE	Included		the catego	nimals ok, but only or ries listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INFO		ah.i.		LEASE:			NCES: Domestic Vintransitional shelt	
Carriot own a nou	156 011 06	ariu		1 year		displaced.		,
						Funding: F	ed Low Inc Pub Hs	sing 100%
INCOME CRITERI	IA:			r			ions 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;		,			ONSE IN 2019 eleted update 10/05	/2017
1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4570				
2 DEDCONC MAVI			4 5.	F220				

		Last Comp	lete Update:	11/2/2021			AREA:	Kalihi
PROJECT NAME:	ISLA	ND WEST	•				PROJECT TYPE:	Family
ADDRESS:	607 No	rth King St.					PHONE: 808-84	7-8465
CITY	Honolu	1	STATE: HI	ZIP:	00047		FAX: 808-44	2-0407
OIII.	Inonoia	iu	SIAIL.	211 .	96817			
MANAGER APPLY TO	Mana	ger	ding Manager; Li	nda West, Office	APPLY ADI On-Site 9a	DRESS: am - 5pm M - I	F	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	l: Linda	West						
APPLY PHONE	: 808-84	47-8465		F.	AX:	EMAIL:	Linda@HSIservice	s.net
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	400	750	1400	144	1	2adlt,1kid	YES
One I	Bdrm:	3	1565	2750	300	1	3adlt,1kid	
Two I	Bdrm:	1	1800	3050	400	2	4adlt,1kid	
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE Building A - rent is Building B - rent is [169 sq. ft] Min Income requir Plus \$100 for extra	\$700 - \$750 - ement wa	Min income = \$ Min income = \$ vaived if have re n. Respond to m	1400 1600 p payee;	UTILITIES INCLU Electricity and wa			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1
AGE CRITERIA:							TO REMAIN ON V	
Head of household time of application		e 18 years or ol	der at the	PARKING INFO:	FOR PARKING: YES	PET INFO	CALL EVERY	(Months): 0 PETS OK: NO
J		SSET LIMITS:		\$35/month (first of served basis)	come - first			
AN OWN RESIDE		L PROPERTY:	NO			GENERAL	INFO:	narking lot at
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			LEASE: Month-to-month;	or 1 year with	back. Sm	all rooms with no k rigerator and hot pl	itchen. Can bring
				Section 8 vouche		All units a	re unfurnished.	
INCOME CRITERI	IA:			,		Called 8/2	9/2024 and left voi	cemail.
No maximum anni	ual incor	me.		FURNISHED: No carpet. Not fu	urnished.			

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Co	mplete Update:	1/4/2022			AREA	Waipahu
PROJECT NAME:	JACK HALL					PROJECT TYPE	Family
ADDRESS:	94-827 Kuhaulua S	t.				PHONE: 808-67	1-2244
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX:	
MANAGER	R: Jesse Johnasen			APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO): https://www.jackh	allwaipahu.com/					APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE	E: 808-468-5102			FAX: 949-7211	EMAIL:	https://www.jackha hello@indigoreales	
	Number of UNITS	: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 104		l NO	F50			YES
	Bdrm: 104 Bdrm: 40	0	NO NO	793			YES
Three			NO	793			
	Bdrm:						NO
1	24		,		,		NO
30% to a max of \$ (minus \$103 util. a for two bedrooms	ENT IS 30% OF INCO 5877 for one bedroor allowance) 30% to a (minus \$250 util. all as are subject to cha	max of \$1022 owance)	bedrm; \$250 fo	llowance \$103 for 1	ge	MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:	,		k				(Months): 24
	d must be 18 years	or older	\ \ / \ T	IST FOR PARKING:		TO REMAIN ON V	
			PARKING INF	O:	PET INFO	:	PETS OK: NO
	ASSET LIMI	TS: NONE					
	DENTIAL PROPERT	ry: YES			GENERAL	INFO:	
ASSET LIMIT INF Income from asse income limit.	O: ets cannot make tena	ant go over	LEASE: 1 year; then m	nonth-to-month	5 accessil **Applicar	Project Based Sub ole 1 bdrm units. hts on waitlist MUS as change in phone	T call to update
INCOME CRITER max income: 1 be	IA: droom \$39,200; 2 bo	edroom \$50,880	FURNISHED: Partly furnishe appliances on				
I I-PERSON MAXIN	IUM MONTHLY INC	OME:	4475		1		
2-PERSONS MAXI	IMUM MONTHLY IN	COME:	5113				

		Last Compl	lete Update:	10/6/2023			ADEA.	Chinatown
PROJECT NAME:	KAAL	-IIIM A MI I	HOMES (L	IDH A-hon') - NOT ACCE	DTIN	AREA: PROJECT TYPE:	Family
			Waiakamilo Rd) - NOT ACCE	1111	PHONE: 808-832	, ·
7.551.200.	Alokeic	a Naiwidia Ot.,	vvalakarnio rka	. a morton ot.			FAX: 832-318	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		1 AX. 002-010	O
MANAGER	: Cynthia	a Yoshida - Mai	nager		APPLY ADD			
APPLY TO		CCEPTING AP	PLICATIONS		1002 North S Honolulu, HI NOT ACCEF		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		applications office						NO
APPLY PHONE: 808-832-5961 FAX: 832-3461						EMAIL:	nphaishereforyou.oi	rg
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:							
	Bdrm:	116	0		714	2	6	YES
Three E	Bdrm:	36	0		888	3	8	YES
Four I	Bdrm:							
Minimum Rent: \$0 the waitlist are to g change or check the password is needed.). All HPI go to: hpI heir statu ed to acc	HA applicants vha.myhousing.cis. A usernameess their accou	who are on com to e and	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:		. 40	dan				TO REMAIN ON W CALL EVERY (
Head of household	d must be	e 18 years or ol	der	WAITL PARKING INF	O: PARKING:	PET INFO:		ETS OK: YES
	AS	SSET LIMITS:	NONE			the categor	imals ok, but only c ries listed below: nder 25 lbs) or cat	ne from each of
AN OWN RESID		PROPERTY:	NO			GENERAL		
Cannot own a hou		ahu		LEASE:			NCES: Domestic V n transitional shelte	
INCOME CRITERI	IA:					All convicti	ed Low Inc Pub Hs ons must be 3 yrs a	ago, unless it's
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 furnishe appliances on		1	hamphetamine or s	sex offender
1-PERSON MAXIM				4570		Į.		

		Last Comp	lete Update:	5/28/2024			AREA:	Honolulu
PROJECT NAME:	KAH	AUIKI VIL	LAGE				PROJECT TYPE:	Family
ADDRESS:	2325 N.	Nimitz Hwy.					PHONE: 808-778	8-2464
CITY:	Honoluli	u	STATE: HI	ZIP:	96819		FAX:	
MANAGER	R: Institut	e for Human So	ervices		APPLY ADD	PRESS:		OUT-OF-STATE
		eferrals to 425-	5168 attention	to Family Program				APPLICATION ACCEPTED:
APPLY ATTN				F	FAX: 808-425-5168		KVApplications@ih	nshawaii.org
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One	Bdrm:	60	775		324			
Two	Bdrm:	80	975		540			
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE Rent is deducted tenats choosing. waitlist are not rec manager will be or AGE CRITERIA:	automation Regular u quired. A	cally through th updates to rema pplicant or the	e bank of ain on the case	UTILITIES INCLI	UDED: v, internet, and cable	е	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 0 (AIT LIST (Months): 0
(62+ yrs)	ماند اماند			WAITLIS	T FOR PARKING:		CALL EVERY	
Families with cust	odiai min	ior children		PARKING INFO: 1 parking per ho		PET INFO	: F	PETS OK: NO
	AS	SSET LIMITS:						
AN OWN RESI		PROPERTY:				GENERAL		
ASSET LIMIT INF	O:			LEASE:			iving in Homeless E sitional Shelter for h	
				6 month		living in si of being h	oriority for housing. substandard housing nomeless may also a st be minimum 1 ac	and are at a risk apply.
INCOME CRITER	IA:					under the	table jobs are acce are subject to a Cris	pted)
50% AMI # of people in hou	sehold:			FURNISHED:			cluding Sexual Offer	
2 3 50,400 56,700 6	4 2,950 68	5 6 3,000 73,050	7 78,100					

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	8/29/2024			AREA:	Kahuku
PROJECT NAME:	KAHUKU ELDI	ERLY - HAU	OLI HALE			PROJECT TYPE:	Elderly
ADDRESS:	56-154 Puuluana Pl.					PHONE: 808-293	3-1416
CITY:	Kahuku	STATE: HI	ZIP:	96731		FAX : 293-141	6
	ranaka			30701			
MANAGER	: Bonnie Cambra, Resi	dent Manager		APPLY ADI 56-154 Puul			OUT-OF-STATE
APPLY TO): Hawaii Affordable pro	perties, Inc.		Unit 100 Kahuku, Ha	waii 96731		APPLICATION ACCEPTED: YES
APPLY ATTN	l:						152
APPLY PHONE	E: 808-293-1416		ı	FAX:	EMAIL:	eahhousing.org ks-management@e	eahhousing.org
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One	Bdrm: 64	0		570	1	3	YES
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						YES
	NT IS 30% OF INCOME		JTILITIES INCL Water, sewer an		_	TOTA	L UNITS: 64
must submit chan	ges to their contact infor nd in a timely manner to	mation in	vater, sewer an	u trasii		MINIMUM W ESTIMATE MAXIMUM W	(Months): 60
		Į.				ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	
older at the time of	e household must be 62 of application.			T FOR PARKING:			
			PARKING INFO: Parking included	1.10	PET INFO	: F s under 25 lbs. only	PETS OK: YES
,	ASSET LIMITS:		Ü			it \$150 per pet.	
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF			EASE:			Section 8/HUD; 9%	
			1 year; then mo	nth-to-month	coordinate Transport	s; on-site manager, r or, laundry room. ation to Shopping av Charities Hawaii	
INCOME CRITER Maximum Annual	IA: Income: 50% AMI or les	ss F	FURNISHED:		Complete Ask mana		
1 person \$45,750 2 person \$52,250 3 person \$58,800			Appliances; ceili water heaters, e microwave, garb granite countert coverings.	electric range, page disposal,	Request b		,
 1-PERSON MAXIM	IUM MONTHLY INCOM	 E: :	3813]		

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		Last Compl	ete Update:	10/6/2023				MaCully
DDO IECT NAME:	L/ A L				NOT ACCE	TING	PROJECT TYPE:	McCully
PROJECT NAME: ADDRESS:			INIES (HI	PHA-NON) -	NOT ACCEP	TING		J .
ADDICESS.	1545 Ka	diakaua Ave.					PHONE: 808-973 FAX: 973-019	
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX. 973-019	7
MANAGER): HPHA	Ah Sam	PLICATIONS		Honolulu,	h School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		applications offic			hphaishereforyou.o	NO		
APPLY PHONE	: 808-83	32-5961			FAX: 832-3461		, , , , , , , , , , , , , , , , , , , ,	
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	127	0		559	1	4	YES
Two I	Bdrm:	58	0		711	2	6	YES
Three I	Bdrm:	36	0		901	3	8	
Four I	Bdrm:							
Minimum Rent: \$0 the waitlist are to g change or check the password is needed.). All HPI go to: hp heir statu ed to acc	HA applicants wha.myhousing.cus. A username	no are on om to and	UTILITIES INC	CLUDED: owance for electricity	У	MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE (TO REMAIN ON W	(Months): 36 AIT LIST (Months): 60 AITLIST
Head of household	d must b	e 18 years or old	der	WAITL PARKING INF	IST FOR PARKING	: PET INFO:	CALL EVERY	(Months): YES
AN OWN RESIDE	DENTIAL	SSET LIMITS:			О . ј	multiple ar the catego one dod (u GENERAL	nimals ok, but only or ries listed below: ander 25 lbs) or_cat	one from each of
Cannot own a hou	ise on Oa	ahu		LEASE: 1 year		homeless displaced. Funding:	in transitional shelte Fed Low Inc Pub Hs	ers; involuntary
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 furnishe appliances on		crystal me	ions must be 3 yrs a thamphetamine or s ONSE IN 2023	
1-PERSON MAXIM	IUM MOI	NTHLY INCOME	<u>:</u>	4570		1		

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	Last Compl	ete Update:	7/18/2023			AREA:	Ala Moana
PROJECT NAME:	KALAKAUA VI	STA				PROJECT TYPE:	Elderly
ADDRESS:	1628 Kalakaua Ave.					PHONE: 808-946	6-5936
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 949-552	25
MANAGER	t: Kainoa Kuamoo, Resid Hawaii Affordable Hou			APPLY ADD	ORESS: aua Ave. Hond	olulu, HI	OUT-OF-STATE
APPLY TO	: Kalakaua Vista			96826			APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	i:			FAX:	EMAIL:	http://www.hawaiiaf	ffordable.com
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	tudio: 80 Bdrm: 80	1115	2xrent	430	1	2	YES
Three I							NO
Section 8 certificat gross income requ Updates are not re (7) handicap units 2004 AMI 8 units AGE CRITERIA:	equired to remain on the	t the min waitlist.	JTILITIES INC Electric, water,	sewer, and trash		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 12 AIT LIST (Months): 24 /AITLIST
application.	be 62 of olderat the time	F	WAITLI: PARKING INFO \$40/month	ST FOR PARKING: D: NO		F imals are allowed v	PETS OK: NO
AN OWN RESID	ASSET LIMITS:				documenta		
Only the 50% AMI	O: I individuals can have pro	operty.	EASE: 1 year; then m	onth-to-month	Air-Conditi	case manager 2 da	
INCOME CRITERI	IΔ·	ļ			Funding: L	IHTC, RHTF, Secti	ion 8
Maximum income 30% of AMI: 1 per		\$31,350	FURNISHED: Partly furnished appliances only		9/18/24 Application Pick up from Pick up fro	s not listed on Hawan: on: m manager's office gement to mail it	
 1-PERSON MAXIM	IUM MONTHLY INCOME] E: :	3821]		

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	Last Com	plete Update:	10/6/2023			AREA:	Mililani
PROJECT NAME:	KALANI GAR	DENS				PROJECT TYPE:	Family
ADDRESS:	95-081 Kipapa Dr.					PHONE: 808-623	3-9811
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX: 623-72	12
MANAGER	R: Heather Weddle			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO):						APPLICATION ACCEPTED:
APPLY ATTN	1: Kalani Gardens						YES
APPLY PHONE	E: 808-623-9811			FAX : 623-7212		website: www.eahl kg-management@o	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:						
	Bdrm: 86	1236	YES	700 950	3	7	YES
Three	Bdrm: 31	1374	123	950		,	YES
Rent cannot exceed One person house New rents as of 1 2BR \$1126 - \$123 3BR \$1253 - \$137	36 74 - Not Accepting App	plications	UTILITIES INC Gas, electricity sewer	CLUDED: v and water, trash and	d	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 9
AGE CRITERIA:	d must be 18 years or					TO REMAIN ON W	VAITLIST
time of application		older at the	WAITLI PARKING INF		PET INFO:		PETS OK: NO
AN OWN PESI	ASSET LIMITS DENTIAL PROPERTY				GENERAL	INEO:	
ASSET LIMIT INF		. 1120	LEASE:			ection 8 and LIHT	C
			1 year			ONSE IN 2023 8/29/2024, no resp	onse
persons - \$65,280 \$78,300; 6 person	MA: me: 2 persons - \$58,02 0; 4 persons - \$72,480; ns - \$84,120; 7 persons by due to different criter	5 persons - s - \$89,880;	FURNISHED: Partly furnishe appliances onl		Called ion	10/21/24 left voice	mail
" 1-PERSON MAXIN	IUM MONTHLY INCO	ME:			Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	OME:	4820				

	Last Comp	lete Update:	10/6/2023			AREA:	Chinatown
PROJECT NAME:	KALANIHUIA (HPHA-hon) - NOT	ACCEPTING	APPLL	PROJECT TYPE:	
	1220 Aala St.		, 11017	AOOLI IIII		PHONE: 808-58	1 '
7.22.1.200.	1220 Adid Ot.					FAX: 586-97	
CITY:	Honolulu	STATE: HI	ZIP:	96817		1 AX. 300-97	20
MANAGER	: Sol Sentous			APPLY	ADDRESS:		
					lorth School S ılu, HI 96817	St.	OUT-OF-STATE APPLICATION
APPLY TO): HPHA NOT ACCEPTING AF	PPLICATIONS				PPLICATIONS	ACCEPTED:
APPLY ATTN	l: Oahu applications offi	ce					NO
	NOT ACCEPTING AF				EM	IAIL: hphaishereforyou.c	ora
APPLY PHONE	: 808-832-5961			FAX: 832-346		,	9
			Minimum		MINIM	MAXIMUM MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME	SO ET.	Numb	ber Number of	CAREGIVER Allowed:
			Required	. 04111	of Ped	ople People:	
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		UTILITIES IN			TOTA	AL UNITS: 151
	 All HPHA applicants of the second control of the seco		Allowance fo	or utilities		MINIMUM W	
change or check the	heir status. A usernamed to access their accou	e and				ESTIMATE	(Months): 24
***********		## T.				MAXIMUM W ESTIMATE	
AGE CRITERIA:	0/7/7/146^^^^					TO REMAIN ON V	Į
-	d or spouse must be 62	years or	\A/A I T		INC.	CALL EVERY	
older, or disabled			PARKING IN	LIST FOR PARK IFO:	PET I	INFO:	PETS OK: YES
			Included		Smal	ll pets under 25 lbs. only	
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENE	ERAL INFO:	
ASSET LIMIT INFO	O:		LEASE:			FERENCES:(A) domes	
Cannot own a hou	se on Oahu.		1 year			ns; homeless in transitio laced. (B) substandard	
						come. (C) others = indef ler dies, under age 62 sp	
J					unit.	Funding: Fed Low Inc P me Eligibility=80% of AM	ub Hsing 100%
ncome Eligibility =	•		FURNISHED	١٠	All co	onvictions must be 3 yrs	ago, unless it's
Maximum Annual	Income: 1 person - \$53	,250;	Partly furnis		cryst	tal methamphetamine or	sex offender
4 persons - \$76,10	00; 3 persons - \$68,500 00; 5 persons - \$82,200	;	appliances of	only, no carpet	Last	completed update 10/05	5/2017
6 persons - \$88,30 8 persons - \$100,4	00; 7 persons - \$94,350 450	· ·					
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		Įt.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

	La	st Comple	te Update:	10/6/2023				AREA	Kalihi	
PROJECT NAME:	KALIHI V	ALLEY	HOMES	(HPHA-h	on) - N	NOT AC	CEPT	PROJECT TYPE	,	
	2250 Kalena I			(PHONE: 808-83		
								FAX: 832-33		
CITY:	Honolulu		STATE: HI	ZIP:		96819		17A. 032-33	00	
MANAGER	: Julie Wigget	t				APPLY A				
APPLY TO	: HPHA NOT ACCEF	PTING APP	LICATIONS	Honolulu, HI 96817 A					OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	l: Oahu applica								NO	
APPLY PHONE	: 808-832-596	51			FAX:	832-3461	EMAIL	: hphaishereforyou.	org	
Unit		nber NITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:								V/F0	
		52	0		<u> </u>	494	1	4	YES	
		60	0			674	2	6	YES	
Three I		23	0			1115	3	10		
Four	Bdrm: 1	12	0	ļ		1113	4	10	YES	
Min. Rent: \$0; 26 applicants who are hpha.myhousing.c status. A usernan access their accord	5 Bdrm units e on the waitlis com to change ne and passwo	s. All HPHA t are to go t or check th	to:	Water and all			у	TOT/ MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36	
AGE CRITERIA:								TO REMAIN ON V		
Head of household	d must be 18 y	ears or old	er	WAITL	_IST FOR	PARKING	i:	CALL EVERY	(Months):	
				PARKING INF		NO	PET INFO	O:	PETS OK: YES	
	ASSET	LIMITS:	NONE	one space pe	er unit		the categ	animals ok, but only gories listed below: (under 25 lbs) or ca		
AN OWN RESID		PERTY:	10				GENERA	L INFO:		
Cannot own a hou				LEASE:				RENCES: Domestic 's in transitional shelld.		
							Funding:	Fed Low Inc Pub H	sing 100%	
INCOME CRITER	IA:							ctions must be 3 yrs		
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			_ '	crystal methamphetamine or sex offender NO RESPONSE IN 2023		
1-PERSON MAXIM	IUM MONTHL	Y INCOME:		4570			li-			
2-PERSONS MAXI	MUM MONTH	LY INCOMI	Ε:	5220						

	Last Comp	lete Update:	10/6/2023			AREA:	Hawaii Kai
PROJECT NAME:	KALUANUI SE	NIOR APA	RTMENTS	i e		PROJECT TYPE:	Elderly
ADDRESS:	6950 Hawaii Kai Dr.					PHONE: 808-394	4-6688
CITY:	Honolulu	STATE: HI	ZIP:	96825		FAX:	
	t: Mike Klein, Complian	-		APPLY ADI 394-6688	DRESS:		OUT-OF-STATE
APPLY ATTN	l:						ACCEPTED: YES
APPLY PHONE	:: 808-394-6688			FAX:	EMAIL:	halealiigroup@yah	oo.com
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 10 Bdrm: 21	1228		525			
Three I	Bdrm:						NO
Lower rent units for 3 1bdrm 3 2bdr	or people at <50%AMI	E: NO	UTILITIES INCI			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:						ESTIMATE TO REMAIN ON V	. , , , , , , , , , , , , , , , , , , ,
One member mus	t be 62+; spouse can b	e 18+	WAITLIS	ST FOR PARKING:	PET INFO	CALL EVERY	(Months): 6 PETS OK: NO
			Parking \$40 mg		PET INFO	<u>'</u>	-L13 OK. INO
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				 GENERAL	INFO:	
ASSET LIMIT INF	0:		LEASE:			1/15/2003 all units g fans in bdrms and	
			1 year		have tub, Communi Inc Hsing	, lever handles on one 2bdrm have showe by Lounge with TV, Tax Credit 100%	r with low lip.
INCOME CRITER	IA: rson \$21,650; 2 persons	\$24.7F0	FURNISHED:		Funding:		
	son \$36,050; 2 persons		Partly furnished appliances only		Last comp	RTIAL RESPONSI pleted update 10/20 9/2024, 10/17/2024	/17
 1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	3004]		

	Last Comp	lete Update:	5/28/2024			AREA:	Kakaako
ROJECT NAME:	KAMAKEE VIS	TA				PROJECT TYPE:	Family
ADDRESS:	1065 Kawaiahao St.					PHONE: 808-597	7-1725
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 808-597	71002
MANAGER	R: Toshi Hines			APPLY ADI			OUT-OF-STAT
APPLY TO	D: Hawaii Affordable Pro	perties Inc.		on one ripe	. 11001		APPLICATION ACCEPTED
APPLY ATTN	N: Kamakee Vista						YES
APPLY PHONE	Ξ: 808-594-0121			FAX : 594-0123		kkamakeevista@ha http://hawaiiafforda	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 90	1000	3338	F70			YES
	Bdrm: 90 136	1886 2438	4115	720	2		YES
Three		2430	4113	720	2		
	Bdrm:						YES
Deposit = 1 month						MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA:		is.				TO REMAIN ON W	
Head of househol	d must be 18 years or ol	lder	WAITL	IST FOR PARKING:		CALL EVERY	
			RKING INF		PET INFO:	F	PETS OK: NO
	ASSET LIMITS:	st	10/month; \$7 all	75 each additional			
AN OWN RESII	DENTIAL PROPERTY:				general	INFO:	
SSET LIMIT INF	O: housing unit in this coul	ntv.	ASE:			can be converted to a re allowed with N	
Samot own other	Tiousing unit in this coul	1	year		Application Ask mana		
NCOME CRITER					envelope	om manager's office	
No maximum ann Min Income for ma	ual income. arket 1 bdrm = \$4,350 2 bdrm = \$5,600	Pa	JRNISHED: artly furnishe opliances on			y email or fax	
PERSON MAXIM	NUM MONTHLY INCOM	E: 37	700		<u> </u>		
PERSONS MAX	IMUM MONTHLY INCOI	ME: 44	163				

		Last Comp	lete Update:	10/6/2023			AREA:	Waipahu
PROJECT NAME:	KAM	ALU - HO	OLULU E	LDERLY -	NOT ACCE	PTING	PROJECT TYPE:	Elderly
ADDRESS:	94-941 k	Kauolu Pl.					PHONE: 808-675	5-0099
CITY:	Maipahı	1	STATE: HI	ZIP:	96797		FAX: 675-009	98
	VVaipaire				30707			
MANAGER	t: Venus	R. Katano				ADDRESS: Apt. A-107		OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	perties Inc.			•		APPLICATION ACCEPTED:
APPLY ATTN	I: Venus	R. Katano						NO
APPLY PHONE	: 808-67	5-0099			FAX: 675-0098		-: http://hawaiiafforda properties/	ble.com/residential-
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	tudio:	171	170		443	1	1	YES
One I	Bdrm:	50	195		599	2	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE Minimum rent for s \$195 or 30% of inc	studio is S come, wh	\$170 and for or iichever is mor	ne bdrm is e.	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 36
A OF ODITEDIA				į.			ESTIMATE	, , ,
AGE CRITERIA: Head of household	d must be	e 62 years or o	Iderat the	\			TO REMAIN ON W CALL EVERY	
time of application old.	n, spouse/	partner must b	e 55 years	WALL PARKING INF	IST FOR PARKIN O:	PET INF	O: F	PETS OK: NO
				Parking include	led			·
	AS	SSET LIMITS:	YES					
AN OWN RESIDE		PROPERTY:	YES				AL INFO:	4D.1.11
Cannot own prope Limit: 1 person - \$ 2 persons - \$44,10	erty in san 38,600,	ne county.	Asset	LEASE: Month-to-mon	th	No prefe opened Large ga Meeting	ers are allowed with Merence for veterans and 1993-Kamalu 1994-Hearden /Dining room with kitoprtation to Shopping a	ny more Hoʻolulu shen
INCOME CRITER	IA:					Catholic	: Charities Hawaiʻi g only in designated a	ŭ
Maximum Annual 1 person - \$34,300 2 persons - \$39,20	0			Partly furnishe appliances on Central heat; system		unit)	SPONSE in 2023. Las	·
I 1-PERSON MAXIM	IUM MON	THLY INCOM	E:	2858		1		
2-PERSONS MAXI	мим мс	NTHLY INCO	ME:	3267				

		Last Compl	ete Update:	10/6/2023				Kalihi
PROJECT NAME	ΚΔMI	EHAMEH <i>A</i>	HOMES	(HPHA-ho	n) - NOT ACC	FPTI	AREA: PROJECT TYPE:	Family
ADDRESS:			TIONILO		ii) - NOT ACC		PHONE: 808-832	,
							FAX: 832-318	
CITY:	Honolul	J	STATE: HI	ZIP:	96817		1700 002 010	O
MANAGER	: Cynthia	a Yoshida - Mar	ager		APPLY ADD			OUT-OF-STATE
APPLY TO		CCEPTING AP	PLICATIONS		Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS			
APPLY ATTN		applications offic CCEPTING AP				EMAII • ŀ	nphaishereforyou.oi	NO
APPLY PHONE	: 808-83	2-5961			FAX: 832-3461	LIMAIL.	ipriaisriereroryou.or	9
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:	62	0		540	1	4	YES
Two E	Bdrm:	123	0		800	2	6	YES
Three E	3drm:	36	0		980	3	8	YES
Four E	Bdrm:							
Minimum Rent: \$0 All HPHA applican to: hpha.myhousin status. A usernam access their accou	for Fede its who a ig.com to ne and pa	eral Low Income re on the waitlis change or che	projects t are to go ck their	UTILITIES INC	CLUDED: owance for utilities		MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA: Head of household	d must be	10 years or all	dor			-	TO REMAIN ON W CALL EVERY (
li lead of flousefloid	ı iilüsi be	e to years or on	Jei	WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: YES
	AS	SSET LIMITS:	NONE	Included	O.	multiple ani	imals ok, but only o ies listed below: nder 25 lbs) or cat	
AN OWN RESID		PROPERTY:	NO			GENERAL I		
Cannot own a hou		ahu		LEASE: 1 year			NCES: Domestic V n transitional shelte	
							ed Low Inc Pub Hs	
INCOME CRITERI		ΔΜΙ		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 pers 00; 5 pers 00; 7 pers	1 person - \$53,2 sons - \$68,500; sons - \$82,200;	250;	Partly furnishe appliances on		NO RESPO	DNSE IN 2023	
1-PERSON MAXIM				4570		-		

		Last Compl	ete Update:	10/6/2023			AREA:	Kaneohe	
PROJECT NAME:	KANF	-ΌΗΕ ΔΡ	ARTMENT	ΓS (ΗΡΗΔ-	wind) - NOT A	CCE	7.11.127.11	Family	
		& 45-513 Pahia		10 (111 117)	11017		PHONE: 808-233	J	
							FAX: 233-376		
CITY:	Kaneoh	e	STATE: HI	ZIP:	96744		,		
MANAGER	: Roberta	a Kahele			APPLY ADD				
APPLY TO		CCEPTING AP	PLICATIONS		1002 North S Honolulu, HI NOT ACCEF		OUT-O APPL PLICATIONS ACC		
APPLY ATTN		pplications offic						NO	
APPLY PHONE: 808-832-5961 FAX: 832-3461								rg	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:								
One E	Bdrm:	5	0		429	1	4	YES	
Two E	Bdrm:	19	0		600	2	6	YES	
Three E	Bdrm:								
Four I	Bdrm:								
Minimum Rent: \$0 All HPHA applican to: hpha.myhousin status. A usernam access their accou	for Fedents who and angles of the angles of	eral Low Income re on the waitlis change or che	e projects. et are to go ck their	UTILITIES INC Water and allo	CLUDED: owance for electricity		TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36 AIT LIST	
AGE CRITERIA:						-	TO REMAIN ON W		
Head of household	d must be	e 18 years or ol	der		IST FOR PARKING:		CALL EVERY		
	AS	SSET LIMITS:	NONE	PARKING INF	O:	the categor	mals ok, but only or ies listed below: nder 25 lbs) or cat	PETS OK: YES	
AN OWN RESID						GENERAL I	NFO:		
ASSET LIMIT INFO		.h		LEASE:			NCES: Domestic V		
Cannot own a hou	ise on Oa	iriu		1 year		displaced.		,	
J							ed Low Inc Pub Hs		
INCOME CRITERI		^ N A I		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 pers 00; 5 pers 00; 7 pers	1 person - \$53, sons - \$68,500; sons - \$82,200;		Partly furnishe appliances on		NO RESPONSE IN 2023			
1-PERSON MAXIM				4570		μ			

		Last Comp	lete Update:	7/20/2023			AREA:	Kaneohe
PROJECT NAME:	KANE	OHE EL	DERLY				PROJECT TYPE:	Elderly
ADDRESS:	45-457 N	Meli Pl.					PHONE: 808-23	5-4399
CITY:	Kaneoh	Э	STATE: HI	ZIP:	96744		FAX: 235-000	33
MANAGER			being hired; Ne ecmiweb.net) 80	w regional mana 08-859-6514	ger - APPLY ADD Leasing Office			OUT-OF-STATI
APPLY TO		idge Managem 9:00am - 1:00		hours - Monday	-			APPLICATION ACCEPTED: YES
APPLY ATTN	1 :							120
APPLY PHONE	E: 808-23	5-4399			FAX : 235-0033	EMAIL:	kaneohe@cmiweb. https://www.kaneoh	
	t Type:	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:							
Three	Bdrm:							
Four	Bdrm:							NO
				Water and \$52 taken off the re	2 mo. utility allowance ent.		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36
AGE CRITERIA:							TO REMAIN ON V	VAITLIST
Head of household disabled. Other fa					IST FOR PARKING:		CALL EVERY	
caregivers allowed	d at any a	ige.		PARKING INF		\$300 depo	: Fosit; one dog/cat/ca	PETS OK: YES
	AS	SSET LIMITS:	NONE				x; breed/species res	
AN OWN RESI		PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	O:			LEASE:		managem	nhanced complex; ent; community roo	m, on-call
				1 year		convenier landscape	by Maintenance; on to shopping; outdood garden. Low Income Housin	oor sitting area;
INCOME CRITER	IA:					Section 8 Applicatio	100%	g rax Orean 100%
Maximum annual 2 persons \$46,650			50	Partly furnishe appliances on flooring. Amplicabinet space	ly. Wood-style e closet and	Ask mana Send requenvelope NOT RES	gement to mail it gest with self-address PONSED TO UPD	·
I I-PERSON MAXIN	MUM MON	NTHLY INCOM	IE:	3404		1		
2-PERSONS MAXI	IMUM MC	NTHI Y INCO	MF:	3887				

	Last Comp	lete Update:	10/6/2023			AREA:	Lanakila
PROJECT NAME:	KAPUNA I - NO	OT ACCEP	TING APF	PLICATIONS		PROJECT TYPE:	Elderly
ADDRESS:	1015 North School St.					PHONE: 808-845	5-2130
						FAX: 845-668	
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
MANAGER	2: Sherry Prevo Investment Property (Group		APPLY ADE			OUT-OF-STATE
APPLY TO	Sage Apartment Com	nmunities, Inc.		Honolulu, Hl			APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	E: 808-845-2130			FAX: 845-6684	EMAIL:	https://kapunaoneip	ogliving.com/
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: 162	0		530			YES
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						NO
RENT INFO: RE	NT IS 30% OF INCOME	E: YES	UTILITIES IN	CLUDED:		TOTA	L UNITS: 162
application. Must	sed on anniversary date respond to mail from m		Electricity and	d water		MINIMUM W ESTIMATE	_
in a timely manner	Γ. D/19/91	James .	<u> </u>			MAXIMUM W ESTIMATE	
AGE CRITERIA:	1101-20-21	10tton/				TO REMAIN ON W	
	lication, Head of househ		WAITI	LIST FOR PARKING:		CALL EVERY	
	er, or 18+ w/ disability. nily members, roommat		PARKING INF		PET INFO:	F	PETS OK: YES
caregivers allowed	d with mgmt approval.		Parking include	ded		oved reasonable ac	comodations and
	ASSET LIMITS:	NONE			anyone rec	questing pet	
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:			t be notified if application	
			1 year, then r	month-to-month.	Funding: S Tax Credit Transporta	Section 8 and Low I	ncome Housing vailable through
INCOME CRITER	IA:				Must come	e in personally to up with form sent to ap	odate applications
	income is 80% AMI: 1 p is - \$77,350, 3 persons		FURNISHED:	edmajor	NO RESP	ONSE IN 2023	рпсан.
PREF: VERY LO	W INCOME (<30% OF	MEDIAN)	appliances or	niy			
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	5642		J.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	6448				

		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: wance 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
						Username	e/password to do so Fed Low Inc Pub Hs).
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			;	Partly furnishedmajor All convic			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:	8/29/2024			AREA:	Kakaako
PROJECT NAME:	KAUH	IALE KAI	KAAKO				PROJECT TYPE:	Family
ADDRESS:	860 Hale	ekauwila St.					PHONE: 808-593	3-9035
CITY:	Honolulu	ı	STATE: HI	ZIP:	96813		FAX : 591-025	50
MANAGER	R: Laura k	Kim, Property N	Manager		APPLY AD			OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	perties Inc.					APPLICATION ACCEPTED:
APPLY ATTN	1: Kauhal	e Kakaako						YES
APPLY PHONE	E: 808-59	3-9035			FAX: 591-0250		kauhalekakaako.co http://hawaiiafforda	om ble.com/residential-
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	116	1886	4350	578	1	4	YES
Two	Bdrm:	152	2438	5600	728	2	5	YES
Three	Bdrm:							
Four	Bdrm:							YES
Rent increases pla Accepts 80% AMI				Water, Sewer,	, Garbage		MINIMUM W ESTIMATE MAXIMUM W	(Months): 1
AGE CRITERIA:				Į.			ESTIMATE TO REMAIN ON W	
Head of househol		e 18 years or o	lder at the	WAITL	IST FOR PARKING:		CALL EVERY	
time of application	1.			PARKING INF		PET INFO:	F	PETS OK: YES
<u> </u>	AS	SSET LIMITS:	NONE		ond Parking (Non-residents -	Pets permi	tted with a \$200 re	fundable deposit.
AN OWN RESI		PROPERTY:	YES	\$157 mo.) No	guest parking.	GENERAL		
ASSET LIMIT INF	·O:			LEASE: 1 year		recreations court, barb center and Manager/N	Lanai, AC, renova al deck with a bask recue areas, playgr convenience store Agmt Office, and Co oplication: Ask mgn	etball/pickleball round, fitness a. On-site Resident entral Laundry
INCOME CRITER	IA:					up from m	anager's office. Or dableproperties.co	online:
Maximum Income cannot exceed 100% AMI and depends upon number of occupants and size of unit. Maximum for 5-persons - \$141,100, annually.				Partly furnished- carpet, range with hood, refrigerator, double kitchen sinks, blinds, ceiling fans, phone/cable jacks, dead *Alon applic well a mgmt			n completing regula must keep all cont	ar waitlist updates, act info current, as ation from housing
1-PERSON MAXIN	-PERSON MAXIMUM MONTHLY INCOME:					ja.		
2-PERSONS MAXI	IMUM MC	NTHLY INCO	ME:	8708				

		1 1 0	ur un ter E	10/0/0000				
			lete Update:	10/6/2023			AREA:	Wahiawa
			NI (HPHA-	cen) - NO	FACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	310 Nor	th Cane St.					PHONE: 808-622	
CITY:	Wahiaw	a	STATE: HI	ZIP:	96786		FAX : 622-636	62
	,							
MANAGER	l: Jimary	Quinones			APPLY ADI	DRESS:		
					1002 North			OUT-OF-STATE
APPLY TO		.CCEPTING AF			Honolulu, H NOT ACCE	II 96817 PTING APPLIC	CATIONS	APPLICATION ACCEPTED:
ADDI V ATTN		applications offi						NO
ALLETATIN		CCEPTING AF				EMAII - I	nphaishereforyou.o	ra
APPLY PHONE	: 808-83	2-5961			FAX: 832-3461	LWAIL.	ipriaisriereroryou.o	ig
Unit	Type:	Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:							
One I	Bdrm:	14	0		564	1	4	YES
Two	Bdrm:	16	0		727	2	6	YES
Three I	Bdrm:	20	0		958	3	8	YES
Four I	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 PREFERENCES: homeless in transi displaced. CLOSED FOR AP) for Fede Domesti itional sh	eral Low Incom c Violence victi elters; involunta	e projects ms; ary	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 b	e 18 years or o	der	WAITL	IST FOR PARKING:		CALL EVERY	(Months):
				PARKING INF		PET INFO:	F	PETS OK: YES
]	A	SSET LIMITS:	NONE	Parking include	ded	the categor	imals ok, but only or ries listed below: nder 25 lbs) or cat	
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF		nhu.		LEASE:		*Applicants	s must respond to a	anv
Carmot own a nou	ise on O	ariu		1 year		correspond manner. N applicants	dence from HPHA, o waitlist updates n must update any c hold composition in	in a timely needed, however, ontact
INCOME CRITER							tus via hpha.myhou name/password to o	
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 sons - \$68,500 sons - \$82,200		FURNISHED: Partly furnishe appliances or	edmajor	Funding: F All convicti crystal me	ed Low Inc Pub Hs ons must be 3 yrs thamphetamine or DNSE IN 2023	sing 100% ago, unless it's
1-PERSON MAXIM				4570		ı		

	Last Comple	ete Update:	10/6/2023				Waimanalo
DDO IECT NAME:	-			NOT ACCED	TINC	AREA: PROJECT TYPE:	
	KAUHALE O'HA		4-wina) -	NOT ACCEP	TING]
ADDRESS.	41-1260 Kalanianaole H	wy.				PHONE: 808-233	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		FAX: 233-376	9
MANAGER	R: Roberta Kahele			APPLY AD	DRESS: School St.		OUT-OF-STATE
APPLY TO): HPHA			Honolulu, F		CATIONS	APPLICATION ACCEPTED:
	NOT ACCEPTING APP	PLICATIONS		NOT AGGE	I TINO ALTER	DATIONO	NO
APPLY ATTN	I: Oahu applications offic NOT ACCEPTING APP						
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
			Minimum		MINIMUM	MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
	tudio:		Required:	-	oi People	People.	
	Bdrm:						
Two	Bdrm:						
Three I	Bdrm: 25	0		1003	3	8	YES
Four	Bdrm:]	
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced. AGE CRITERIA:	NT IS 30% OF INCOME: 0 for Federal Low Income Domestic Violence victim itional shelters; involuntar	projects ns; ry	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W. CALL EVERY	(Months): 36 AIT LIST (Months): 60 VAITLIST
Head of nousenoid	d must be 18 years or old			IST FOR PARKING:	-		
			PARKING INF	O: NO	PET INFO:	imals ok, but only o	PETS OK: YES
,	ASSET LIMITS:	NONE			the catego	ries listed below: nder 25 lbs) or_cat	
	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			s must respond to a dence from HPHA,	
Carriot own a nou	ise on Ganu		1 year		manner. N applicants info/house	o waitlist updates n must update any controlled composition in tus via hpha.myhou	eeded, however, ontact fo and check
INCOME CRITER	IA:				need useri	name/password to died Low Inc Pub Hs	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 me	thamphetamine or s	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	::	4570		p.		
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220				

	Last Compl	ete Update:	5/16/2023			AREA:	Wahiawa
PROJECT NAME:	KAWAHI MALU	JWAI APAF	RTMENTS	6	F	PROJECT TYPE:	Family
ADDRESS:	730 Wilikina Dr.				-	PHONE: 808-888	3-5287
CITY:	Mahiawa	STATE: HI	ZIP:	96786		FAX: 888-532	29
MANAGER APPLY TO	t: Kristina Garza, Manag	er		APPLY AD On-Site	DDRESS:		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Kawahi Maluwai Apart	ments					YES
APPLY PHONE	: 808-888-5287			FAX : 888-5329		awahi@cmiweb.no ww.KawahiMaluw	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 79 Bdrm: 39	0	NO NO		1 2	3 5	YES
Three I	Bdrm:						
project-based sec	NT IS 30% OF INCOME tion 8 building with priva bridge Management, Inc Apartments	te owner	UTILITIES INC Water, sewer			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST
	d must be 18 years or ol	der at the	\A/AITI			O REMAIN ON W CALL EVERY	/AITLIST
time of application	ı.		VVAITE PARKING INF	IST FOR PARKING: O: NO	PET INFO:	F	PETS OK: NO
AN OWN DECK	ASSET LIMITS:		Tenant must	ded, 149 stalls. have car and stalls Guest parking		animals with doo	tor letter
ASSET LIMIT INF		YES			GENERAL IN		ar waitlist updates,
eligibility. 401K	d when determining inco - current interest rate (d ed toward income .	ome	LEASE: One-year the thereafter	n month-to-month	applicants m and respond mgnt in a tin Funding: Se	nust keep all cont to communicationely manner.* ction 8 100% + L ed accessible un	act info current, on from housing
INCOME CRITER	IA:				at ground le		Community Room,
Maximum Monthly	r Income: 5 persons - \$6	510.00	FURNISHED: Partly furnish appliances & carpet.		maintenance Laundry Fac Transportati	e, On-site manag illities. Newly ren on to shopping av arities Hawai'i. Cu	ement and novated (2012) vailable through
1-PERSON MAXIM	IUM MONTHLY INCOMI	 ≣:	4220		Called 829/2	2024, no response	9

	Last Compl	ete Update:	10/6/2023			AREA:	Moiliili
PROJECT NAME:	KEAUHOU SHE	LTER				PROJECT TYPE:	Emergency/Transi
	1020 Isenberg St. Honolulu	STATE: HI	ZIP:	96826		PHONE: 808-537	7-8330
	: Jordan Torres, Housin		nm - 4:30pm	APPLY ADI Walk-in, on			OUT-OF-STATE APPLICATION ACCEPTED:
	:: 808-537-8330		F	FAX:	EMAIL:	https://waikikihc.org shelter/	g/locations/keauhou-
	Type: Number of UNITS: tudio: 75	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Three I	Bdrm:						
RENT INFO: RE 30% of income	NT IS 30% OF INCOME		UTILITIES INCLU Yes	UDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
AGE CRITERIA: 18 years or older,	adults only, no family		WAITLIS' PARKING INFO:	T FOR PARKING:	PET INFO	TO REMAIN ON W	VAITLIST (Months):
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY: O:		LEASE:		GENERAL Dormitory kitchen ar		nrooms, showers,
INCOME CRITER	IA:		FURNISHED:		assistanc	re, job training, help ts and mail service.	
			No				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	10/24/2023			AREA:	Moiliili
ROJECT NAME:	KEAUHOU SH	ELTER			ı	PROJECT TYPE:	Emergency/Trans
ADDRESS:	1020 Isenberg Street					PHONE: 808-53	7-8330
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER APPLY TO	l: D: on-site, 7:30am - 4:30	Inm: if snace ava	uilable to complete	appointment	DRESS: ilable, staff will sto complete ad		OUT-OF-STAT
APPLY ATTN	pre-applicaton	p, opaco are		paperwork.			ACCEPTED:
	:: 808-537-8330		F.	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	Ttoquilou.		СТООРІС	т борю.	
One I	Bdrm:	0					
	Bdrm:	0					
Three I		0					
Emergency housir houseless or at ris	NT IS 30% OF INCOME ng for up to 75 clients wh sk. Dormatory-type arra poms and showers, shar es.	no are ngement	UTILITIES INCLU	DED:		MINIMUM W ESTIMATE	(Months): 0
			ļ			MAXIMUM W ESTIMATE	
AGE CRITERIA: All individuals or characteristics of the complex o	ouples, age 18 and olde	er, who are		FOR PARKING:		O REMAIN ON V CALL EVERY	(Months): 0
			PARKING INFO:		PET INFO:		PETS OK:
	ASSET LIMITS:						
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II		es and individuals;
			LEASE:		housing place help obtaining services. Housing Fire	cement assistanding ID, social secu	ce; job training; urity card, etc.; mail
NCOME CRITERI	IA:		FURNISHED:			nem once they ar	
-PERSON MAXIM	IUM MONTHLY INCOM	E:	0]		
PERSONS MAXI	MUM MONTHLY INCOM	ME:	0				

	Last Com	plete Update:	9/3/2024			AREA:	Chinatown
PROJECT NAME:	KEKAULIKE (COURTYAR	DS		F	PROJECT TYPE:	Family
	1016 Maunakea St.	JOON I A				PHONE: 808-545	<u> </u>
7.551.200.	To To Wadnakea Gt.				·	FAX: 545-365	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX. 343-303	94
	t: Tasia Taleasiea (Sia Alison Rackle, Amin Christina Whitnnerv b: Kekaulike Courtyard	istrative Associate Reisdent Service	e	APPLY AD 1016 Maun 96817	DRESS: lakea St. Honolul	u HI,	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE				FAX: 545-3654	ho	tp://www.mutual- ousing.org/kekauli	ke-courtyards/
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 12	793	2x rent	300	1	2	YES
One I	Bdrm: 63	995	2x rent	500	1	4	YES
Two I	Bdrm:						
Four							YES
Waitlist is open inthttp://www.mutual-	NT IS 30% OF INCONtermittently. Application chousing.org/kekaulike	n available at e-courtyards/	Water and sev		Т	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE O REMAIN ON W. CALL EVERY	(Months): 3 AIT LIST (Months): 12
time of application	d must be 21 years or s; spouse/partner, roon 18+. Children allowed	nmates,	PARKING INF	1.10	PET INFO:	F	PETS OK: YES
]	ASSET LIMITS	NONE	\$40/month, first basis	st come first serve	Small birds	(2 max) and fish o	nly.
AN OWN RESID	DENTIAL PROPERTY				GENERAL IN	NFO:	
ASSET LIMIT INF			LEASE:		*No waitlist	updates necessar	
laccordance to inc	come compliance matr	ix		nonth-to-month	respond to de a timely man Laundry roo		m management in except C
INCOME CRITERI	IA:					secure building.	,.
\$45,750 for 1 person, \$52,250 for 2 persons, \$58,800 for 3 persons, \$65,300 for 4 persons. Follows state guidelines.			Partly furnishe appliances on		http://www.n courtyards/ open).	nutual-housing.org (only during times NSE IN 2023	
 1-PERSON MAXIM	IUM MONTHLY INCOI	ME:	3813				

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Last Co	omplete Update:	8/30/2024			AREA:	Kapolei
PROJECT NAME: KEKUILANI	COURTS				PROJECT TYPE:	Family
ADDRESS: 91-1083 Kekuilani	Lp.				PHONE: 808-674	1-0405
CITY: Kapolei	STATE: HI	ZIP:	96707		FAX : 674-042	26
MANAGER: Nua Vaovasa, Re Site Manager: Kri			APPLY AI 91-1083 K	DDRESS: (ekuilani Loop		OUT-OF-STATE
APPLY TO: Hawaii Affordable	Properties Inc.		Kapolei, H	lawaii 967076		APPLICATION ACCEPTED:
APPLY ATTN: Kekuilani Courts	LLC					YES
APPLY PHONE : 808-674-0405			FAX : 674-0426		kekuilanicourts@gr http://hawaiiafforda	mail.com ble.com/residential-
Unit Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	_					
One Bdrm:						YES
Two Bdrm: 80	2000	3600	790	1	5	120
Three Bdrm:						
Four Bdrm:						YES
RENT INFO: RENT IS 30% OF INC Section 8 holders do not need to mee income requirement. Must have verifiable residential histor	et the minimum	Water	CLUDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
		<u> </u>			ESTIMATE	
AGE CRITERIA:					TO REMAIN ON W	
Head of household must be 18 years time of application.	or olderat the		IST FOR PARKING	_	CALL EVERY	
		PARKING INF	O: NO uded, additional	PET INFO:	imals are allowed v	PETS OK: NO
ASSET LIMI	ITS: YES	stall - \$15/mo.	Guest parking ng specified hours.	documenta		р. сре.
AN OWN RESIDENTIAL PROPER	TY: NO			GENERAL		
ASSET LIMIT INFO: Property is counted when determining eligibility.	g income	LEASE: 1 year		applicants and respon	completing regular must keep all cont nd to communication timely manner.*	act info current
INCOME CRITERIA:				central lau	s resident manager ndry facility, recrea	tion hall, vending
Income is not to exceed 80% AMI.			ed major as range; disposal, th storage closet.	wash area with acces pool. Bus	parbecue area, visit, membership in Kas to the rec facility stops across street should call to see	apolei Association and swimming and next door.
J 1-PERSON MAXIMUM MONTHLY INC	COME:	6100		<u> </u>		
2-PERSONS MAXIMUM MONTHLY IN	NCOME:	6967				

	Last (Complete Update:	10/6/2023			AREA:	Kapolei	
PROJECT NAME:	KEKUILAN	II GARDENS				PROJECT TYPE:	Family	
ADDRESS:	91-1045 Kekuilar	ni Lp.				PHONE: 808-67	4-6647	
CITY:	Kapolei	STATE: H	ZIP:	96707		FAX: 808-67	4-6647	
MANAGER	R: Mark Developm	ent, Inc.			ekuilani Lp., Kap	polei,	OUT-OF-STATE	
APPLY TO	: Kekuilani Garde	ens		Hawaii 967	07		APPLICATION ACCEPTED:	
APPLY ATTN	l:						YES	
APPLY PHONE	E: 808-735-9099 e	xt 1		FAX: 674-4170		nttp://www.mdihaw dens	aii.com/kekuilanigar	
Unit	Type: Number of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:							
	Bdrm:						YES	
Three	Bdrm: 55	0		790	2	5	123	
	Bdrm:						YES	
RENT INFO: RE Priority given to ve AMI). Security De Monthly Allowable Market Note Rate	ery low income (le eposit \$925 Rent \$925		Water	LUDED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 60	
AGE CRITERIA:	d must be 40 year	o or older				TO REMAIN ON V CALL EVERY		
Head of household	u musi be 16 year	s or older	WAITLIS PARKING INFO		PET INFO:	Ī	PETS OK: NO	
	ASSETIIN	MITS: YES	arking include	s u	iviust riave	WI.D. Iettel		
AN OWN RESI	DENTIAL PROPE				GENERAL	INFO:		
ASSET LIMIT INF Property is counte eligibility.		ng income	LEASE:		keep all co to commur a timely ma Funding: F	ntact info current, lication from housi anner.* RHTF	d; Applicants must as well as respond ng management in	
INCOME CRITER	IA:		,		On-site lau	lopment Inc. ndry room		
Maximum Annual Income (for Placement): Very Low = 2 persons - \$41,200; 3 persons - \$46,350; 4 persons - \$51,500; 5 persons - \$55,650 Once placed, your adjusted income may not exceed the Low Allowable Income level.			FURNISHED: Partly furnished appliances only		online mdil ask manag pick up froi	Application: online mdihawaii.com ask management to mail it pick up from manager's office NO RESPONSE IN 2023		
 1-PERSON MAXIN	IUM MONTHLY IN	NCOME:]			

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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:	8/30/2024			AREA:	Vineyard
	KEOLA HOON	ANEA			I	PROJECT TYPE:	Elderly
ADDRESS:	1465 Aala St.					PHONE: 808-53	3-4582
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER	: Beverley Febenito - F Specialist; Sterling Ro			711 Kapiola	ni Blvd. Ste. 700)	OUT-OF-STAT
APPLY TO	: Hawaiiana Managem	ent Co.		Honolulu, H	1 96813		APPLICATION ACCEPTED: YES
APPLY ATTN	: Housing Managemen	t Department					YES
APPLY PHONE	: 808-593-9100			FAX : 447-5169		ttps://www.publich eola_hoonanea	nousing.com/details
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: 175	862	2.5x Rent	500	1	2	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						
by 30% of income not apply. Rest of \$862. Preference income requireme		me need of \$733 - num	Electricity, gas a	and water	Ţ	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE O REMAIN ON V CALL EVERY	(Months): 60 (AIT LIST (Months): 60 (MAITLIST
disabled. All other	d must be 62 years or or members of household	d must be		T FOR PARKING:			
62+ or disabled.(Caregivers over 18 yrs o	old allowed.	PARKING INFO	: YES	PET INFO:		PETS OK: YES s approval, 2 cats
	ACCET LIMITO	NONE	avg. 2-3 years; parking availabl	limited guest		sible; \$100 pet de	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		parking available	С.	GENERAL II	NFO:	
ASSET LIMIT INFO		TEO	LEASE:		Veteran pre	ference.	
			1 year; then mo	nth to month	Send reque envelope	Ask management st with self-address manager's office ection 8	ssed stamped
NCOME CRITERI	IA:				runding - 3	ection o	
All income limits a HUD	re usually published an	nually by	FURNISHED:	es only			
-PERSON MAXIM	IUM MONTHLY INCOM	lE-	5642				

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	Last Comp	lete Update:	9/4/2024			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	
APPLY TO	t: Kelli Lopez, Property l	Manager			DRESS: nagement off ager@kewald		OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	E: 808-531-3233			FAX : 529-0516	EMAIL	.: manager@kewaloh	awaii.com	
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:	
	tudio: Bdrm:							
Two I	Bdrm: 37	0	NO	610	2	5	YES	
Four	Bdrm:						NO	
Project-based Sec	NT IS 30% OF INCOME ction 8 - 32 units only LIHTC at \$1122/mo.	YES YES	UTILITIES INC Gas, water, an			TOTA MINIMUM W. ESTIMATE MAXIMUM W ESTIMATE	(Months): 48 AIT LIST	
	d must be 18 years or ol	der at the	\\\ A T	ST FOR PARKING:		TO REMAIN ON W	AITLIST	
time of application		NONE	PARKING INFO	O: YES ing for residents le; other parking	PET INF	O: F	PETS OK: NO	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY: O:		available.	inica of flot	GENERA *Applica	ints must keep contact	t info current, as	
				onth-to-month	manage 2-5 peop	respond to communication at timely manual ti	ner.*	
INCOME CRITER								
Must qualify for LI and/or Section 8 li	HTC income limits set b mits set by HUD.	y HHFDC	FURNISHED: Partly furnishe appliances onl		Pick up	Application: Pick up from manager's office or email request to manager@kewalohawaii.com		

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	10/6/2023			AREA:	Kaneohe
PROJECT NAME:	KILO	HANA AP	ARTMENT	S - NOT	ACCEPTING	APPLI	PROJECT TYPE:	Family
ADDRESS:	45-265	William Henry	Rd.				PHONE: 808-23	5-1844
CITY:	Kaneoh	е	STATE: HI	ZIP:	96744		FAX: 234-70	58
MANAGEF	R: Terrily	n Ahakuelo-Kal	hanu		APPLY A	DDRESS:		
APPLY TO) : Qualpa	ac Managemen	t Corporation		*****CLC	Ste. #J-06 OSED FOR TIONS***		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Kilohai	na Apartments						YES
APPLY PHONE	≣: 808-23	35-1844			FAX : 234-7058	EMAIL	:	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required	SO ET:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	studio:							YES
	Bdrm:	17	485		479	1	4	YES
	Bdrm:	90	760		821	4	8	YES
	Bdrm:	42	700					
*******CLOSED F	OR APPI	LICATIONS****	*****	Gas, electrici	ity and water		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 120
AGE CRITERIA:	-1	- 40	Islam				TO REMAIN ON V CALL EVERY	
Head of househol	a must b	e 18 years or o	ider	WAIT PARKING IN Parking inclu		G: PET INFO		PETS OK: NO
Į.	Λ	SSET LIMITS:	NONE	anding inclu				
AN OWN RESI						GENERA	L INFO:	
ASSET LIMIT INF	O:			LEASE:		Funding:	Section 221(d) 1009	%
				Month-to-mo	onth		PONSE IN 2023. LA OCCURRED ON 10	
INCOME CRITER	IA:							
Maximum Annual 2 persons - \$73,0 4 persons - \$91,2 6 persons - \$108, persons - \$120,40	00; 3 per 00; 5 per 800; 7 pe	sons - \$82,100 sons - \$98,500	· , , , , , , , , , , , , , , , , , , ,	Partly furnish appliances o				
 1-PERSON MAXIN	IOM MUN	NTHLY INCOM	IE:	5320				
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	6083				

		Last Comp	lete Update:	9/3/2024			AREA:	Makiki
PROJECT NAME:	KINA	U VISTA					PROJECT TYPE:	Elderly
ADDRESS:	1150 Kii	nau St.					PHONE : 808-521	1-7111
CITY:	Honoluli	u	STATE: HI	ZIP:	96814		FAX : 521-689	97
MANAGER		obson, Reside Affordable Ho			APPLY ADI			OUT-OF-STATE
APPLY TO): Kinau \	Vista						APPLICATION ACCEPTED: YES
APPLY ATTN	l: Proper	ty Managemer	nt Division					110
APPLY PHONE	: 808-73	8-3100			FAX: 735-1978	EMAIL:	paulh@hawaiiaffora	adable.com
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:		1005		100			
	Bdrm:	62	1335	2xrent	430			
Three I					-			
Four I								YES
Four i	builli.			ļ	-			YES
RENT INFO: RE 7 units (for 30 % A 24 units (for 50% 31 units (for 60% Section 8 certificat gross income requ	AMI senic AMI sen AMI sen te holder	ors) - \$630 iors) - \$1,050 iors) - \$1,335 s need not me		UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:				r.			ESTIMATE TO REMAIN ON W	
All residents must				\/\AITI	IST FOR PARKING:		CALL EVERY	
Applicants can applicants can applicants	ply witho	ut verifiable res	sidential	PARKING INF		PET INFO	; F	PETS OK: NO
	AS	SSET LIMITS:	NONE		ndicap stalls; \$40 g; guest parking		nimals/ emotinal sup th proper document	
AN OWN RESID		PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO		counted to dete	ermine	LEASE: 1 year		Has socia Communit with BBQ Applicatio	/05. Funding: LIHT(I worker on site for a ty room w/ full kitche area, victory garder n: Online; Ask mana lest with self addres	services (PT). en & TV; courtyard n. agement to mail it;
INCOME CRITERI 30% of AMI: 1 per 50% of AMI: 1 per 60% of AMI: 1 per Follows State guid	rson \$27, rson \$45, rson \$55,	850; 2 persons	\$ \$52,400	FURNISHED: Partly furnishe appliances on		envelope; main office *Waitlist u keep all co to commu a timely m	Pick up from mana e pdates not required ontact info current, a nication from housi	ger's office or I; Applicants must as well as respond ng management in
I-PERSON MAXIM	10M MUI	NTHLY INCOM	1E:	4575		Į.		
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	5225				

	Last Comple	ete Update:	10/6/2023			AREA:	Kaneohe
PROJECT NAME:	KO'OLAU VILL	AGE (HPH	A-wind) -	NOT ACCEP	TING	PROJECT TYPE:	
	45-1027 Kamau Pl.	(PHONE: 808-233	3-3766
						FAX: 233-376	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		,	
MANAGER	R: Roberta Kahele			APPLY ADD			
				1002 North S Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO	O: HPHA NOT ACCEPTING APF	PLICATIONS		NOT ACCE	PTING APPLIC	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications office	e					NO
	NOT ACCEPTING APP	PLICATIONS			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	t Type: Number		Minimum		MINIMUM	MAXIMUM	OADEON/ED
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
S	itudio:		1.04				
	Bdrm: 8	0		526	1	4	YES
							YES
		0		915	3	8	YES
Three I		0					
Four	Bdrm : 12	0		996	4	10	YES
Minimum Rent: \$0 PREFERENCES:	NT IS 30% OF INCOME: O for Federal Low Income Domestic Violence victim itional shelters; involuntar	projects ns;	UTILITIES INC Water and allo and gas	CLUDED: wance for electricity		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36 AIT LIST
,	CINICE 0/0/0016*****	'	•			ESTIMATE	
AGE CRITERIA: Head of household	d must be 18 years or old	ler				TO REMAIN ON W CALL EVERY	
	, , , , , , , , , , , , , , , , , , , ,		WAITLI PARKING INF	IST FOR PARKING:	PET INFO:	F	PETS OK: YES
			Included	0.	multiple ar	nimals ok, but only o	
	ASSET LIMITS:	NONE				ries listed below: Inder 25 lbs) or cat	
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			s must respond to a	
Cannot own a hou	use on Oahu		1 year		manner. N applicants info/house	dence from HPHA, lo waitlist updates n must update any c hold composition in tus via hpha.myhou	needed, however, ontact Ifo and check
INCOME CRITER	IA:				need user	name/password to of Fed Low Inc Pub Hs	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 convict crystal me	ions must be 3 yrs thamphetamine or ONSE IN 2023	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	::	4570]		
2-PERSONS MAXI	IMUM MONTHLY INCOM	IF:	5220				

	Last Comp	lete 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
MANAGER	t: Tress Sotelo, Commu	unity Manager			ea Street #630		OUT-OF-STATI
APPLY TO	: Pre-application availa	ble online at Liv	eAtKokuaHale.co	Honolulu, om.	Hawaii 96813		APPLICATION ACCEPTED: YES
APPLY ATTN	I: Schedule in-person a complete the one onli		tance if unable to				110
APPLY PHONE	:: 808-809-7600			FAX: 833-693-02		liveatkokuahale.cor kokuahale@tmo.co	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 222	1210		258 - 275			
	Bdrm:						
	Bdrm:						
Three I	Bdrm:						YES
Lower rent - 12 un 60% AMI units are person application	NT IS 30% OF INCOME its at 30%AMI - waitlist e open for application. So a assistance if unable to	is closed. chedule in- complete	UTILITIES INC			TOTA MINIMUM W ESTIMATE	
	00 deposit and \$19 app red) due in certified fund					MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
One person in hou	usehold must be age 55	or older.		ST FOR PARKING	B:	CALL EVERY	
			PARKING INFO	D: NO g on a First Come	PET INFO	or dog) per unit, 30	PETS OK: YES
	ASSET LIMITS:	NONE	First Served (F	CFS) basis daily.		f \$350 due at move	
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	O:		LEASE:		Beretania		
			6 months than	month-to-month	surveilland City or Sta	ot, roll-in showers, I ce, two community rate Section 8 welcor	rooms, me.
INCOME CRITER	IA:				date to be	n fee of \$19 is waive determined) and re O. Box is not accep	quired in certified
\$27,510 (1 person 60%AMI units - Ma	aximum annual gross in 1) \$31,440 (2 person) aximum annual gross in 1) \$62,880 (2 people).		FURNISHED: Both furnished options. VCT fl	and unfurnished looring.	residence		as place of
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	4585				

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		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 Comp	lete Update:	6/13/2023			AREA:	Liliha
PROJECT NAME:	KUKI	UI GARDE	ENS				PROJECT TYPE:	Family
ADDRESS:							PHONE: 808-532	
	Honolul		STATE: HI	ZIP:	96817		FAX: 762-233	
MANAGER APPLY TO		Ishimie, Prope	erty Manager		APPLY ADI 1103 Liliha Honolulu, H	St., Ste. 102		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Kukui (Gardens						YES
APPLY PHONE	: 808-53	2-0033		F	FAX: 762-2333	EMAIL:	www.eahhousing.or	rg
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	tudio: Bdrm: Bdrm:	115	1289	3223		1 2	2 5	YES
Three		122	1711	4278		3	7	YES
RENT INFO: RE Deposit plus first r *Updates not requupdating contact in respond to common	month rei iired to re nfo), how unication	nt emain on waitlis ever, applicant from housing	st (unless	UTILITIES INCLU Water & Sewer	UDED:		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 4 AIT LIST
AGE CRITERIA: Head of household			Idor				TO REMAIN ON W	/AITLIST
Head of Household	น เกนรเ มเ	e to years or o	idei	_	T FOR PARKING:	DET INFO		
	A:	SSET LIMITS:	NONE	PARKING INFO: 1 stall included, available.			assiatance animals	
AN OWN RESI	DENTIAL	PROPERTY:	NO			GENERAL	. INFO:	
ASSET LIMIT INF	O:			LEASE: First year: Fixed Month-to-Month	12-month lease. thereafter.	Funding:	LIHTC applications for ALI	L bedroom sizes.
INCOME CRITER								
Max income: 60% (2 persons), \$70,7 persons), \$84,900 \$97,500 (7 person \$110,040 (9person persons)	740 (3 pe 0 (5 persons), \$103	rsons), \$78,600 ons), \$91,200 (6,800 (8 persons	0 (4 6 persons), s),	FURNISHED: Partly furnished- appliances only,				
1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4085		į.		
2-PERSONS MAXI	мим мо	ONTHLY INCO	ME:	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.	Honoiuiu		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	O:			LEASE: 1 year; then m	nonth-to-month	June o "updat Fundir Compl	ist updates must be co of each year, via submi te card".* ng:Section 8, Section 2 leted 1976 ard sent once a year to	ssion of an
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 furnishe appliances on		active Swimr comm 24 hou camer	on waitlist. ming pool, playground, unity room, picnic/bbq ur trained personnel pa	basketball court, area on site.
	-	,					20. OHOL IIV 2020.	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	8/30/2024			AREA:	Makiki
PROJECT NAME:	KUL	ANA HALE	E				PROJECT TYPE:	Elderly
ADDRESS:	1551 Sc	outh Beretania	St.				PHONE: 808-983	3-1551
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX: 983-158	53
MANAGER	R: Melody	/ Danielson,Pro	pperty Manager		On-Site	ADDRESS:	OW:	OUT-OF-STATE
APPLY TO): Kulana	a Hale LLP			4th Floor	, Management	Office	APPLICATION ACCEPTED: YES
APPLY ATTN	1 :							120
APPLY PHONE	E: 808-98	33-1551			FAX: 983-1553	EMAII	L: leslie@hawaiiafford www.hawaiiafforab	
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	itudio:	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
No longer have a Based on 80% AM	credit che		E: NO	UTILITIES INC	CLUDED: ter, and maintenar	nce	MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
AGE CRITERIA:				į.			ESTIMATE	
All residents must	be 55 or	older		\A/A \T	IST FOR PARKIN	0.	TO REMAIN ON W CALL EVERY	
				PARKING INF		PET INF	O: F	PETS OK: NO
	AS	SSET LIMITS:	NONE	Parking: \$80/r parking is ava limited and/or	ilable; parking is	Service	Pets Allowed	
AN OWN RESI		PROPERTY:	YES				AL INFO:	
ASSET LIMIT INF Income from Assetincome. Assets of	ets counte			LEASE: 6 months (Initi	ial lease term)	keep co commun manner Funding	t updates not required ntact info current, as nication from manage .* p: LIHTC ers are allowed with N	well as respond to ment in a timely
INCOME CRITER 1 person - \$73,20 annually.		ly; 2 person - \$	83,600	FURNISHED: Partly furnishe appliances on ceiling fan, ov microwave	ly. Carpet, blinds,	work ou Opened building Applicat housing Or pick	ers are allowed with to tside home. I 1998; Accepts Sectic equipped with fire sp ition: Online: low-incon .com or ask manager up from manager's of y if information needs	on 8 Certificate; rinklers. ne-senior- nent to mail it fice
1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	6100		į.		
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	6967				

		Last Comp	lete Update:	5/9/2023			AREA:	Kaneohe
PROJECT NAME:	KUL	ANA NAN	I APARTM	ENTS			PROJECT TYPE:	Family
ADDRESS:	46-229	Kahuhipa St.					PHONE: 808-247	7-0602
CITY:	Kaneoh	ne	STATE: HI	ZIP:	96744		FAX : 247-060	02
MANAGER	t: Farod	Jackson			APPLY AD			OUT-OF-STATE
APPLY TO): Hawai	ian Properties						APPLICATION ACCEPTED:
APPLY ATTN	I: Kulana	a Nani						YES
APPLY PHONE	: 808-24	47-0602			FAX: 247-0602	EMAIL:	rm@kulananai.com	1
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm: Bdrm:	40	1575		745	2	5	YES
Three	Bdrm:	80	1765		862	3	7	YES
Four	Bdrm:	40	1810		980	4	9	YES
RENT INFO: RE Wait List for 2 bed Wait List for 3 bed Wait List for 4 bed	drooms is	s 6 months - 12 s 3 months - 6	months	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 3
AGE CRITERIA:				ļr.			ESTIMATE TO REMAIN ON V	
Head of househole				WAITI	IST FOR PARKING:		CALL EVERY	
Applicants can ap history.				PARKING INF	O: YES	PET INFO		PETS OK: NO
Minimum compos		SSET LIMITS:		\$50 per mont stall is 4 - 5 ye	h; waitlist for 2nd ears.	Only assis	tive animals	
AN OWN RESI	DENTIAL					GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE: 1 year		well as res managem Office Hou Monday th		ation from ner.*
INCOME CRITER 5-PERSONS MAX \$6,510.00		MONTHLY INCO	DME:	FURNISHED: Partly furnish appliances or range/oven),	edmajor nly (gas	10 handic For Applic Send requ envelope;		ssed stamped ger's office or call
I 1-PERSON MAXIM	IUM MO	NTHLY INCOM	IE:	0		Į.		
2-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	3888				

		Last Comp	lete Update:	7/18/2023			AREA:	Waimanalo
PROJECT NAME:	KUL	NAKAU	IALE MAL	UHIA O N	A KŪPUNA		PROJECT TYPE:	Elderly
ADDRESS:	41-209	llauhole St.					PHONE: 808-42	6-1400
CITY:	l Waimar	nalo	STATE: HI	ZIP:	96795		FAX : 426-14	01
MANAGER	: Nohea	lani Hoopii			41-209	ADDRESS: Ilauhole St. #87 nalo, HI 96795		OUT-OF-STATE APPLICATION
APPLY TO	: Locatio	ons			vvaiiilai	iaio, fii 96795		ACCEPTED:
APPLY ATTN APPLY PHONE		ty Managemen 6-1400	t Division		FAX: 738-8981		.: locationsrentals.co rentals.aspx	
Unit	Type:	Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	tudio:	of UNITS:	RENT:	Required:	SQ FT:	of People		Allowed:
	Bdrm:	85	1000	2xrent	528	1	2-3	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE 9 units @ 30%AM 14 @ 80%AMI. Re \$800, \$825, \$960, have 50% Native I DHHL list.	I; 49 @ 5 ent amou and \$10	50% AMI; 10 @ ints are as follo 00 per month.	60%AMI; ws: \$560, HOH must	Water and se \$144/mo for 6	ewer. Utility allowa	ance of	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA:							TO REMAIN ON V	
All residents must	be 55 or	older;			LIST FOR PARKIN			
				tenant stalls,	ided, 103 visitor & including 9		J:	PETS OK: NO
AN OWN RESID		SSET LIMITS:		accessible.	cessible and 2 van	GENERA	I INFO:	
ASSET LIMIT INFO		TROI ERTT.	110	LEASE:		Verificat	ion of 50% Hawaiian	
Cannot own a maj properties.	ority per	centage of resident	dential		month-to-month	confirma Homelai *Commu room. 6	of processing. Application letter fromf Depinds (DHHL) Inity room and garde apt. are handicap ac	t.of Hawaiian n plots; laundry cessible; onsite
INCOME CRITERI							manager.*No waitlis , applicants must kee	
50% 45,750 5	2 people 31,350	1 person 80% 73,200 00% 91,500	83,600	FURNISHED: Partly furnish appliances of floors, curtain	nedmajor nly. Carpet & vinyl	timely m holders requirem applicati	and respond to correanner. Section 8 accordanced not meet the ment. *Confirmation leads to received a LIHTC, Section 8, E	epted; voucher in. income etter mailed once
1-PERSON MAXIM	IOM MUI	NTHLY INCOM	E:	7625		įs.		
2-PERSONS MAXI	мим мо	ONTHLY INCO	ME:	8708				

	Last Comp	lete Update:	11/8/2023			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	S	APPLY ADI 1311 Ward			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	ed and capable of int is kept for a unit. It is kept for a unit. Reside in a social service of permanent housir	Individuals or dents must e plan and accept
INCOME CRITER	IA:		FURNISHED:			Homeless Stipend	ig.
			Partly furnishe	dmicrowave, ovetop (no oven)			
1-PERSON MAXIM	IUM MONTHLY INCOM	F·					

	Last Comp	olete Update:	6/13/2023			ARE	A: Waianae
PROJECT NAME:	KULIA I KA NU	JU (Kahik	<mark>olu Ohana H</mark>	ale O'Wai'a	nae)	PROJECT TYP	E: Family
ADDRESS:	85-296 Ala Hema St.					PHONE: (808)	735-9099
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX:	
	J. T. G.	ļ		00.02			
MANAGER	: Mark Development			APPLY AD		ait 740	OUT-OF-STATE
APPLY TO	: Kulia I Ka Nuu			Waianae, F	Akau St., Ur II 96792	III. 7 12	APPLICATION ACCEPTED:
APPLY ATTN	:						
APPLY PHONE	: (808) 735-9099		F	FAX:	EMAII	L: www.https://mdih a-i-ka-nuu/.com	awaii.com/rentals/kuli
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Number of	CAREGIVER Allowed:
St	tudio: 24	944					
One E	3drm:						
	3drm: 46	1418					
Three E					J		
Four E	sarm:				J	J	YES
RENT INFO: REI	NT IS 30% OF INCOM	E: NO	UTILITIES INCLU	JDED:		TO	TAL UNITS: 72
	1 - \$944; based on 30% @ \$1260 (24 units) - \$ 0% of income.		Electric, water, a	nd sewer		ESTIMAT	WAIT LIST E (Months): 6
			Į.			MAXIMUM ESTIMAT	WAIT LIST E (Months): 12
AGE CRITERIA:						TO REMAIN ON	
	d must be 18 years or of ave verifiable residential		_	FOR PARKING:	-		Y (Months): 6
			PARKING INFO: All paperwork (ca		PET INF	·U:	PETS OK: NO
	ASSET LIMITS:		safety check, and must be up to da	ite. Guest			
	DENTIAL PROPERTY:		parking available).		AL INFO:	
ASSET LIMIT INFO	J:		LEASE:		, O'Waiaı	ly knowns as Kahiko nae. Funding: RHT	
						es: onths of pay stubs onths bank statemer	ote
 			1		3. Birth	onins bank statement certificates al Security Card	IIO
30% - 60% of Hon	A: olulu Median Income		FURNISHED:			I.D. or Driver's Lice	ense
					Ask ma Send re envelop	nagement to mail it equest with self-addr	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	10/13/2023			AREA:	Barber's Point	
PROJECT NAME:	KUMU	JHONUA	(Building	36)			PROJECT TYPE:	Transitional	
ADDRESS:	91-1096	Yorktown St.					PHONE: 808-682	2-5494	
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 682-5495		
MANAGER APPLY TO	Carla K		Program Manage at Program Man		APPLY AD P.O. Box 7 Kapolei, H	75547		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN					FAX: By CES	EMAIL	: Website: www.hcapweb.org/		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio:	65	0		340	1	3		
One	Bdrm:								
Two	Bdrm:								
Three	Bdrm:								
Four	Bdrm:								
RENT INFO: RE Charges a "Progra TB clearance requ *No waitlist; Entry 59 units available	am Fee", ruired. coordinate	not "Rent"		UTILITIES INC	CLUDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0	
AGE CRITERIA:	MANA						TO REMAIN ON W		
Adults ONLY (>18	Byrs); *Max	ximum 3 ppl pe	er unit	WAITL	IST FOR PARKING	:	CALL EVERY	(Months):	
				PARKING INF		PET INFO): F	PETS OK: NO	
]				Parking include	ded				
		SET LIMITS:				J			
AN OWN RESIDE		PROPERTY:				GENERA Opened (
7.002 F EIWIT II II	<u>. </u>			LEASE:		_ 3 laundry	rooms and two kitch sidents are responsib	nens for tenant's	
				120 Days		meals. Program	provides case mana and workshops relate	gement, ongoing	
INCOME CRITER	IA:					goals of p	permanent housing a		
No minimum incor calculated by 30% incomes not provi	of gross	income; maxin	num	FURNISHED: Small refriger bathroom, mi	ator, private	Application Coordina	ndence . tion process done by referral through nated 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:	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 Com	olete Update: 10/1	7/2023			AREA:	Kunia
PROJECT NAME: KUNIA VILLA	GE				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 P.O. Box 16: Kunia, HI 96	3		OUT-OF-STAT APPLICATION
APPLY TO: Kunia Village, EAH H	lousing					ACCEPTED:
APPLY ATTN: Manager's Office						
APPLY PHONE : 808-439-6375			FAX : 439-6375	EMAIL:	KU-management@	eahhousing.org
Unit Type: Number of UNITS:	DENIT:	linimum NCOME equired:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:	0		630	2	5	
Three Bdrm:	0		960-1200	3	7	
Four Bdrm:	0		1300	4	9	YES
RENT INFO: RENT IS 30% OF INCOM Affordable housing development serving the agricultural industry. Rent will not ex the combined household monthly income	persons in ceed 30% of	TIES INCL	.UDED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:					TO REMAIN ON W	
18+	DADI	WAITLIS	ST FOR PARKING:	PET INFO:	CALL EVERY	(Months): PETS OK: YES
			ort for each house		specific policy requ	Р
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:				 GENERAL	INEO:	
ASSET LIMIT INFO:	LEAS	E:		*Waitlist u keep all co to commun a timely m	pdates not required ontact info current, a nication from housi	as well as respond ng management in
NCOME CRITERIA:				farm labor	f Agriculture (USDA 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	wash efficie conse and b	FURNISHED: Washe/dryer hook ups/ energy efficient appliances/water conserving fixtures in kitchen On Sit Kunia Comm Indoor Kids p			anager and U.S. Pomers Market; y room with kitchansketballl/volleyball cstructure; Head StaLAST UPDATE IN 2	r; Gym with ourt rt preschool
-PERSON MAXIMUM MONTHLY INCOM	ME: 4410			k		
PERSONS MAXIMUM MONTHLY INCO	DME: 5040					

	Last Comple	ete Update:	10/18/2023				Wajakia
DDO IFOT NAME.				A com NOT	400	AREA: PROJECT TYPE:	
	KUPUNA HOMI	E O'WAIA	LUA (HPH	A-cen) - NOT	ACC		
ADDRESS:	67-088 Goodale Ave.					PHONE: 808-637	
CITY:	Waialua	STATE: HI	ZIP:	96791		FAX: 622-636	62
APPLY TO	2: Jimary Quinones D: HPHA NOT ACCEPTING AP I: NOT ACCEPTING AP			PO Box 1790	PRESS: School St., Bld 07 Honolulu, H PTING APPLIC	Ĭ 96817	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE		LICATIONS		FAX : 832-3461	EMAIL: h	nphaishereforyou.o	rg
RENT INFO: RE Minimum Rent: \$0 *Applicants must r from HPHA, in a ti AGE CRITERIA: Head of household	Bdrm: NT IS 30% OF INCOME of for Federal Low Income respond to any correspond	projects ndence	Minimum INCOME Required: UTILITIES INCOME Water and election was a second was a se	IST FOR PARKING:	MINIMUM Number of People 1 1 PET INFO:	MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W. CALL EVERY	(Months): 8 AIT LIST (Months): 24 /AITLIST
Cannot own a hou	ise on Oahu IA: n \$53,250; 2 persons \$6	NO	Parking includ LEASE: 1 year FURNISHED: Partly furnishe appliances on	edmajor	GENERAL PREFERE homeless i displaced. however, a info/housel waitlist stat need user unit. Fundii All convicti methamph permanent	NFO: NCES: Domestic V n transitional shelte No waitlist updates pplicants must upd nold composition in us via hpha.myhou ame/password to o ng: Fed Low Inc Pu ons must be 3 yrs a etamine or sex offe	riolence victims; ers; involuntary s needed, late any contact fo and check using.com (will do so). ub Hsing 100% ago; crystal
	NUM MONTHLY INCOME		4570 5220		Į.		

	Las	st Complet	te Update:	10/18/2023			AREA:	Wahiawa
PROJECT NAME:	LA'IOLA	ELDER	LY - NOT	ACCEPT	ING APPLI	CATIO	PROJECT TYPE:	Elderly
ADDRESS:	1 Iho Iho Pl.						PHONE: 808-622	2-6350
CITY	J		CTATE:	ZIP:			FAX: 622-635	51
CIIT:	Wahiawa		STATE: HI	ZIP:	96786			
	R: Jay Domangi Lyn - Admin ((675-0099)			1002 No	ADDRESS: rth School Stree ı, Hawaii 96817	t	OUT-OF-STATE APPLICATION
APPLY ATTN		,						ACCEPTED: NO
APPLY PHONE	·	1			FAX : 622-6351	EMAIL	: mu42laiola@gmail. http://hawaiiaffordal	.com ble.com/residential-
Unit	Type: Num	nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 6	60	170	YES	384	1	2	YES
One	Bdrm: 4	8	195	YES	506	2	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
Deposit same as a studio; \$195 for 1	rent. Minimum bdrm.	rent is \$17		UTILITIES INC			MINIMUM W. ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA:	d t b CO						TO REMAIN ON W CALL EVERY	
Head of Househol spouse must be 5	5+. Caregiver	18+. Other	r		IST FOR PARKIN	_		
members of the he Applicants must h				PARKING INF	1.20	PET INFO	note required	PETS OK: NO
-	ASSET	LIMITS: Y	′FS					
AN OWN RESI						GENERA	L INFO:	
ASSET LIMIT INF		untv	Asset	LEASE:			nts must keep contact	
Limit: 1person - \$,	,		1 year			nent in a timely manı	
INCOME CRITER	IA:					Funding:	State Low Income 1	00%
Maximum Annual 2- persons - \$39,2		son \$34,30	0	FURNISHED: Partly furnishe appliances on	edmajor	NO RES	PONSE IN 2023	
1-PERSON MAXIN	IUM MONTHLY	' INCOME:		2858				
2-PERSONS MAXI	MUM MONTHL	Y INCOME	≣:	3267				

EANAITEA GAITDEITO	PROJECT TYPE:	J. 2	
MANAGER: Shane Lyman, Resident Manager	PHONE: 808-949		
MANAGER: Shane Lyman, Resident Manager APPLY ADDRESS: 1055 Kalo PI., Ste. 103 Honolulu, HI 96826 APPLY ATTN: Ext. 36 EMAIL: APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type: Number of UNITS: RENT: RENT: RENT: Required: SQ FT: Minimum INCOME Required: SQ FT: Three Bdrm: 6 1029 2.5xrent Three Bdrm: 6 1276 Four Bdrm: 6 1276 RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED:		J -4111	
APPLY TO: Bob Tanaka Inc. APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 FAX: 949-7211 Minimum INCOME Required: SQ FT: Of People Studio: Interest Interest	FAX: 949-7211		
APPLY ATTN: Ext. 36 APPLY PHONE: 808-949-4111 FAX: 949-7211 Unit Type:		OUT-OF-STATE APPLICATION	
### APPLY PHONE: 808-949-4111 Unit Type:		ACCEPTED: YES	
Number of UNITS:			
Number of UNITS:			
One Bdrm: 6 1029 2.5xrent Two Bdrm: 15 1154 2.5xrent Three Bdrm: 6 1276 2.5xrent Four Bdrm: UTILITIES INCLUDED:	MAXIMUM Number of People:	CAREGIVER Allowed:	
Two Bdrm: 15 1154 2.5xrent Three Bdrm: 6 1276 2.5xrent Four Bdrm: UTILITIES INCLUDED:		YES	
Three Bdrm: 6 1276 2.5xrent Four Bdrm:		YES	
RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED:		YES	
		NO	
	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 VAIT LIST (Months): 24	
Head of household must be 18 years or older	O REMAIN ON W CALL EVERY		
WAITLIST FOR PARKING: PARKING INFO: NO PET INFO:	F	PETS OK: NO	
Parking included; no guest parking available. ASSET LIMITS: NONE		·	
AN OWN RESIDENTIAL PROPERTY: YES GENERAL IN			
Income from assets cannot make applicants go over	ct 8 Vouchers		
applicants m well as respo	nust keep all conta	ar waitlist updates, act info current, as ation from housing ner.*	
INCOME CRITERIA:	,		
Min. income required. Must make 2.5x rent and be below income limit. FURNISHED: Partly furnishedmajor appliances only			
1-PERSON MAXIMUM MONTHLY INCOME: 4696			

		Last Comp	lete Update:	5/9/2023			AREA	: Kailua
PROJECT NAME:	LANI	HULI					PROJECT TYPE	: Elderly
ADDRESS:	25 Aulik	ce St.					PHONE: 808-26	3-0268
CITY:	Kailua		STATE: HI	ZIP:	96734		FAX:	
MANAGEF	R: Dale C	Cripps, Resident	: Manager		APPLY ADI			OUT-OF-STATE
APPLY TO	D: Bob Ta	anaka Inc.			Honolulu, H	II 96826		APPLICATION ACCEPTED:
APPLY ATTN	N: Ext. 24	ļ						YES
APPLY PHONE	≣: 808-94	19-4111		F	FAX: 949-7211		https://www.pacifichuli-senior-housin	
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:	50	726	2.5xRent	413/443	1	2	YES
One	Bdrm:	32	864	2.5xRent	456/499	1	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:					J		NO
Accepts section 8	3 voucher	s		Water			MAXIMUM V ESTIMATE	VAIT LIST (Months): 24
AGE CRITERIA: Head of househol	ld must b	e 62 years or o	der, or				TO REMAIN ON Y	
disabled. Under a not without HOH.	age 62 sp	ouse is accept	able, but	WAITLIST PARKING INFO:	T FOR PARKING: YES	PET INFO	:	PETS OK: YES
	A	SSET LIMITS:	NONE	\$25/month; gues available.			al/assistance only	(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
AN OWN RESI						GENERAL	. INFO:	
ASSET LIMIT INF		t put person ov	er income	LEASE:		outside ho	ome. Participating	MD letter; can work in the City
limits.	3.0 000		5. m.coc	1 year		Housing F Opened 1 Funding:	Rental Assistance I	Program. ty Of Honolulu
INCOME CRITER	IIA:						., 2010.0p	
Minimum Income	Required	d. Must make 2	.5 x the rent	FURNISHED: Partly furnished- appliances only.				
 1-PERSON MAXIN	MUM MOI	NTHLY INCOM	E:	4696				
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	5367				

ADDRESS: 565 Quinn Ln. CITY: Honolulu MANAGER: Pam Sakai, General I APPLY TO: Housing Solutions, In APPLY ATTN: APPLY PHONE: 808-522-0541 Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Four Bdrm: Studio: Three Bdrm: Four Bdrm: ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO:	-		96813 APPLY AD FAX: SQ FT: 319	PHONE: FAX: DRESS: EMAIL: pams@hsi MINIMUM Number of People Pec	OUT-OF-STAAPPLICATIC ACCEPTE IMUM ber of ople: 4
MANAGER: Pam Sakai, General II APPLY TO: Housing Solutions, In APPLY ATTN: APPLY PHONE: 808-522-0541 Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Four Bdrm: GENT INFO: RENT IS 30% OF INCOMIT 1000/month GE CRITERIA: dult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	Manager ac.	Minimum INCOME	APPLY AD	FAX: DRESS: EMAIL: pams@hsi MINIMUM Number of People Pec	OUT-OF-ST/APPLICATION ACCEPTE siservices.net IMUM ber of ople: CAREGIVER Allowed:
MANAGER: Pam Sakai, General I APPLY TO: Housing Solutions, In APPLY ATTN: APPLY PHONE: 808-522-0541 Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Two Bdrm: Four Bdrm: Four Bdrm: Four Bdrm: Four Bdrm: Four Bdrm: ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	Manager ac.	Minimum INCOME	APPLY AD	EMAIL: pams@hsi MINIMUM Number of People MAXI Peo	OUT-OF-STA APPLICATION ACCEPTES SISTERIAL CONTROL OF ACCEPTES SISTERIAL CONTROL OF ACCEPTES SISTERIAL CONTROL OF ACCEPTES ALLOWED CONTROL OF ACCEPTES ACCEPTED CONTROL OF ACCEPTED CON
APPLY TO: Housing Solutions, In APPLY ATTN: APPLY PHONE: 808-522-0541 Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Four Bdrm: Four Bdrm: Four Bdrm: GENT INFO: RENT IS 30% OF INCOME 1000/month ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	RENT:	Minimum INCOME	FAX:	EMAIL: pams@hsi MINIMUM Number of People MAXI	APPLICATION ACCEPTE siservices.net IMUM ber of ople: CAREGIVER Allowed:
APPLY ATTN: APPLY PHONE: 808-522-0541 Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Four Bdrm: Unit Type: Number of UNITS: Studio: 43 One Bdrm: Unit Type: Number of UNITS: AN OWN RESIDENTIAL PROPERTY:	RENT:	Minimum INCOME	SQ FT:	MINIMUM MAXI Number Numb of People Peo	APPLICATI ACCEPTE siservices.net IMUM ber of ople: CAREGIVER Allowed:
Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Four Bdrm: Unit Type: Number of UNITS: Studio: 43 One Bdrm: Three Bdrm: Four Bdrm: AN OWN RESIDENTIAL PROPERTY:		Minimum INCOME	SQ FT:	MINIMUM MAXI Number Numb of People Peo	IMUM ber of ople:
Unit Type: Number of UNITS: Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: NT INFO: RENT IS 30% OF INCOME 0000/month SE CRITERIA: ult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:		Minimum INCOME	SQ FT:	MINIMUM MAXI Number Numb of People Peo	IMUM ber of ople: CAREGIVER Allowed:
Studio: 43 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Four Bdrm: O000/month SE CRITERIA: Jult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:		INCOME		Number of People Peo	ber of ople: CAREGIVER Allowed:
One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: STAT INFO: RENT IS 30% OF INCOME O000/month ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	1000		319	1	4
Three Bdrm: Four Bdrm: NT INFO: RENT IS 30% OF INCOME 0000/month SE CRITERIA: ult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:					
Four Bdrm: NT INFO: RENT IS 30% OF INCOME 0000/month SE CRITERIA: ult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:					
000/month SE CRITERIA: Jult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	1				NO
O00/month SE CRITERIA: ult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:					,
ult 18+ with at least 1 minor child (und ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:	=: NO	UTILITIES INCL Electricity, water		ES MAX	TOTAL UNITS: 42 IIMUM WAIT LIST STIMATE (Months): KIMUM WAIT LIST STIMATE (Months):
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY:					AIN ON WAITLIST
AN OWN RESIDENTIAL PROPERTY:	ler 18)	WAITLIS	T FOR PARKING:		EVERY (Months):
AN OWN RESIDENTIAL PROPERTY:		PARKING INFO:		PET INFO:	PETS OK: NO
	NONE	\$50/ month; no	guest parking		
SET LIMIT INFO:	NO			GENERAL INFO:	
		LEASE:		Homeless or at risk h	homeless families with
		Month-to-month	1	Under 50% AMI	ered sex offender or histor
COME CRITERIA:		,		Application:	
ist be less than 50%AMI		FURNISHED:		Ask management to pams@hsiservices.n	email it, net
		unfurnished, ma only. No carpet	ajor appliances	Called 10/21/24 No a	answer.
ERSON MAXIMUM MONTHLY INCOM					

		Last Comple	ete Upda	te:	10/19/2023				AREA:	Waianae
PROJECT NAME:	MA'II	I I (HPHA-	lee) -	NOT	ACCEP	TING	APPICA	TION	PROJECT TYPE:	-
ADDRESS:			100)	1101	AUULI	11110	AI I IOA		PHONE: 808-697	<u> </u>
7,551,200.	07-17210	ialiona ot.							FAX: 697-717	
CITY:	Waianae		STATE	: HI	ZIP:		96792		FAX. 697-717	4
MANAGER	: Mandy N	Miyamoto					APPLY AD	DRESS:		
APPLY TO		CCEPTING API	PLICATIO	ONS			Honolulu, I	i School St. HI 96817 EPTING APPI	LICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		oplications offic		ONS						NO
APPLY PHONE	:: 808-832	2-5961				FAX:	832-3461	EMAIL	.: hphaishereforyou.o	rg
Unit	Туре:	Number of UNITS:	REN	Т:	Minimum INCOME Required		SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	tudio:					<u> </u>				
	Bdrm:					<u> </u>				VEC
	Bdrm:	7	0			_	912	2	6	YES
Three I	!	13	0			<u> </u>	1394	3	8	YES
Four	Bdrm:					J		J		
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced. ************************************	for Feder Domestic itional she	ral Low Income Violence victin Iters; involuntal	projects ns;		JTILITIES IN		D: for electricity	,	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 old	ler		WAIT	LIST FC	R PARKING:	:	CALL EVERY	(Months):
					PARKING IN	FO:		PET INF		PETS OK: YES
]	AS	SET LIMITS:	NONE		Included			the cate	animals ok, but only ogories listed below: (under 25 lbs) or_cat	
AN OWN RESID		PROPERTY:	NO					GENERA		
ASSET LIMIT INF		nu		ي ر	LEASE:				ints must respond to a ondence from HPHA,	
					1 year			applican info/hou waitlist s	No waitlist updates ruts must update any casehold composition instatus via hpha.myhou	ontact Ifo and check using.com (will
INCOME CRITER									ername/password to e : 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 00; 3 perso 00; 5 perso 00; 7 perso	person - \$53,2 ons - \$68,500; ons - \$82,200;	250;	[FURNISHED Partly furnisl appliances c	hedmaj		Convicti metham barred.	ons must be 3 yrs ag phetamine or sex offe SPONSE IN 2023	o; crystal
1-PERSON MAXIM	IUM MON	THLY INCOME	i:		4570			P		
2-PERSONS MAXI	MUM MOI	NTHLY INCOM	IE:		5220					

	Last Comp	lete Update	e: 1	0/19/2023					AREA:	Waianae
PROJECT NAME:	MA'ILI II (HPH	A-lee) -	NOT	ACCEP	TING	APPL	ICATIO	PROJEC		,
	87-165 Keliikipi St.	100)		7.00_1		7 11 1 -		PHONE:		J
									697-717	
CITY:	Waianae	STATE:	HI	ZIP:		96792		17.	097-717	, 4
MANAGER	t: Mandy Miyamoto					APPLY	ADDRESS:			
APPLY TO	D: HPHA NOT ACCEPTING AF	PPLICATION	NS			Honolul	orth School St u, HI 96817 CCEPTING AF	PPLICATIONS		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications offi NOT ACCEPTING AF		NS							NO
APPLY PHONE	E: 808-832-5961				FAX:	832-3461		AIL: hphaishere	eforyou.o	org
Unit	Number of UNITS:	RENT:		Minimum INCOME Required:		SQ FT:	MINIMU Numb of Peop	er Numl	IMUM ber of ople:	CAREGIVER Allowed:
	tudio:									
	Bdrm: 12	0		J		912	2		6	YES
Three I	Bdrm:									
Four	Bdrm: 12	0				1394	4	1	10	YES
Minimum Rent: \$0 PREFERENCES:	NT IS 30% OF INCOME of for Federal Low Income Domestic Violence victificational shelters; involunt	e projects ims;		TILITIES IN ater and all			city	ES MAX	IMUM W TIMATE IMUM W	AL UNITS: 24 AIT LIST (Months): 36 AIT LIST (Months): 60
AGE CRITERIA:								TO REMA	IN ON W	VAITLIST
Head of household	d must be 18 years or o	lder		\ \ / \ T	IST EOI	R PARKII	viC:			(Months):
			P	ARKING INF		T AIGIGI	PET IN	NFO:	F	PETS OK: YES
	ASSET LIMITS:	NONE	lr	ncluded			the ca	ole animals ok, lategories listed og (under 25 lb	below:	one from each of
AN OWN RESI	DENTIAL PROPERTY:		- 1				,	RAL INFO:	o, o. o	
ASSET LIMIT INF		INO		- 4 0 5				icants must res	pond to	any
Cannot own a hou	ise on Oahu			year			corres mann applic info/h	spondence from ler. No waitlist u cants must upda ousehold comp	n HPHA, updates r ate any c position ir	in a timely needed, however, contact nfo and check
INCOME CRITER	IA·						need		sword to	do so). Funding:
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	· ·	P	JRNISHED: artly furnish ppliances or	edmajo	or	Convi distrib	ow Inc Pub Hsi ictions must be outing crystal m ered sex offend	3 yrs ag ethamph	o; however,
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	4	570						
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5	220						

	Last Comp	lete Update:	2/22/2022				AREA:	Aiea
PROJECT NAME:	MAKALAPA M	ANOR (Co-	p Fee)				PROJECT TYPE:	Family
	99-120 Kohomua St.						PHONE: (808) 53	39-9777
CITY:	Aiea	STATE: HI	ZIP:		96701		FAX:	
	R: Ben Hoff, manager				APPLY AD 3165 Waia Hi. 96816	DDRESS: alae Ave. #200,	Honolulu,	OUT-OF-STATE APPLICATION
	: Hawaiian Properties							ACCEPTED: YES
APPLY ATTN	E: (808) 539-9777			FAX:	781-295-34		1165 Bethel st Hon	olulu, HI 96813
	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 18 29	0				1 2	2	YES
Three	Bdrm: 29 Bdrm: 34	0				6	8	YES
5 - Five-bdrm unit Down Payment ba year. 1 bdrm = \$1 (6/08) = \$27,105; Recording, Transf \$195.00 AGE CRITERIA:	INT IS 30% OF INCOME s (8 min people 10 max) ased on size of unit and 17,893; 2 bdrm = \$21,36 4 bdrm = \$31,977 Addtl fer, and Notary can add	time of the 5; 3 bdrm Fees: up to	JTILITIES INC Vater				TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 6 AIT LIST (Months): 24 VAITLIST
	,		WATTL PARKING INF Parking include	O:	PARKING	PET INFO	: F	PETS OK: YES
AN OWN RESII ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:	YES	EASE:			1 2-bdrn 3 3-bdrn	p accessible units n	
INCOME CRITER Maximum annual 2 persons - \$61,33	IA: income: 1 person - \$53, 50, 3 persons - \$69,000		URNISHED:	admaia			n ty hall ryer hookups in uni 24 units Section 8; r	
4 persons - \$76,6	50, 5 persons - \$82,800 50, 7 persons - \$95,050	·	Partiy furnishe appliances on nave carpet				ONSE IN 2021. MPLETED UPDATE 7.	E OCCURRED ON
			1475]		

	Last Complet	te Update:	1/24/2022			AREA:	Nuuanu
PROJECT NAME:	MAKAMAE (HPH	-HA-hon)	NOT ACC	CEPTING APP	LICA P	ROJECT TYPE:	Elderly
	21 South Kuakini St.		11017101			HONE: 808-586	<u> </u>
						FAX: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96813		1000	-
MANAGER	R: Sol Sentons			APPLY ADD			
APPLY TO	D: HPHA NOT ACCEPTING APPI	LICATIONS		1002 North S Honolulu, HI NOT ACCEF		TIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APPLICATION						NO
APPLY PHONE	E: 808-832-5961			FAX: 832-3461	EMAIL: hp	haishereforyou.o	rg
Unit	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	Bdrm: 16	0		500	1	4	YES
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						
	NT IS 30% OF INCOME: of for Federal Low Income parts of the second seco		Water and allo	CLUDED: wance for electricity		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:					Τſ	D REMAIN ON W	
Head of househol	d or spouse must be 62 ye	ears or	\ \ / \ T	IST FOR PARKING:	1.	CALL EVERY	
older, or disabled			PARKING INF		PET INFO:	F	PETS OK: YES
			Included		Small pets ur	nder 25 lbs. only	
	ASSET LIMITS:	IONE					
	DENTIAL PROPERTY:	10			GENERAL IN		
ASSET LIMIT INF			LEASE:		PREFERENCE homeless in	CES: Domestic V transitional shelte	iolence victims; ers; involuntary
			1 year		displaced.		
<u> </u>						nust respond to a nce from HPHA,	
INCOME CRITER	IA:				manner. No	waitlist updates nust update any co	eeded, however,
2 persons - \$60,9 4 persons - \$76,1 6 persons - \$88,3	Income: 1 person - \$53,25 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	50;	Partly furnishe appliances on		info/househo waitlist status need userna	uld composition in s via hpha.myhou me/password to c under age 62 spc	fo and check Ising.com (will do so).
8 persons - \$100,	450					: Fed Low Inc Pu	
1-PERSON MAXIM	IUM MONTHLY INCOME:		4570				
2-PERSONS MAXI	MUM MONTHLY INCOME	≣:	5220				

ililani	AREA: Mili				2/1/2022	ete Update:	Last Comple		
amily	JECT TYPE: Far	PROJECT					ANA HALE	IECT NAME: MAK	
20	NE : 808-623-392	PHONE:					Kipapa Dr.	ADDRESS : 95-141	
	AX : 623-3920	FAX:	9	96789	ZIP:	STATE: HI		CITY: Mililani	
OUT-OF-STAT		PRESS: pa Drive, Mililani 96789	Y ADDRESS 1 Kipapa Dri				nel Ramos	MANAGER: Micha	
APPLICATION ACCEPTED:						tive	na Hale Coopera	APPLY TO: Makar	
YES								APPLY ATTN:	
		EMAIL:	Ē	FAX:			23-3920	PPLY PHONE: 808-62	
CAREGIVER Allowed:	MAXIMUM lumber of People:	Number Numb	Nu	SQ FT:	Minimum INCOME Required:	RENT:	Number of UNITS:	Unit Type:	
								Studio:	
								One Bdrm:	
YES	5	2 5		705	NO	749	30	Two Bdrm:	
YES	7	3 7	2	843/882	NO	830	69	Three Bdrm:	
NO	9	4 9		1050	NO	922	27	Four Bdrm:	
onths): 48	TOTAL UN MINIMUM WAIT L ESTIMATE (Mon MAXIMUM WAIT L ESTIMATE (Mon	EST MAXI		.UDED:	JTILITIES INC Water		6 maximum. 71 maximum.	T INFO: RENT IS 30 bdrm rent is \$592-690 e bdrm rent is \$656-7 bdrm rent is \$729-85	
LIST	EMAIN ON WAITL	TO REMAI						CRITERIA:	
onths): 6	ALL EVERY (Mon	CALL	(ING:	ST FOR PARKI	WAITLI			d of household must bicants can apply withou	
S OK: NO		PET INFO:			PARKING INFO		out voimable room	ry.	
al verification.		Only assistive animals GENERAL INFO:		d; waitlist for 2	Parking include stall @ \$30/mo	YES	ASSET LIMITS:	A I OWN RESIDENTIAI	
	nagaria offica	Application: Pick up from manage			EASE:			ET LIMIT INFO:	
be in writing,		*Note, waitlist status i	*N	1	Month-to-mont	me	determining inco	erty is counted when bility.	
es, applicants		*Along with regular w						OME CRITERIA:	
					FURNISHED:	650;	: 2 persons: \$45,0	mum Annual Income:	
nt, in a timely		*Applicants must resp correspondence from manner.*	со		Partly furnishe appliances only		8 persons: \$51,350; 4 persons: \$57,050; 5 persons: \$61,600; 6 persons: \$66,200; 7 persons: \$70,750; 8 persons: 75,300;		
3	lar waitlist update ct info updated.*	*Along with regular was tkeep contact inf *Applicants must respondence from	*A mu *A co		Partly furnishe	Í	sons: \$57,050; sons: \$66,200; sons: 75,300;	DME CRITERIA: mum Annual Income: rsons: \$51,350; 4 persons: \$61,600; 6 pers	

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	Last Comple	ete Update:	1/24/2022			AREA:	McCully
PROJECT NAME:	MAKUA ALII (H	PHA-hon)	- NOT AC	CEPTING AP	PLIC	, <u>-</u> ,	
	1541 Kalakaua Ave.	i iiA iiOiij	HOT AC	OLI TINO AI		PHONE: 808-973	<u> </u>
7.22.1.200.	TOTT Raidrada 7100.					FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96826		1 AX. 973-019	
MANAGER APPLY TO	e: Loane Ah Sam D: HPHA NOT ACCEPTING APF	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCEF	School St.	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APP						140
APPLY PHONE		LICATIONS		FAX : 832-3461	EMAIL: h	phaishereforyou.o	rg
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 210	0		522	1	4	YES
Two I	Bdrm: 1						YES
Four I	Bdrm:						
	NT IS 30% OF INCOME: 0 for Federal Low Income 8/2/2016******		JTILITIES INC Electricity and			MINIMUM WA ESTIMATE MAXIMUM WA	(Months): 24
AGE CRITERIA:					-	ESTIMATE FO REMAIN ON W CALL EVERY	AITLIST
older, or disabled	d or spouse must be 62 y			IST FOR PARKING:			
			PARKING INFO	O: YES	PET INFO: Small pets	under 25 lbs. only	ETS OK: YES
AN OWN DEOLE	ASSET LIMITS:				OFNERAL	NEO	
ASSET LIMIT INF	DENTIAL PROPERTY: I O:				GENERAL I	NCES: Domestic V	iolence victims:
Cannot own a hou	ise on Oahu		EASE: 1 year			n transitional shelte	
		50;	FURNISHED:		correspond manner. No applicants i info/househ waitlist stat	must respond to a ence from HPHA, o waitlist updates no must update any could composition in us via hpha.myhou ame/password to compose to compo	in a timely eeded, however, ontact fo and check using.com (will
4 persons - \$76,10	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		appliances onl	ry, no carper	If elder dies	s, under age 62 spo ng: Fed Low Inc Pu	ouse may rent
	IUM MONTHLY INCOME		4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	F:	5220				

	Last Comple	ete Update:	6/14/2023			AREA:	Liliha
PROJECT NAME:	MALULANI HAI	_E				PROJECT TYPE:	Elderly
ADDRESS:	114 North Kuakini St.					PHONE: 524-273	537-1213
CITY:	J Honolulu	STATE: HI	ZIP:	96817		FAX : 545-521	4
	: John Valledor, Resider x 10 : Urban Real Estate Co.	nt Mgr.; Sunnie L	ee, COS 524-2	731 APPLY ADD 50 S. Bereta Honolulu, HI	nia St. C101		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Housing Management	Department					YES
APPLY PHONE	: 524-2731x3609			FAX: 545-5214	EMAIL:	slee@urban-hi.com	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Two E	Bdrm: 150	1410			1	2	YES
Four E							NO
Project has some wait, as of 2022).	NT IS 30% OF INCOME: Section 8 units (60 units; t rents - call Sunnie direc 10	5 year	UTILITIES INCI			TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 0
AGE CRITERIA:						TO REMAIN ON W	
	d 62+ or disabled; spous ; all other members of the e 62+ or disabled	e 	PARKING INFO	ST FOR PARKING: D: YES DIE (45 stalls) 2	PET INFO:	CALL EVERY Property manager's	PETS OK: YES
AN OWN RESID	ASSET LIMITS:	NONE	year waiting list guest parking a options for \$40	t after move-in; available; other	GENERAL		арргота
ASSET LIMIT INFO	O:		LEASE: 1 year		rent unit. Transporta	enant dies, under ag ution to Shopping av harities Hawaii f	, ,
 INCOME CRITERI	ΙΔ:				Funding: S	ection 8 60 units Market 89 units +	
Maximum annual i Maximum annual i	income for Sec. 8 Units \$	o ¢93 600	FURNISHED: Partly furnished appliances only		SQFT of u	1 unit for resident m nits not available fro	om manager.
1-PERSON MAXIM	IUM MONTHLY INCOME	 ::	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: 808-45	5-4225
CITY:	Pearl Ci	ty	STATE: HI	ZIP:	96782		FAX: 455-422	25
MANAGER					APPLY AD 949 Luehu Pearl City, I	St.		OUT-OF-STATE APPLICATION
APPLY TO		-						ACCEPTED: YES
APPLY PHONE		ty Managemer 5-4225	it Division		FAX: 455-4232		https://www.eahhoo /manana-gardens/	using.org/apartments
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Two	Bdrm: Bdrm: Bdrm:	71	1412	2.5x rent	746			YES
RENT INFO: RE Has Sliding Scale RAP (rent assistal Section 8 certifical gross income requirements)	for Rent nce) = \$ ite holder	: \$940 minus 725 minimum ı	\$215 max ent.	Water & Sewe			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 /AIT LIST
AGE CRITERIA: Head of househole	d must be	e 18 years or o	lder	WAITLI	ST FOR PARKING:		TO REMAIN ON V CALL EVERY	VAITLIST
				PARKING INFO	O:	PET INFO:	F	PETS OK: NO
AN OWN RESII ASSET LIMIT INF	DENTIAL	SSET LIMITS: PROPERTY:		LEASE:		application community	tion letter mailed af common laundry area. On-site res	area. Large ident manager.
INCOME CRITER 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	50% AMI:		FURNISHED: Partly Furnishe appliances, vir window curtair up.		Center and	king. Near Pearl Ci d Pearl Highlands. ate - Info from Web ONSE IN 2021.	
7 naon a - \$20 76 1-PERSON MAXIN		NTHLY INCOM	1E:	4085		J.		
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	4665				

	Last Compl	ete Update:	8/31/2023			AREA:	Manoa
PROJECT NAME:	MANOA GARD	ENS ELDE	RLY HOU	SING		PROJECT TYPE:	Elderly
ADDRESS:	2790 Kahaloa Dr.					PHONE: 808-762	2-0101
OLTY		OTATE III	710 -			FAX: 762-053	
CITY:	Honolulu	STATE: HI	ZIP:	96822		•	
MANAGER	: Resident manager - Ka	ahea Fong		APPLY ADD		0.4	0117.05.07475
APPLY TO	: Hawaii Affordable Prop	perties, Inc.		1050 Queen Honolulu, Ha	ı Street, Suite 3 awaii 96814	04	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						YES
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 E	31	1050	2xrent	448	2	2	YES
Two E	3drm:						
Three E	3drm:						
Four I	3drm:						YES
Stu 60% AMI rent - \$9 80% AMI rent - \$1 Market rent - \$12 Sec 8 certificate he	100 1200 250 1300 olders need not meet the		UTILITIES INC Water & Sewer			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 AIT LIST
AGE CRITERIA:	iromont				7	O REMAIN ON W	
All applicants/resid	dents must be 62 or olde		WAITI I	ST FOR PARKING:	•	CALL EVERY	
residential history.	ants may apply without v	/erifiable	PARKING INFO		PET INFO:	F	PETS OK: NO
]	ASSET LIMITS:	NONE	51 stalls; \$20/r parking also av				
AN OWN RESID	DENTIAL PROPERTY:				GENERAL I	NFO:	
ASSET LIMIT INFO	O:		LEASE:		Caregivers outside hon		ID letter; can work
			1 year, then me	onth to month	Opened 199 Transportat		vailable through
INCOME CRITERI	A:						
	II \$66,024, 80%AMI \$88 MI \$75,456, 80%AMI - \$,032	FURNISHED: Partly furnished appliances only window shades	y. Carpet and			
	IUM MONTHLY INCOME		5502 6288]		

		Last Comp	lete Update:	10/24/2023			AREA:	Chinatown
PROJECT NAME:	MARI	N TOWER	र				PROJECT TYPE:	Family
ADDRESS:	60 North	n Nimitz Hwy.					PHONE: 808-52	8-4460
CITY:	Honolulu	J	STATE: HI	ZIP:	96817		FAX: 524-000	60
MANAGER APPLY TO		sutake Affordable Pro	perties		APPLY ADI 60 N. Nimitz Honolulu, H	z Hwy		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I∙ Laura k	Kim, Admin Ass	sistant					YES
APPLY PHONE		·	Joid III		FAX: 524-0060	EMAIL:	Email: marin@haw https://www.marinto	raiiaffordable.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	1200	2637.50	430	1	2	YES
One	Bdrm:	108	1300	2825.00	655	1	3	YES
Two	Bdrm:	109	1400	3387.5	729	2	5	YES
Three	Bdrm:							
Four	Bdrm:							NO
	One T 1200, 1	-wo 1330 400 600	E: NO	UTILITIES INC Water + Sewe			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
AGE CRITERIA:				įt.			ESTIMATE	
Head of household	d must be	e 18 years or ol	der	\^/^ T	IST FOR DARKING.		TO REMAIN ON V CALL EVERY	
				PARKING INF	IST FOR PARKING: O:	PET INFO	; l	PETS OK: YES
				Rent does not	include parking.	Service ar	nimals only.	
	AS	SSET LIMITS:	NONE]		
AN OWN RESIDE		PROPERTY:	YES			GENERAL		noum onto
AGGET EIMIT IN	<u> </u>			LEASE:			ll forms of subsidy ple: Section 8)	payments
				1 year		Most units	s have a Lanai	
INCOME CRITER 60%AMI 1 \$54,900 \$6 Units also priced a	2 52,700 \$7	3 4 0,560 \$78,360) and 140% AM		FURNISHED: Partly furnishe appliances on		Email: ma	n: om Resident Manaq arin@hawaiiaffordat PONSE IN 2023	
1-PERSON MAXIM 2-PERSONS MAXI				4575 5225				

	Last Comp	olete Update:	5/17/2023			4854	Chinatown
DDO IECT NAME:	MAUNAKEA T	OWED (CL	OSED for	conplication)		AREA:	1
	1245 Maunakea St.	OWER (CL	OSED IOI	application)			1
ADDRESS.	1245 Mauriakea St.				F	PHONE: 808-537 FAX: 545-166	
CITY:	Honolulu	STATE: HI	ZIP:	96817		1 AX. 343-100	3
MANAGER	: Terri Washam			APPLY ADD	PRESS:		OUT-OF-STATE
APPLY TO	:						APPLICATION ACCEPTED:
APPLY ATTN	l: Maunakea Tower						
APPLY PHONE	: 808-537-9905			FAX: 545-1663		ps://www.maunal aunakeatower@s	keatower.com/ andalwoodmgt.com
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: 254	0	NO	560	1	2	YES
Two E	Bdrm: 126	0	NO	742	2	4	YES
Three E	Bdrm:						
Four I	Bdrm:						NO
	NT IS 30% OF INCOMI Y ACCEPTING APPLIC		UTILITIES INC	CLUDED:		MINIMUM WA ESTIMATE MAXIMUM WA	(Months): 60
ACE CRITERIA.						ESTIMATE	/ 120
AGE CRITERIA: Head of household	d must be 18 years or o	older	\A/A ITI	IOT FOR RAPIGINO	10	O REMAIN ON W CALL EVERY	
			PARKING INF	IST FOR PARKING: FO: NO	PET INFO:	Р	ETS OK: NO
	ASSET LIMITS:	NONE		ded; some guest able; other options a fee.	Assistive ani	mals only	·
AN OWN RESID	DENTIAL PROPERTY:				GENERAL IN	IFO:	
ASSET LIMIT INFO	O:		LEASE:		Funding: 379 Credit. Sect	units Low Incom	e Housing Tax
			1 year; then n	nonth-to-month		letter sent upon	receipt of
INCOME CRITERI	IA:		,			n wait list will rece	eive a notice
Maximum Annual	Income: 1 person - \$45 50; 3 persons - \$58,800	5,750;	FURNISHED:		annually		
4 persons - \$65,30		J,	Partly furnishe appliances or				
	IUM MONTHLY INCOM		3808]		

	L	ast Complet	e Update:	10/24/2023			_	AREA:	Palama
PROJECT NAME:	MAYOR	WRIGH	T HOMES	(HPHA-h	on) - NO	ГАССЕР	PROJEC	T TYPE:	Family
ADDRESS:	521 North K	ukui St.					PHONE:	808-832	2-3153
CITY	l landulu		STATE: HI	ZIP:	0004	7	FAX:	832-318	38
GITT.	Honolulu		STATE. HI	ZIF.	9681	1			
MANAGER	: Cynthia Yo	shida - Mana	ger			Y ADDRESS:	· · · · · · · · · · · · · · · · · · ·		OUT-OF-STATE
APPLY TO		EPTING APPI	LICATIONS		Hono	North School S Julu, HI 96817 ACCEPTING A	APPLICATIONS		APPLICATION ACCEPTED:
APPLY ATTN		cations office							NO
APPLY PHONE	: 808-832-59	961			FAX: 832-34		MAIL: hphaisher	eforyou.o	rg
	of	umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT	: MINIM Num of Ped	ber Num	IMUM ber of ople:	CAREGIVER Allowed:
St	tudio:						_		\
One E	3drm:	24	0		530	1		2	YES
Two E	3drm:	114	0		732	2		4	YES
Three E	3drm:	168	0		908	3		6	YES
Four E	3drm:	50	0		1203	4		8	YES
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced. *********CLOSED & AGE CRITERIA: Head of household	for Federal I Domestic Vic tional shelter	Low Income polence victims rs; involuntary	projects s;	electricity	s + allowance fo		ES MAX ES TO REMA	IIMUM W TIMATE IIMUM W TIMATE	AIT LIST (Months): 36 AIT LIST (Months): 60 /AITLIST (Months):
				PARKING INF	IST FOR PARI O:		INFO:	F	PETS OK: YES
		T LIMITS: N		Included	,	the c	iple animals ok, categories listed doa (under 25 lb	but only o	one from each of
AN OWN RESID		OPERTY: N	Ю				ERAL INFO:		
Cannot own a house				LEASE: 1 year		corre man appli info/	blicants must resespondence fron ner. No waitlist uicants must upda household comp list status via hpli	n HPHA, updates nate any coosition in	in a timely needed, however, ontact nfo, and check
INCOME CRITERI ncome Eligibility = Maximum Annual I 2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 pe 00; 3 persons 00; 5 persons	erson - \$53,25 s - \$68,500; s - \$82,200;	50;	FURNISHED: Partly furnishe appliances on		need Fund All ci cryst	d username/pass ding: Fed Low In onvictions must tal methampheta RESPONSE IN	sword to out on the sword to out on the sword to out on the sword to out out on the sword to out out out out out out out out out	do so). sing 100% ago, unless it's
6 persons - \$88,30 8 persons - \$100,4 1-PERSON MAXIM	UM MONTH			4570 5220					

		Last Compl	ete Update:	8/2/2023			AREA:	Mililani
PROJECT NAME:	MEH	EULA VIS	TAI				PROJECT TYPE:	Elderly
ADDRESS:	95-1060	A Lehiwa Dr.					PHONE: 808-626	6-9162
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX : 427-859	91
	Julio G	omez	ridget Singletor	n; Office Assistar		Lehiwa Drive		OUT-OF-STATE APPLICATION
APPLY TO	: Meheul	la Vista						ACCEPTED:
APPLY ATTN	I: Manage	ement Office						120
APPLY PHONE	: 808-62	6-9162			FAX: 427-8591	EMAIL:	eahhousing.org/apa vista/	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	75	990	2 X rent	420	1	3	
Two E	Bdrm:			<u> </u>				
Three E	Bdrm:							
Four E	Bdrm:							YES
RENT INFO: REI 30% AMGI - \$690 50% AMGI - \$990 Food Stamps & Rei help meet min. inc	mo., 4 ui mo, 71 u	nits inits idy may be acc	epted to	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 6
AGE CRITERIA:	,0,110,110	oroan ovaldan	on roquilou	Į.			ESTIMATE	
All residents must				\/\AITI I	ST FOR PARKING		TO REMAIN ON W	
Applicants can applicants histories.	ply withou	ut verifiable res	idential	PARKING INFO		PET INFO	: F	PETS OK: NO
]	Δ	SSET LIMITS:	NONE	\$50/month ava come, first-ser Once all stalls				
AN OWN RESID					ancy restricted to	GENERAL	. INFO:	
ASSET LIMIT INFO All income from as eligibility.		ounted to deter	mine	LEASE:		applicants well as re- managem Picnic are	th completing regula must keep all cont spond to communic ent in a timely man a, community room ed common areas, o	act info current, as ation from housing ner.* , laundry room,
INCOME CRITERI 30% AMI - Max inc two persons, \$35.3 50% AMI - Max inc \$52,400 two perso	come \$27 370 (3 pe come -\$4	ersons) 8,850 one pers	son,	FURNISHED: Range/oven, grefrigerator, freflooring, windoceiling fan.	jarbage desposal, eezer, vinyl w coverings,	laundry, Onsite res purpose p Funding: I Must have minimum	sident manager, visi	tor parking, multi- ITF, and DURF rences and satisfy d criteria.
I-PERSON MAXIM	IUM MON	NTHLY INCOM	E:	4071		1		
2-PERSONS MAXII	мим мс	NTHLY INCOM	ME:	4367				

	Last Comp	lete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME:	MEHEULA VIS	TAII				PROJECT TYPE:	
	95-1060B Lehiwa Dr.					PHONE: 808-626	6-9162
	Mililani	STATE: HI	ZIP:	96789		FAX: 427-859	
	J						
	2: Resident Manager - B Julio Gomez 3: Meheula Vista	Bridget Singleton;	Office Assistan	95-1060A Le Mililani, Haw	ehiwa Drive		OUT-OF-STATE
APPLY ATTN	I: Management Office						ACCEPTED: YES
APPLY PHONE	:: 808-626-9162			FAX : 427-8591	EMAIL:	eahhousing.org/apa vista/	
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: 75	990		420			
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						YES
8 units @ 30% AM	NT IS 30% OF INCOME MGI=\$690; 60 units @ 5 nits @ 60% AMGI = \$10	0%	UTILITIES INC Water, sewer a	and electricity include	d.	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
All tenants must b submission.	e 55 at the time of appli	cation	WAITLI	ST FOR PARKING:		CALL EVERY	(Months): 6
	ply without verifiable res	sidential	PARKING INFO	1.15	PET INFO	: F	PETS OK: NO
, ,	ASSET LIMITS:		once all stalls a	estricted to those	GENERAL	_ INFO:	
ASSET LIMIT INF	O:		LEASE:		applicants well as re	th completing regula s must keep all cont spond to communic nent in a timely man	act info current, as ation from housing
INCOME CRITER			FURNISHED:		manager, locked en	free property. On-sit Meeting & multi-put try doors, common	rpose room, laundry area,
30% AMI - 1 perso 50% AMI - 1 perso	on - \$27,510, 2 persons on - \$45,850; 2 person - on \$55,020; 2 person \$6	\$31,440 \$52,400	Major applican	flooring, ceiling	ľ	a, community room.	
 1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4585]		

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	Last Comp	olete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME:	MEHEULA VIS	STA III				PROJECT TYPE:	Elderly
ADDRESS:	95-1060C Lehiwa Dr.					PHONE: 808-626	6-9162
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 427-859	91
	,						
	: Resident Manager - E Julio Gomez	Bridget Singleton	Office Assistant		ehiwa Drive		OUT-OF-STATE APPLICATION
APPLY TO	: Management Office				30.00		ACCEPTED:
APPLY ATTN	I: Meheula Vista I - AT	TN: Resident Mar	nager				
APPLY PHONE	: 808-626-9162			FAX : 427-8591	EMAIL:	eahhousing.org/apa vista/	
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: 75	990	2x Rent				
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						
30% AMI Units - \$ 50% AMI Units - \$	NT IS 30% OF INCOM 690/month - 8 Units 990/month - 60 Units \$1000/month - 7 Units	E: NO	UTILITIES INCL			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
AGE CRITERIA:						TO REMAIN ON W	
Applicants must b submission.	e 55 at time of applicati	ion	WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 6
Applicants can ap	ply without verifiable re	sidential	PARKING INFO		PET INFO	: F	PETS OK: NO
history. AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:		\$50/mo. Parkin once all stalls a occupancy is rewho do not own	estricted to those	GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			th completing regula	
					well as re managem	s must keep all conto spond to communice nent in a timely mand free property. On-sit	ation from housing ner.*
INCOME CRITER					manager,	meeting/multi-purpors, common laundry	ose room, locked
year., 2 persons - 50% AMI - Maxim year.; 2 person - \$	um income, 1 person - 650,400 per year um income 1 person \$	\$44,100 per	FURNISHED: Major appliance disposal, vinyl f fan, window cov	looring, ceiling	and comr	nunity room. 3/2024, no response	
 1-PERSON MAXIM	IUM MONTHLY INCOM	ΛΕ:	3675]		

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Last Complete Update:	8/8/2023	AREA: Mililani
PROJECT NAME: MEHEULA VISTA IV		PROJECT TYPE: Elderly
ADDRESS: 95-1060D Lehiwa Drive		PHONE: 808-626-9162
CITY: Mililani STATE:	di. ZIP : 96789	FAX : 427-8591
MANAGER: Resident Manager - Bridget Singlet Julio Gomez	ton; Office Assistant - APPLY ADDRE 95-1060D Lehiv Mililani, Hawaii	va Drive OUT-OF-STATI
APPLY TO: Management Office		ACCEPTED: YES
APPLY ATTN: APPLY PHONE: 808-626-9162	FAX : 427-8591	EMAIL: MVLP-management@eahhousing.org
Unit Type: Number of UNITS: RENT:	INCOME SO ET.	MINIMUM Number of People People: CAREGIVER Allowed:
Studio: 990	420	
Two Bdrm:		
Four Bdrm:		NO
RENT INFO: RENT IS 30% OF INCOME: NO 30% AMI - \$690 - 4 units 50% AMI - \$990 - 71 units	UTILITIES INCLUDED: Electricity, water & sewer	TOTAL UNITS: 75 MINIMUM WAIT LIST ESTIMATE (Months): 1 MAXIMUM WAIT LIST ESTIMATE (Months): 6
AGE CRITERIA: All tenants must be age 55 or older at the time of		TO REMAIN ON WAITLIST CALL EVERY (Months): 6
submitting application.	WAITLIST FOR PARKING: PARKING INFO: \$50 mo. Parking is limited and	PET INFO: PETS OK: NO
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES	once all stalls are assigned, occupancy is restricted to those who do not own a vehicle.	GENERAL INFO:
ASSET LIMIT INFO:	LEASE:	Along with completing regular waitlist updates, applicants must keep all contact info current, as well as respond to communication from housing management in a timely manner.*
INCOME CRITERIA:		Picnic area, community room, laundry room, landscaped common areas, coin-operated laundry, Onsite resident manager, visitor parking, multi-
Maximum annual income: 30% AMI - 1 person - \$27,510, 2 person - \$31,440 50% AMI - 1 person - \$45,850, 2 person - 52,400	FURNISHED: Major appliances, garbage disposal, vinyl flooring, ceiling fan, window coverings.	purpose pavillion. Funding: LIHTC, HHFDC, RHTF, and DURF Called 9/3/2024, no response.
1-PERSON MAXIMUM MONTHLY INCOME:	3821	

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		Last Comp	olete Update:	9/3/2024			AREA:	Waipahu
PROJECT NAME:	MOKU	OLA VI	STA				PROJECT TYPE:	Family
ADDRESS:	94-333 Mo	okuola St.					PHONE : 808-67	1-4075
CITY:	Waipahu		STATE: HI	ZIP:	96797		FAX: 671-280	07
MANAGER		Wong, Resi	dent Manger operties		APPLY A	ADDRESS:		OUT-OF-STATE
APPLY TO	: MOKUOI	LA VISTA						APPLICATION ACCEPTED:
APPLY ATTN	: Property	Managemer	nt Division					YES
APPLY PHONE	≣: 808-671-	4075			FAX : 671-2807	EMAIL:		
		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:							
Three	Bdrm:	69	1320	2.5 x rent	641	1	5	
Four	Bdrm:							YES
RENT INFO: RE 4 units @ 30% AN 65 units @ 60% A Section 8 certifica gross income req 600+ credit score	MG for \$530 AMGI for \$1 ate holders i uirement.) 320		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
Rackground shoot				Į.			ESTIMATE	
AGE CRITERIA: Head of househol	d must be '	18 years or c	older	WAITL	IST FOR PARKING	G:	TO REMAIN ON W	
				PARKING INF		PET INFO	: F	PETS OK: NO
<u> </u>	ASS	SET LIMITS:	NONE	\$50 monthly fe spaces.	ee; 105 parking	Service A Request	nimal. Emotional ne	eed. Doctor
AN OWN RESI		ROPERTY:	NO			GENERAL		
ASSET LIMIT INF	O:			LEASE:		Playgrour A/C, stacl	nd, picnic area. Eac k W/D.	ch unit will have
				1 year; recert	ification after	4 Handica	ap units available or	site
J						Funding:	RHTF	
INCOME CRITER Annual Maximum \$27,510, 2 persor persons - \$39,300 2 persons \$62,880 \$78,600	Income -30 ns \$31,440, 0 60% of A	3 persons \$ MI: 1 Perso	35,370, 4 n \$55,020,	FURNISHED: Major apliance	es only	from Loca 9/3/2024: No availal	PONSE SINCE 2019 attion's website. Management has cooled units in the 30% units has vaccancy	hanged AMI units
1-PERSON MAXIN	MUM MONT	HLY INCOM	1E:	4585		r		
2-PERSONS MAX	IMUM MON	ITHLY INCO	ME:	5240				

		Last Comp	olete Update:	9/3/2024			AREA:	Kakaako
PROJECT NAME:	NA LE	EI HULU	KUPUNA				PROJECT TYPE:	,
ADDRESS:			1101 01171				PHONE: 808-75	
CITY	Honolulu		STATE: HI	ZIP:	96813		FAX:	
CITT.	Honoidid		STATE: HI		90013			
MANAGER	t: Elise M	orey, Property	/ manager		APPLY AI 610 Cooke	DDRESS: e Street #114, Ho	nolulu, HI	OUT-OF-STATE
APPLY TO	: Na Lei I	Hulu Kupuna			96813			APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-593	3-1009			FAX:	EMAIL: v	vww.mdihawaii.coi	m/nalei
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	75	966		350	1	2	YES
One I	Bdrm:							
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE Mark Developmen 10 Units @ 30% A 20 Units @ 40% A 53 Units @ 50% A 2 Units @ 60% A	nt is mana NMI- \$686 NMI - \$783 NMI - \$966	gement comp .00/month 3.00/month 5.00/month		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months):
]	ωνι ψιι-	10.00/111011111		Į.			ESTIMATE	` /
AGE CRITERIA: Applicants must be	e 62 yrs c	old at time of a	application		0 - -05 5 6 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		TO REMAIN ON V CALL EVERY	
submission. Applic	cants can	apply without	verifiable	WAITLI PARKING INFO	ST FOR PARKING D: NO	PET INFO:	ı	PETS OK: NO
				No parking ava		Accommod service anir	ation considered f	or verifiable
	AS	SET LIMITS:	NONE					
AN OWN RESIDE		PROPERTY:	YES			GENERAL I	NFO: updates needed;	applicants only
7.0021 2	<u>. </u>			LEASE:	ase, then month-to-	need to upo	date contact info, v	
				month after tha		Transporta Catholic Ch	tion to Shopping a narities Hawaiʻi	
INCOME CRITERI	IA:			-		Has social	92; has Air Condit services on site, p · Katie Hoan	part-time,
40% AMI 50% AMI	1 Person \$29,250/y \$35,280/y \$44,100/y \$52,920/y	/r \$33,420 /r \$40,320 /r \$50,400)/yr)/yr)/yr	table with chair	ed, dresser, coffee rs (which can be quested) and A/C.	5 handicap each floor Funding: Ll Accepts Se Can decline	units w/ walk in sl	pplement artment 2-3 times
II 1-PERSON MAXIM 2-PERSONS MAXI				4410		Į.		

	Last Comp	ete Update:	10/24/2023			AREA:	Nanakuli
PROJECT NAME:	NANA'IKEOLA	SENIOR A	PARTMEN	TS		PROJECT TYPE:	Elderly
ADDRESS:	87-122 Nanaikeola St.					PHONE: 808-668	3-4702
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX:	
MANAGER	R: Mike Klein, Compliand	ce Manager		APPLY ADD	RESS:		
APPLY TO	D: Call for viewing and a	oplication.					OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	\ :						YES
APPLY PHONE	E: 808-668-4702		F	FAX:	EMAIL:	halealiigroup@yaho	oo.com
	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	
Two	Bdrm:						
	Bdrm:						NO
	:NT IS 30% OF INCOME me; maximum income n	ot to	75 monthly utilit	d garbage included ty allowance. No A is Subject to Chan	C.	MINIMUM W ESTIMATE MAXIMUM W	(Months): 30
AGE CRITERIA:		Į.				ESTIMATE TO REMAIN ON W	
Head of househol	d must be 62 years or ol		WAITLIS	T FOR PARKING:		CALL EVERY	
	ust be 18 and older; all one 62. Caregiver must be		PARKING INFO:		PET INFO:	F	PETS OK: YES
J	ASSET LIMITS:			ed, covered and limited (28 stalls	If under the	e provisions of pet	policy.
	DENTIAL PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF	O:	Г	EASE: 1 year; co-signer credit score is lo		Senior Apa EAH Inc. TDD (877) HUD Sect	Jeanette Weinberg artments, opened 3 447-5991 ion 202 program, H ational Community	/09, managed by
	IA: % of Median (Very Low I 3,350 for 2; \$43,150 for 3	B	FURNISHED: major applicance coverings	es, window	Associan, Resident r Trash chu 2 units are LAST COI 10/20/201	Weinberg Foundat nanager on site. te on each floor. handicapped acce MPLETED UPDATE	ion
II 1-PERSON MAXIM	MUM MONTHLY INCOM	E: :	2796]		
2-PERSONS MAXI	IMUM MONTHLY INCOI	ME:	3196				

		Last Compl	ete Update:	10/24/2023			AREA:	Waianae
PROJECT NAME:	NANA	KULLHO	MES (HPI	HA-lee) - No	OT ACCEPTI	NG A	PROJECT TYPE:	Family
		to 87-1612 Far					PHONE: 808-697	1
	J						FAX: 697-717	
CITY:	Nanakuli		STATE: HI	ZIP:	96792		,	
MANAGER APPLY TO	: HPHA	Miyamoto	DI ICATIONS		APPLY ADI 1002 North Honolulu, H NOT ACCE	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu a	pplications offic	ce					NO
APPLY PHONE			PLICATIONS		FAX : 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	tudio: Bdrm:							
Two I	Bdrm: Bdrm:	36	0		1024	3	8	YES
Four I	Bdrm:							
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced.	for Fede Domestic itional she	ral Low Income : Violence victir elters; involunta	e projects ns;	UTILITIES INC Water and allo	LUDED: wance for electricity		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	97-77-7114 <u>6</u> -						TO REMAIN ON W	
Head of household	d must be	18 years or old	der	WAITLI PARKING INFO	ST FOR PARKING:	PET INFO	CALL EVERY	
				Has carport	J.		nimals ok, but only o	
	AS	SET LIMITS:	NONE				ories listed below: under 25 lbs) or cat	
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO	O:			LEASE: 1 year		correspon manner. N applicants info/house	is 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	IA:					need user	name/password to d Fed Low Inc Pub Hs	do so).
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 00; 3 pers 00; 5 pers 00; 7 pers	person - \$53,2 ons - \$68,500; ons - \$82,200;		FURNISHED: Partly furnishe appliances only		All convict crystal me	tions must be 3 yrs a ethamphetamine or s	ago, unless it's
1-PERSON MAXIM	IUM MON	THLY INCOME	≣:	4570		Į.		

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	Last Com	olete Update:	9/3/2024			AREA:	Kakaako
PROJECT NAME:	NOHONA HAL	.E			-	PROJECT TYPE:	Family
ADDRESS:	630 Cooke St.					PHONE: 808-650)-3931
						FAX: (808) 46	55-2217
CITY:	Honolulu	STATE: HI	ZIP:	96813		•	
MANAGER	: Jonni Jones, Propert	y Manager		APPLY ADI		1,00040	0117 05 07175
APPLY TO	: Nohona Hale EAH Housing				St., Honolulu, H site: eahhousing		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Leasing Office						YES
APPLY PHONE	: 808-650-3931			FAX : (808) 465-22		H-Management@ /ebsite: eahhousir	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 111	1054	2x Rent	355	1	2	
One I	Bdrm:	0					
Two	Bdrm:	0					
Three I	Bdrm:	0					
Four	Bdrm:	0					YES
RENT INFO: RE	NT IS 30% OF INCOM	E: NO	UTILITIES INC	LUDED:		ТОТА	L UNITS: 111
AMI - \$553/month	355 sq. ft. + 75 sq. ft. la		Water & Gas			MINIMUM W. ESTIMATE	(Months): 6
*Subject to change	^		<u> </u>			MAXIMUM W ESTIMATE	
AGE CRITERIA:					Т	O REMAIN ON W	/AITLIST
18+			WAITLI	IST FOR PARKING:		CALL EVERY	(Months): 0
			PARKING INF		PET INFO:	F	PETS OK: NO
]	ASSET LIMITS:			ed, but severely available. No guest . Moped and	Service anir documentat	nals are allowed wion.	vith proper
AN OWN RESI	DENTIAL PROPERTY:		bicycle only.	·	GENERAL II	NFO:	
ASSET LIMIT INF	O:		LEASE:			t updates needed,	
Interest is conside	ered income for all asse	ets.		or first year, then th thereafter.	well as resp management Community	nust keep contact ond to communicant in a timely manu Features: Bicycle torage area; Build	ation from ner.* , Moped &
INCOME CRITER	IA:				Community	Garden, Commur room/lounge area	nity room kitchen
60% AMI: 1 perso	ns/\$34,020 Max.		FURNISHED: Murphy Bed &	Attached Sofa.	Managemei	nt office ndry facilities ai try	, Fitness room
1-PERSON MAXIM	IUM MONTHLY INCOM	ЛЕ:	0]		

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1	Last Comple	te Update:	10/24/2023				AREA:	Nuuanu
PROJECT NAME: NUUAN	IU YMCA	- Men's					PROJECT TYPE:	Emergency/Transi
ADDRESS: 1441 Pali H	lwy						PHONE: 808-536	
CITY: Honolulu		STATE: HI	ZIP:	96	813		FAX : 521-118	31
MANAGER: Cheryl You	ung				PLY ADI 41 Pali H			OUT-OF-STATE
APPLY TO: Alina Piun	no, Members	hip Coordinato	or	Honolulu, HI 96813				APPLICATION ACCEPTED: YES
APPLY ATTN:								
APPLY PHONE : 808-536-3	556			FAX: N/A		EMAIL:	cyoung@ymcahono apiunno@ymcahon	
	lumber UNITS:	RENT:	Minimum INCOME Required:	SQ	FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	50	45				1	1	
One Bdrm:								
Two Bdrm:				-				
Three Bdrm:								YES
RENT INFO: RENT IS 30% (\$45/night, \$255/week - single Student housing available to fu monthly \$720	w/ shared bat	hroom.	Access to fitne				MINIMUM W ESTIMATE MAXIMUM W	(Months): 0
AGE CRITERIA:			k				ESTIMATE TO REMAIN ON W	
Must be 18+. SRO			WAITL	IST FOR PA	RKING:		CALL EVERY	
			PARKING INF	O: [PET INFO	: F	PETS OK: NO
ASSE AN OWN RESIDENTIAL PR	ET LIMITS:					GENERAL	. INFO:	
ASSET LIMIT INFO: No income requirements.			LEASE:			Temporar	y Residence for sing	gle men ONLY
red mosme requirements.			None			Check-In Mon-Fri 1 Sat 12pm Sun 12pm		
INCOME CRITERIA:			FURNISHED:			Check-Ou	ut 12pm	
			Twin bed, dres & lamp.	sser, closet,	desk,	1	ate in 2019 - Info from	m Website
	II V INICOME:							

	Last Comp	lete Update:	10/24/2023			AREA:	Waipahu
PROJECT NAME:	OASIS AT WA	IPAHU AP	ARTMENT	rs en		PROJECT TYPE:	Family
ADDRESS:	94-207 Waipahu St.					PHONE: 808-67	1-2800
CITY:	 Waipahu	STATE: HI	ZIP:	96797		FAX : 676-69	45
MANAGER	t: Bethany Combs			APPLY AD			OUT-OF-STATI
APPLY TO): Site				Management pahu Street II 96797		APPLICATION ACCEPTED:
APPLY ATTN	l:				FMAII -	website: oasis-tow	
APPLY PHONE	E: 808-671-2800			FAX: 676-6945	LIMAIL.	website. Oasis tow	minorites.com
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Two	Bdrm:	1900	2.5xrent	882	1	5	
Three	Bdrm:	2200	2.5xrent	998	1	7	YES
324 Units @ Mark 82 Units @ 80% A Preference given t including the 80%	AMGI to 60% of the total avails	able units,	None			MINIMUM W ESTIMATE MAXIMUM W	(Months):
A OF ODITEDIA			Į.			ESTIMATE	
AGE CRITERIA: Applicant must be submission.	18 yrs old at time of ap	plication	WAITL	LIST FOR PARKING:		TO REMAIN ON V CALL EVERY	
	ply without verifiable res	sidential	PARKING INF	O: uded. \$100/month	PET INFO	2 pets allowed. \$50	PETS OK: YES
ir.	ASSET LIMITS:		for extra stall	,	month.	,	
AN OWN RESIDE	DENTIAL PROPERTY: O:				GENERAL	_ INFO: les - Waipahu St. &	Farrington Hwy
			LEASE: 6 - 12 month	lease agreements	*24 hr Fit internet a *Gated co Onsite la	ness room, busines ccess, pool (8ft), wa ommunity w/ courtes	s room w/ free ading pool (2ft)
INCOME CRITER	IA:		FLIDNISHED		Online pa Dog Park	yments	
2.5 x rent			FURNISHED:			COMPLETED UPDATE OCCURRED ON 020.	
1-PERSON MAXIM	IUM MONTHLY INCOM	F·					

	Last Comp	lete Update:	6/13/2023			AREA:	Waianae	
PROJECT NAME:	OHANA OLA C	KAHUMA	NA			PROJECT TYPE:	Emergency/Trans	
ADDRESS:	86-704 Lualualei Home	estead Rd.				PHONE: 808-696-4095		
CITY:) Waianae	STATE: HI	ZIP:	96792		FAX : 696-71	44	
MANAGER	R: Desiree Robeinson, S	ite Manager		APPLY ADI	DRESS:		OUT-OF-STATE	
APPLY TO	D: Alternative Structures	International					APPLICATION ACCEPTED:	
APPLY ATTN	N:							
APPLY PHONE	E: 808-696-4095			FAX:	EMAIL:	Website: www.kah	umana.org	
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm: 6					4		
	Bdrm: 36					6-8 8-10		
Three	Bdrm: 6					0-10		
RENT INFO: RE	ENT IS 30% OF INCOME	E: YES	UTILITIES INCI	LUDED:		TOTA	AL UNITS: 48	
Program receives	referrals from the state system only for transition	s homeless	Electric and wa	ter		MINIMUM W ESTIMATE	/AIT LIST	
			Į.			MAXIMUM W ESTIMATE		
AGE CRITERIA:	minor children experienc	ina				TO REMAIN ON V		
homelessness.	·····or ormanorr oxportorio	9	WAITLIS PARKING INFO	ST FOR PARKING: D: NO	PET INFO:	į	PETS OK:	
	ASSET LIMITS:			tall per unit, guest			2.00.41	
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INF	rO:		LEASE:		Coordinate	Ohana Ola is thro ed Entry System (C al housing only.		
INCOME CRITER	IA:				managem	respond to commuent, in a timely man	unication from nner, will result in	
			FURNISHED:		NO RESP	ONSE IN 2023		
1-PERSON MAXIN	MUM MONTHLY INCOM	E:	0					
2-PERSONS MAX	IMUM MONTHLY INCO	ME:	0					

		Last Comp	lete Update:	9/3/2024			AREA:	Kakaako
PROJECT NAME:	OLA	KA'ILIMA	ARTSPA	CE LOFTS			PROJECT TYPE:	Family
ADDRESS:	1025 W	aimanu St.					PHONE: 808-439)-6402
							FAX: (808) 43	39-6402
CITY:	Honolul	u	STATE: HI	ZIP:	96814		,	
	EAH F	ie Moberg, Res lousing Address: 1025 lousing-OLA KA	Waimanu Stree		and submitt	cations can be ed at:	•	OUT-OF-STATE APPLICATION
		Ū		applications are n	s/artspace-l	.eahhousing.org ofts/	g/apartment	ACCEPTED: YES
1		accepted.	o), paper	а рр поапото аго т		EMAIL: A	Δ1 -	
APPLY PHONE	: 808-43	39-6402			FAX: N/A			EAHHOUSING.ORG
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:		0	Troquillou.		от гоорго	т борго.	
One E	3drm:	50	1410	2.5x rent	680-721		3	
Two E	3drm:	30	1660	2.5x rent	851-1016		5	
Three E	3drm:	4	1889	2.5x rent	1265-1279		7	
Four E	3drm:		0					YES
RENT INFO: REI	NT IS 30	0% OF INCOME	:: NO	UTILITIES INCL	LUDED:		TOTA	L UNITS: 84
One Bedroom 309 AMI - 34 Units - \$ \$1293/mo Two Bedrooms 50	1067/m	o; 60% AMI - 7	Jnits -	Water, Sewer,	Trash		MINIMUM W.	(Months): 24
60% AMI - 6 Units			52/ma				MAXIMUM W ESTIMATE	
AGE CRITERIA:						-	TO REMAIN ON W	
18+					ST FOR PARKING:		CALL EVERY	
				PARKING INFO): YES ng garage. 4 years	PET INFO:	F \$250 Pet Deposit.	PETS OK: YES
1	Δ.	COET LIMITO	NONE	Resident parkii	ig garage. 4 years	includes a	φ230 i et Deposit.	
AN OWN RESID		SSET LIMITS: PROPERTY:				JENERAL I	INFO:	
ASSET LIMIT INFO				LEASE:		*Along with	completing regula	r waitlist updates,
				1 Year, month thereafter	to month	well as responding management Application	must keep all conta pond to communica ent in a timely manu s: Online only, at v.eahhousing.org/a	ation from housing ner.*
INCOME CRITERI						e-lofts/	asher and dryer fac	
1 30%AMI \$25,400 50% AMI \$42,300 60%AMI \$50,760	\$48,3	900 \$32,650 850 \$54,400	\$60,400	FURNISHED: Major appliance refrigerator).	es only (stove and	room; Cour community office; On-s	rtyard with playgrou gardens; *On-site site maintenance DNSE IN 2023	und and
1-PERSON MAXIM	UM MOI	NTHLY INCOM	E:	0		J		

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		Last Comp	lete Update:	5/19/2023			AREA:	Downtown
PROJECT NAME:	OLD	VINEYAR	D				PROJECT TYPE:	Family
ADDRESS:	265 Sou	th Vineyard St.					PHONE: 808-52	4-2731 x 3609
CITY:	Honolulu	J	STATE: HI	ZIP:	96813		FAX: 545-52	14
MANAGER	R: Myrna	Chun, Residen	t Mgr.; Sunnie L	.ee, COS 524-2731	APPLY ADI 50 S. Bereta Honolulu, H	ania St. C101		OUT-OF-STATE APPLICATION
APPLY TO): Urban I	Real Estate Co			rionolala, ri			ACCEPTED:
APPLY ATTN	N: Housin	g Management	Department					
APPLY PHONE	E : 808-52	4-2731 x 3609		FA	AX : 545-5214	EMAIL:	slee@urban-hi.con	า
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio: Bdrm:							YES
	Bdrm:	14	0	NO		1	2	YES
	Bdrm:	13	0	NO		3	6	YES
	Bdrm:	5	0					NO
RENT INFO: RE	:N1 15 30	% OF INCOME	E: YES	Water	DED:		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36
				Į.			ESTIMATE	(Months): 60
AGE CRITERIA: Head of househol	ld must be	e 18 vears or ol	der				TO REMAIN ON V	
Troug or rioussilor	a muot be	o to yours or or	401	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	. ,	PETS OK: NO
	AS	SSET LIMITS:	NONE	Parking included a parking is available	and guest		•	
AN OWN RESI						GENERAL	. INFO:	
ASSET LIMIT INF	O:			LEASE:		Funding:	Section 8 100%	
				1 year		Applicatio Send requences envelope	n: uest with self addres	ssed stamped
INCOME CRITER	IIA:							
				FURNISHED: Partly furnishedr appliances only. N				
 1-PERSON MAXIN	NOM MUN	NTHLY INCOM	E:	2288]		
2-PERSONS MAX	IMUM MC	NTHLY INCOM	ME:	2617				

	Last Compl	ete Update: 1	0/24/2023			AREA:	Kalaeloa
PROJECT NAME:	ONELAU'ENA	Hope for a	New Be	ginning		PROJECT TYPE:	Emergency/Transi
ADDRESS:	50 Belleau Woods St.					PHONE: 808-782	2-4342
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 682-542	28
	t: Tanya Tehotu, Executi	ive Director		APPLY ADI 87-132 Farri Waianae, H	ington Hwy		OUT-OF-STATE APPLICATION ACCEPTED:
	:: No action required unle	ess updating conta	ct info	FAX : 682-5428	EMAIL:	t.tehotu@kwohawa	ii.org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Three	Bdrm:						
Four	Bdrm:						NO
Male (single occup occupant) dorm; S Couple studio (1-3 Large family unit (*All are subject to	NT IS 30% OF INCOME pant) dorm; Female (sing studio (1-3 ppl); ADA studio; Family unit (1-4ppl) 4-6ppl) 30% household total incompany in the studies of the	gle dio (1-3ppl)	FILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): AIT LIST (Months):
Application is com Applicants must h	d must be 18 at time of a pleted upon eligibility of ave verifiable residential 6-12ppl) \$150/mo	placement. history.	ARKING INF		PET INFO	TO REMAIN ON W CALL EVERY	
	ASSET LIMITS: DENTIAL PROPERTY: O:		assigned pa	irking	Must be h Waianae Accepts fa	no through Kealahou nomeless - preference Coast, but will place amilies with minor co dren (18+), couples	ce to homeless on from other areas hild, couples with
		FU	JRNISHED:		Application Pick up from		
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:					

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	10/24/2023			AREA:	Kalaeloa
PROJECT NAME:	ONEMALU - Tra	ansitional s	helter			PROJECT TYPE:	Transitional
ADDRESS:	48 Belleau Woods St.					PHONE: 808-682	2-5868
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX : 682-542	28
MANAGER APPLY TO				APPLY ADD P.O. Box 753 Kapolei, HI 9	349		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE				FAX: 682-5428	EMAIL:		
S One I Two I	Type: Number of UNITS: tudio: 11 Bdrm: 5 Bdrm: 26 Bdrm: Unit of UNITS:	RENT:	Minimum INCOME Required:	SQ FT: 267 329 535	MINIMUM Number of People	MAXIMUM Number of People: 4 5 8	CAREGIVER Allowed:
Unit size determin Must be family wit age. *All units rent base Market rate: \$750/ ALL DEFEDDALS AGE CRITERIA: Head of household of application subr	d must be 18 years or old mission.	orgles. 7 years of the er at time d upon P.	ARKING INFO	stric ST FOR PARKING:	PET INFO:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): AIT LIST (Months): /AITLIST
AN OWN RESIDE ASSET LIMIT INFO	ASSET LIMITS: DENTIAL PROPERTY: O:	NONE II	cense.	am agreement	verified Residents Communa unit. Expr	INFO: clearance, inc verificate in all kitchen, but microless bus from Kapolakes app. 30 min F	housing plan. + minifridge in ei transit center to
confirms the applic	ication of monthly income cant's ability to afford the meeting basic needs of t	monthly he ir	URNISHED: 'es. Beds allo nspection. No urniture.		Stipend 10 Handicap A homeles provided if		2 bedroom (1) needs to be acement.

	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		
INOTIG			1 bed, additional cots. Cubicle			ministered by US Veterans Initiative bicle like units. Community bathrooms, mmunity Meals		

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	9/3/2024			AREA:	Kapolei
ROJECT NAME:	PALE	HUA TER	RACE PH.	1			PROJECT TYPE:	Family
ADDRESS:	92-1074	Palahia St.					PHONE: 808-672	2-5602
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 808-909	9-2364
MANAGER	: Angela	Akiona - Comr	nunity Director		APPLY ADI	DRESS: retania St. #200	Hon. HI	OUT-OF-STATE
APPLY TO	: Manag	ement Specialis	sts Co.		96814			APPLICATION ACCEPTED:
APPLY ATTN	l: Afforda	ble Housing De	ept.					YES
APPLY PHONE	:: 808-94	9-7611 x131			FAX : 946-0572		nschousing@hawa Email for applicati	
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:							YES
	Bdrm:	76	1294	2363	1037			YES
Three I		7	1468	2700	1007			
Four	Bdrm:			1				
AGE CRITERIA:				Vater		1	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24 /AIT LIST (Months): 36 VAITLIST
Head of household	d must be	e 18 years or ol	der	WAITLI	IST FOR PARKING:		CALL EVERY	(Months): 0
				PARKING INF		PET INFO:		PETS OK: NO
	AS	SSET LIMITS:		2 stalls per un	it	Service anii	паіѕ ок	
AN OWN RESID		PROPERTY:	NO			GENERAL I		
ASSET LIMIT INF	O:		_	EASE:		Funding: R Accepts Se		
				1 year; recertif	fication annually	Credit chec	ks through Equifa	х
INCOME CRITER	IA·		ļ			No to call u contact info	nless there are ar rmation.	ny updates to
60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 4 persons \$78360				FURNISHED: Partly furnishe appliances on				
-PERSON MAXIM	IUM MON	NTHLY INCOMI	 E: ·	4575		<u> </u>		

_		ete Update:	9/3/2024			AREA:	-
ROJECT NAME: PALE		RACE PH.	2			PROJECT TYPE:	1
ADDRESS : 92-1074	Palahia St.					PHONE: 808-67	
CITY: Kapolei		STATE: HI	ZIP:	96707		FAX : 672-56	02
MANAGER: Angela	Akiona - Comr	munity Director		APPLY AI	DDRESS: eretania St. #200) Hop. HI	OUT-OF-STAT
APPLY TO: Manag	ement Speciali	sts Co.		96814	orotarna Ot. #200	7 11011. 111	APPLICATION ACCEPTED:
APPLY ATTN: Afforda	able Housing De	ept.					YES
APPLY PHONE: 808-94	9-7611 x131			FAX: 946-0572		mschousing@haw *Email for applicati	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:							
Two Bdrm:	57	1260	2.25xRent	778			
Three Bdrm:	7	1400	2.25xRent	948			
Four Bdrm:		1400					NO
			,	,	,	,	,
RENT INFO: RENT IS 30	% OF INCOME	ii NO L	JTILITIES INC	LUDED:		TOTA	AL UNITS: 64
units at 30% AMI; 57 unit	ts at 60% AMI	N	Vater			MINIMUM W ESTIMATE	
].				MAXIMUM W ESTIMATE	
AGE CRITERIA:	10					TO REMAIN ON V CALL EVERY	
Head of household must be	e 18 years or ol			ST FOR PARKING	_		
		-	PARKING INFO		PET INFO: Service an		PETS OK: NO
Δ.	SSET LIMITS:		anang morado	,	Convice and	inaio on	
AN OWN RESIDENTIAL					GENERAL	INFO:	
SSET LIMIT INFO:			EASE:		Community	y Room, Picnic Are	ea
			1 year; month t	to month		ave 2 bathrooms ck through Equifax ection 8	
NCOME CRITERIA:					Funding: F	RHTF	
50% of AMI: 1 person \$54900 2 person \$62700 3 person \$70560 4 persons \$78360		l [URNISHED: Partly furnished appliances only				
-PERSON MAXIMUM MOI	NTHLY INCOM	E: 4	1 575]		

		=					
	Last Compl	<u> </u>	12/15/2021			AREA:	Palolo
PROJECT NAME:	PALOLO VALL	EY HOME	S (HPHA-	<mark>hon) - NOT AC</mark>	CCE	PROJECT TYPE:	Family
ADDRESS:	2107 Ahe St.					PHONE: 808-733	-9113
CITY:	Honolulu	STATE: HI	ZIP:	96816		FAX:	
	Tionoldia			36010			
MANAGER	: Kelsie Tilton			ADDLY ADD	DECC.		
MANAGER	: Keisie Tiiton			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA			Honolulu, HI		ATIONIC	APPLICATION
	NOT ACCEPTING AP	PLICATIONS		NOT ACCE	TING APPLICA	ATIONS	ACCEPTED: NO
APPLY ATTN	: Oahu applications office NOT ACCEPTING AP						140
		PLICATIONS			EMAIL: h	phaishereforyou.oı	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	tudio:						
One E	3drm: 8	0		513	1	4	YES
Two E	34	0		676	2	6	YES
Three E	3drm: 40	0		1045	3	8	YES
Four E	32	0		1147	4	10	YES
5 Bedroom Units a	for Federal Low Income		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM WA ESTIMATE ((Months): 36 AIT LIST
AGE CRITERIA:			Į.		-	ESTIMATE (
	d must be 18 years or old	der			I	O REMAIN ON W CALL EVERY (
	·		WAITL	O: NO	PET INFO:	Р	ETS OK: YES
			Included	J. 110	With Permit		1120
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INFO			LEASE:			ICES: Domestic V	
Cannot own a hous	se on Oahu		1 year		displaced.	transitional shelte	ers; involuntary
					Funding: Fe	ed Low Inc Pub Hs	ing 100%
INCOME CRITERI	Δ.				All conviction	ons must be 3 yrs a	ago, unless it's
ncome Eligibility = Maximum Annual I 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 furnishe appliances on		crystal meth	namphetamine or s	sex offender
1-PERSON MAXIM	UM MONTHLY INCOME	<u> </u>	4570		į.		
2-PERSONS MAXII	MUM MONTHLY INCOM	ſΕ:	5220				

		Last Comple	ete Update:	9/3/2024			AREA:	Palolo	
PROJECT NAME:	PALC	LO VALL	EY HOMES	SLPINOT	ACCEPTIN	G AP	PROJECT TYPE:	Family	
ADDRESS:							PHONE: 808-733	3-8650	
							FAX: 735-521		
CITY:	Honolulu	ı	STATE: HI	ZIP:	96816		,		
MANAGER	R: Wanda	Samson - Prop	erty Mgr.		APPLY ADI 2170 Ahe S			OUT-OF-STATE	
APPLY TO			iation of Hawaii o	lba Palolo Valley	Honolulu H			APPLICATION ACCEPTED:	
APPLY ATTN	Homes I-	i, L.P.						YES	
7	•					EMAIL:	wsamson@mutual-	housing.org	
APPLY PHONE	APPLY PHONE: 808-733-8650 FAX: 735-5211								
Unit	Туре:	Number	$\overline{}$	Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER	
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:	
S	tudio:								
One I	Bdrm:	9	668		485	1	4	YES	
Two I	Bdrm:	64	849		604	2	6	YES	
Three I	Bdrm:	9	1068		860	3	8	YES	
Four I	Bdrm:							NO	
RENT INFO: RE	NT IS 30	% OF INCOME	YES	JTILITIES INCLU	JDFD:		TOTA	L UNITS: 82	
Palolo Homes doe	es not hav	ve a waitlist; pot	ential	Water			MINIMUM W	Į.	
renters names are	taken iro	om Section 8 wa	aitiist				ESTIMATE	(Months): 36	
							MAXIMUM W ESTIMATE		
AGE CRITERIA:							TO REMAIN ON W		
Head of household	d must be	e 18 years or old	der when	WAITLIST	FOR PARKING:		CALL EVERY	(Months): 12	
Applicants must h	ave verifi	able residential		PARKING INFO:		PET INFO:		PETS OK: NO	
1				Every unit given of	only 1 stall	Service An	imals Only - MD No	ote Required	
ANI OWNI DECIE		SSET LIMITS:				CENEDAL	INFO:		
AN OWN RESIDE		PROPERTY:		_EASE:		GENERAL Funding: L			
Cannot own a hou			times the	1 year; then mon	th-to-month	Funding: I	RHTF		
limit for continued	occupan	cy.				Application Available t	ns: hrough Section 8 o	ffice	
INCOME CRITERI	ΙΔ.								
Maximum Annual	Income:		450;	FURNISHED:					
2 persons - \$31,35 4 persons - \$39,18	80; 5 pers	sons - \$42,330;		Partly furnished appliances only	-major				
6 persons - \$45,45 8 persons - \$51,72									
1-PERSON MAXIM	1UM MOI	NTHLY INCOME	 E:	2287		1			
2-PERSONS MAXI	мим мс	NTHLY INCOM	1E:	2612					

		Last Compl	ete Update:	9/3/20)24				Palolo	
PROJECT NAME:	ΡΔΙ (EV HOME	-C D	NOT	ACCEPTIN	C AP	AREA:		
ADDRESS:				LO LI II	1401	ACCLI IIII	O AI	PHONE: 808-73	,	
7.5511.200.		iio ot.						FAX: 735-52		
CITY:	Honolul	u	STATE: HI	ZIP	P:	96816		770-52	11	
MANAGER	: Wanda	a Samson, Prop	perty Mgr.			APPLY ADD	DRESS:			
APPLY TO	: Mutua Home	I Housing Assoc	ciation of Hawa	ii dba Palolo	o Valley	2170 Ahe Si Honolulu, Hi			OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN		-,							YES	
APPLY PHONE	APPLY PHONE: 808-733-8650 FAX: 735-5211 EMAIL: wsamson@mutual-housing.org									
Unit	Type:	Number of UNITS:	RENT:	Minim INCO	ME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER	
	tudio:	5Bdrm 8	1511	Requi	red:	1345	of People	People:	Allowed:	
One I	Bdrm:	16	668			478	1	4	YES	
Two I	Bdrm:	64	849			647	2	6	YES	
Three I	Bdrm:	76	1068			880	3	8	YES	
Four I	Bdrm:	60	1286			1100	4	10	NO	
RENT INFO: RE Palolo Homes doe pulled from Sectio 16 full handicappe available	s not ha n 8 waitl	ve a waitlist; na	mes are	UTILITIES Water	S INCLU	JDED:		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 36 /AIT LIST	
AGE CRITERIA:								TO REMAIN ON V	, , , , , , , , , , , , , , , , , , , ,	
Head of household applying. Applicants must have		·		PARKING	INFO:	FOR PARKING:		CALL EVERY (Months): 12 PET INFO: PETS OK: NO Service Animal ONLY - MD note required		
	А	SSET LIMITS:	YES						·	
AN OWN RESIDE		PROPERTY:	NO				GENERAL Funding:			
Cannot own a hou applicable income limit for continued	se. Asse	ission or three ti		LEASE: 1 year; th	nen mon	th-to-month	Funding:		h Section 8	
INCOME CRITERI	IA:			,			NO RESF	ONSE 2021		
Maximum Annual 2 persons - \$31,38 4 persons - \$39,18 6 persons - \$45,48 8 persons - \$51,72	sons - \$35,280; sons - \$42,330; sons - \$48,600;	FURNISHED: Partly furnishedmajor appliances only								
I-PERSON MAXIM	IUM MO	NTHLY INCOME	≣:	2287			Į.			

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	Last Comple	te Update:	12/15/2021			AREA:	McCully
PROJECT NAME:	PAOAKALANI (HPHA-ho	n) - NOT	ACCEPTING A	PPLI	PROJECT TYPE:	Elderly
	1583 Kalakaua Ave.					PHONE: 808-973	-0193
	<u></u>					FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96826		,	
MANAGER	: Ioane Ah Sam			APPLY ADD			
				1002 North \$ Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO): HPHA NOT ACCEPTING APP	LICATIONS			EPTING APPL	ICATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications office						NO
	NOT ACCCEPTING AF	PPLICATIONS			EMAIL:	hphaishereforyou.o	ra
APPLY PHONE	: 808-832-5961			FAX: 832-3461		, , ,	3
			Minimum		MINIMUM	MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
			Required:		of People	People:	YES
	tudio: 90	0		315	1	2	YES
One	Bdrm: 60	0		465	1	4	YES
Two I	Bdrm:						
Three I	Bdrm: 1						
Four I	Bdrm:						
	NT IS 30% OF INCOME: of for Federal Low Income 8/2/2016******		UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 24 AIT LIST
A OF ODITEDIA			r.			ESTIMATE	
AGE CRITERIA:	d or spouse must be 62 y	rears or				TO REMAIN ON W CALL EVERY	
older, or disabled	,		WAITL PARKING INF	IST FOR PARKING: FO: NO	PET INFO:	F	ETS OK: YES
			Included	0. 110		under 25 lbs. only	2.0 0.11 [120
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:			NCES: Domestic V	
Cannot own a hou	se on Oahu		1 year		displaced.	in transitional shelte	ers; involuntary
					If elder die	s, under age 62 spo	ouse may rent
			1		unit. Fundi	ng: Fed Low Inc Pu	b Hsing 100%
ncome Eligibility =			FURNISHED:			ions must be 3 yrs	
Maximum Annual 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;	50;	Partly furnish appliances or	edmajor	crystal me	thamphetamine or s	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

Last Complete Update	e: 10/19/2023		AREA:	Chinatown
PROJECT NAME: PAUAHI HALE CLOSE	ED .		PROJECT TYPE:	Family
ADDRESS: 126 North Pauahi St.			PHONE: 808-524	4-7233
CITY: Honolulu STATE:	HI ZIP: 96817		FAX:	
MANAGER: Bi	APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO:				APPLICATION ACCEPTED:
APPLY ATTN:				
APPLY PHONE : 808-737-2523	FAX:	EMAIL:		
Unit Type: Number of UNITS: RENT:	: Minimum INCOME Required: SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 38 760	120	1	1	YES
One Bdrm:				
Two Bdrm:				
Three Bdrm:				
Four Bdrm:		J		
RENT INFO: RENT IS 30% OF INCOME: YES Minimum rent \$300. Maximum rent \$760 15 units must be offered to those eligible to pay the \$300 minimum rent payment. Security deposit is equivalent of one month rent.	UTILITIES INCLUDED: Electricity and water		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6
AGE CRITERIA:	_		TO REMAIN ON W	
SINGLE ROOM OCCUPANCY (SRO) Must be over the age of 18	WAITLIST FOR PARKING: PARKING INFO:	PET INFO		PETS OK: NO
ASSET LIMITS: NONE	Not included. Available next door for \$40/month.	FETTINGO	<u> </u>	LTO OIL IVO
AN OWN RESIDENTIAL PROPERTY: YES	-	general	. INFO:	
ASSET LIMIT INFO:	LEASE:	4 story wa	alk-up. Single room en's and women's b	occupancy.
	1 year		each floor	
		Funding:	Unknown	
INCOME CRITERIA:		Applicatio Pick up fro	n: om Manager's Offic	e
Maximum Annual Income: 1 person - \$40,260 (below 50% area AMI)	FURNISHED: Unfurnished.	.	city, has not reope	
-PERSON MAXIMUM MONTHLY INCOME:	3355			

	Last Compl	ete Update:	4/19/2024			AREA:	Makiki
PROJECT NAME:	PIIKOI VISTA					PROJECT TYPE:	Elderly
ADDRESS:	1326 Piikoi St.					PHONE: 808-585	5-8882
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 521-689	97
MANAGER	t: Paul Hobson			APPLY ADD	RESS: lu Avenue, Ho	nolulu HI	OUT-OF-STAT
APPLY TO	: Locations			96815	u Avenue, no	noidid, i ii	APPLICATIO ACCEPTED
APPLY ATTN	I: Property Management	Division					YES
APPLY PHONE	E: 808-585-8882			FAX: 808-521-6897	7	http://www.locationable-rentals.aspx	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 47	1225	2xrent	420			
Three E	Bdrm:						YES
ood stamps can	NT IS 30% OF INCOME be used to meet min. ind te holders need not mee uirement.	come.	ITILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA:	he 55 or older					TO REMAIN ON W	/AITLIST
	verifiable residential histo		ARKING INF	ST FOR PARKING: O: NO n for parking; once	PET INFO:		PETS OK: NO
AN 0000 PE015	ASSET LIMITS:	NONE	all stalls are as occupancy is re enants withou	ssigned, restricted to it cars; some	OFNERAL	INFO	
SSET LIMIT INFO	DENTIAL PROPERTY: O:		nuest parking	available.	GENERAL Opened 2	/2007; Funding: LIF	ITC
All income from as eligibility.	ssets is counted to deter	mine	EASE:		Communit and reside	ry garden, Locked e y room for activities ent manager on site Short walk to grocer urants.	s, Social Worker , Laundry room on
COME CRITERI					Application	า:	
0% AMI: 1 persoi	n \$48,750; 2 persons \$5	F	Partly furnishe	dmajor nyl floording, AC, d garbage disposal.	Download Ask mana Send requ envelope	from website gement to mail it est with self-addres om Manager's office	
50% AMI: 1 person	n \$48,750; 2 persons \$5	i c	appliances, vir	nyl floording, AC,	Download Ask mana Send requ envelope	from website gement to mail lest with self-ad	ddres

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	Last Compl	ete Update:	4/23/2024			AREA:	Kakaako
PROJECT NAME:	POHULANI EL	DERLY				PROJECT TYPE:	Elderly
ADDRESS:	626 Coral St.					PHONE: 808-744	I-6063
CITY	Honolulu	STATE: HI	ZIP:	96813		FAX: 744-658	32
	lionolala	0171121 111		30013			
MANAGER	R: DeAnn Auwae, Manaç	ger		APPLY ADI 626 Coral S Honolulu, H	t. Ste. #507		OUT-OF-STATE APPLICATION
): Hawaii Affordable Pro	perties Inc.		Tionolaid, Ti	1 000 10		ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	E: 808-744-6063			FAX: 744-6582		http://hawaiiaffordal	
Unit	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:			J			YES
Deposit=same as No action required	NT IS 30% OF INCOME rent; accepts section 8 d unless updating contact esponse to inquiry by Po 0	t	UTILITIES INC			MINIMUM W. ESTIMATE MAXIMUM W.	(Months): 0
A OF ODITEDIA						ESTIMATE	
AGE CRITERIA: All household mer	mbers must be 62 at time	e of	\A/A I T I	10T FOR RABIANO		TO REMAIN ON W CALL EVERY	
	giver allowed over age 18 verifiable residential histo		PARKING INF	IST FOR PARKING: O: YES	PET INFO:	: P	PETS OK: YES
	ASSET LIMITS:	NONE	month; parking Kakaako for \$	44.88/mo (call			·
	DENTIAL PROPERTY:	NO	District prking	- 597-1789)	GENERAL		
ASSET LIMIT INF	O: jority interest in residenti	al property	LEASE:		with MD le	are allowed in both etter; cannot work ou	utside home.
in fee simple or lea unit within the sam	asehold, usuitable for a ne county.	dwelling	1 year		Studio has Services:	all system; Secure e s lanai; 3 elevators Meals on Wheels m ation to Shopping av	eal site
INCOME CRITER			ELIDAUG: :==		Catholic C	Charities Hawaii State Rental Assista	-
1 person - \$78,000 rsons - \$89,120			Partly furnishedmajor appliances, drapes, carpet, plot		opened 19 Rec deck		
Note: Minimum Ir minimum rent	ncome Required is 2.5 x	the	cable ready, to amount of) wa				
1-PERSON MAXIM	IUM MONTHLY INCOM	E :	6500		Į.		
2-PERSONS MAXI	MUM MONTHLY INCOM	ИЕ :	7427				

	Last Compl	ete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HON	MES I (HPH	A) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	1638 - 1699 Ahiahi Pl.	•				PHONE: 808-832	2-3336
CITY	 	STATE: HI	ZIP:	00047		FAX: 832-338	5
CITT.	Honolulu	STATE. HI	ZIF.	96817			
MANAGER	: Julie Wiggett			APPLY ADD			OUT-OF-STATE
APPLY TO	: NOT ACCEPTING AP	PLICATIONS		Honolulu, HI NOT ACC	96817 EPTING APP	LICATIONS	APPLICATION ACCEPTED:
APPLY ATTN	I: NOT ACCEPTING AP (Oahu applications offi				FMAN	ha hadaha ar Camara	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:
	tudio:						
	Bdrm:						
Three							
Four	Bdrm: 14	0		1116	4	10	YES
14 five bdrm units Minimum Rent: Or Three Bdrm - \$15 funding source: st	nè Bdrm - \$108; Two Bd 2; Four Bdrm - \$180	rm - \$128;	JTILITIES INC Water and allow and gas	LUDED: wance 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 18 years or old			ST FOR PARKING:		CALL EVERY	
			PARKING INFO	D:	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:	YES					
	DENTIAL PROPERTY:	NO			GENERAL		
Cannot own a hou	O: lse on Oahu. Assets lim	ited to two	_EASE:			DUSING PREFERE erly 2.) The Displac	
times the applicab	le income for admission continued occupancy.		1 year		Families o was deterr	 v/ service connecte f deceased veteran nined to be service erans 6.) Families re 	s whose death connected. 5.)
INCOME CRITER	IA:				Transitiona Wait	al Shelters 7.) All ot	hers - Indefinate
	n \$33,300; 2 persons \$3 4 person \$47,550.	<i>.</i>	FURNISHED: Partly furnished appliances only		Funding: S	State Pub Hsing 100 ons must be 3 yrs o	
-PERSON MAXIM	IUM MONTHLY INCOME]	3450]		
2-PERSONS MAXI	MUM MONTHLY INCOM	л Е:	4895				

		Last Comp	olete Update:	12/15/2021			ARFA-	Kapalama
PROJECT NAME:	PUAI	HALA HO	MES II (HE	PHA) - NOT	ACCEPTING	APP	PROJECT TYPE:	-
ADDRESS:				1114	7.0021 1	7 1.	PHONE: 808-832	1
							FAX: 322-063	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		,	
MANAGER	: Julie W	/iggett			APPLY ADI	DRESS: PTING APPLI	CATIONS	OUT-OF-STATE
APPLY TO	: NOT A	CCEPTING A	PPLICATIONS		1002 North Honolulu, H			APPLICATION ACCEPTED: NO
APPLY ATTN	_	CCEPTING A applications of	PPLICATIONS ffice)			FMAII ·	hphaishereforyou.o	-
APPLY PHONE	: 808-83	2-5961			FAX: 832-3461	LWAIL.	прпавлетегогуоц.о	·9
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	3drm: 3drm:	12	0		676	2	6	YES
Three B	Bdrm:	8	0		940	3	8	YES
Four I	Bdrm:							
Minimum Rent: Or Three Bdrm - \$152 funding source: sta	ne Bdrm 2; Four B ate	- \$108; Two B 3drm - \$180	drm - \$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	/AITLIST
Head of household	d must be	e 18 years or o	older		IST FOR PARKING:		CALL EVERY	
				PARKING INF	O:	PET INFO	: F	PETS OK: NO
		SSET LIMITS:						
AN OWN RESID		. PROPERTY:	NO			GENERAL	INFO: OUSING PREFERE	NOTO.
Cannot own a hou times the applicab times that limit for	se on Oa le incom	e for admissio		LEASE: 1 year		1.)The Eld Veterans Families d was deter	derly 2.) The Displace w/ service connecte of deceased veteran mined to be service erans 6.) Families re	ed 3.) Disabled d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI	A:						al Shelters 7.) All ot	
50% AMI: 1 person persons \$42,800;	n \$33,30 4 person	0; 2 persons \$ \$47,550.	38,050; 3	FURNISHED: Partly furnishe appliances on		Funding: \$	State Pub Hsing 100 tions must be 3 yrs	
1-PERSON MAXIM				3450]		

	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 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				

	La	st Comple	te Update:	12/15/2021			ARFA:	Kapalama
PROJECT NAME:	PUAHAL	A HOM	ES IV (H	PHA) - NO	T ACCEPTIN	G AP	PROJECT TYPE:	
	School St. and			11114	7,002, 1,1,1	7	PHONE: 808-832	1
			_				FAX: 322-063	
CITY:	Honolulu		STATE: HI	ZIP:	96817		,	
	: Julie Wigget		LICATIONS		1002 North	EPTING APPLI School St.	CATIONS	OUT-OF-STATE APPLICATION
	HPHA I: NOT ACCEF				Honolulu, I	HI 96817		ACCEPTED: NO
A TELANIN	Oahu applica	_				FMAII ·	hphaishereforyou.o	ra
APPLY PHONE	: 808-832-596	51			FAX : 832-3461			.9
Unit		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	4	0		519	1	4	YES
Two I	Bdrm:	32	0		662	2	6	YES
Three I	Bdrm:	4	0		808	3	8	YES
Four I	Bdrm:							
RENT INFO: RE Minimum Rent: Or Three Bdrm - \$152	ne Bdrm - \$108 2	8; Two Bdrr	n - \$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	
Head of household	d must be 18 y	ears or old	er	WAITL	IST FOR PARKING	:	CALL EVERY	(Months): 12
				PARKING INF	0:	PET INFO	: F	PETS OK: NO
]	ASSET	LIMITS:	/EQ	Included				
AN OWN RESID						GENERAL	. INFO:	
ASSET LIMIT INFO		,		" LEASE:		- I	OUSING PREFERE	
Cannot own a hou times the applicab times that limit for	le income for a	admission o		1 year		Veterans Families o was deter	derly 2.) The Displace w/ service connecte of deceased veteran mined to be service erans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI	IA:						al Shelters 7.) All ot	
50% AMI: 1 perso persons \$42,800;			,050; 3	FURNISHED: Partly furnishe appliances on		Funding:	State Pub Hsing 100 tions must be 3 yrs	
1-PERSON MAXIM	IUM MONTHLY	Y INCOME:		3450]		
2-PERSONS MAXI	MUM MONTH	LY INCOM	E:	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 Get applicat	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		UTILITIES INCLU 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			

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	te Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUMEHANA (H	PHA-hon)	- NOT AC	CEPTING A	PPLIC	PROJECT TYPE:	
	1212 Kinau St.					PHONE: 808-586	§-9724
						FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96814		,	
MANAGER	: Sol Sentous			APPLY AD			
				1002 North Honolulu, I	n School St. HI 96817		OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING APP	LICATIONS		NOT ACC	EPTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications office	e					NO
	NOT ACCEPTING APP	PLICATIONS			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREON/ER
	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
S	tudio: 98	0		454	1	2	YES
One I	Bdrm: 40	0		553	1	4	YES
	Bdrm: 1	0		333		_	
				-			
Three I							
Four I	Bdrm:		ļ				
RENT INFO: RE	NT IS 30% OF INCOME:	YES	UTILITIES INC	CLUDED:		ТОТА	L UNITS: 139
Minimum Rent: \$0	for Federal Low Income	projects	Water and allo	wance for utilities		MINIMUM W	
*********CLOSED 8	8/2/2016*****					ESTIMATE	
						MAXIMUM W	(0.0 11)
A OF ODITEDIA		,				ESTIMATE	
AGE CRITERIA: Head of household	d must be 62 years or olde	er, or				TO REMAIN ON W CALL EVERY	
disabled	,	, ,	WAITLI PARKING INF	IST FOR PARKING	: PET INFO	. Б	PETS OK: YES
			Included	0.		under 25 lbs. only	210 011 120
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:			ENCES: Domestic V	
Cannot own a hou	se on Oahu		1 year		displaced	in transitional shelte	ers; involuntary
					If elder die	es, under age 62 sp	ouse may rent
INCOME ODITED	14				unit. Fund	ing: Fed Low Inc Pu	ub Hsing 100%
ncome Eligibility =			FURNISHED:			tions must be 3 yrs a	
	Income: 1 person - \$53,25 00; 3 persons - \$68,500;	50;	Partly furnishe		- Oryotal Inc	anamphotamino or s	ock diferraci
4 persons - \$76,10	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		appliances on	ly, no carper			
8 persons - \$100,4							
<u> </u>							
1-PERSON MAXIM	IUM MONTHLY INCOME:	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOME	E:	5220				

	Last Camer	lata Ulu data	10/15/0001				
		lete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUNCHBOWL	HOMES (F	HPHA-hon	<mark>) - NOT ACCE</mark>	PTIN	PROJECT TYPE:	Elderly
ADDRESS:	730 Captain Cook Ave.					PHONE: 808-586	-9724
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 586-972	8
9	J' loriolala	• · · · · · · · · · · · · · · · · · · ·		30013			
MANAGER	: Sol Sentous			APPLY ADD			OUT-OF-STATE
APPLY TO	• НРНА			Honolulu, HI	l 96817	. =	APPLICATION
720	NOT ACCEPTING AF	PLICATIONS		NOT ACCE	PTING APPLIC	ATIONS	ACCEPTED: NO
APPLY ATTN	l: Oahu applications offi						NO
	NOT ACCEPTING AF	PLICATIONS			EMAIL: h	phaishereforyou.oı	g
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:
	tudio:						
	Bdrm: 97	0		548	1	4	YES
							YES
	Bdrm: 58	0		711	2	6	120
Three I	Bdrm: 1	0					
Four I	Bdrm:						
	NT IS 30% OF INCOME for Federal Low Income 8/2/2016******		UTILITIES INC	CLUDED: wance for utilities		MINIMUM WA ESTIMATE ((Months): 24 AIT LIST
A OF ODITEDIA			į.			ESTIMATE (
AGE CRITERIA:	d or spouse must be 62	vears or			1	O REMAIN ON W CALL EVERY (
older, or disabled	a e. epeaceaet 2e e_	, 54.5 5.	WAITLI PARKING INF	O: NO	PET INFO:	Þ	ETS OK: YES
			Included	O. INO		under 25 lbs. only	ETO OK. ITES
,	ASSET LIMITS:	NONE				,	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II	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
			'			, under age 62 spo	ouso may ront
]						ig: Fed Low Inc Pu	
INCOME CRITERI			FUDANOLIED			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		Transportat	namphetamine or s ion to Shopping av arities Hawaii	
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		-		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

	Last Comp	lete Update:	12/15/2021			AREA:	Aiea
PROJECT NAME:	PUUWAI MOM	I (HPHA-h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	
	99-132 Kohomua St.					PHONE: 808-483	3-2550
						FAX: 483-255	
CITY:	Aiea	STATE: HI	ZIP:	96701		•	
MANAGER	: Marcus Asami			APPLY ADD			0117 05 07475
ADDLY TO	. LIDITA			1002 North S Honolulu, HI	96817		OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING AF	PPLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications offi						NO
	NOT ACCEPTING AF	PPLICATIONS			EMAIL:	hphaishereforyou.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:
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		1130	1 4	10	YES
RENT INFO: RE	NT IS 30% OF INCOME	E: YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 260
-	for Federal Low Incom		Electricity and			MINIMUM W	
*********CLOSED 8	8/2/2016*****					ESTIMATE	
						MAXIMUM W	(0.0 11)
			į.			ESTIMATE	. ,
AGE CRITERIA:	d must be 18 years or o	lder				TO REMAIN ON W CALL EVERY	
	aact 20 10 years 61 0		WAITL PARKING INF	IST FOR PARKING:	PET INFO:		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	edmajor			
4 persons - \$76,10	00; 5 persons - \$82,200	,	appliances on	ly, no carpet			
6 persons - \$88,30 8 persons - \$100,4	00; 7 persons - \$94,350 450	,					
]]		
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570				
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	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	1	STATE: HI	ZIP:	96813		FAX: 808-490)-0707
MANAGER APPLY TO		ca Malabey Real Estate				DRESS: n Emma Street lawaii 96813		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	: 808-64	6-2660			FAX : 808-490-070		www.queenemmaa manager@queener ~	partments.com mmaapartments.co
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	32	1325	2 x rent	369-405	1	2	
One I	Bdrm:	13	1300	2 x rent	446-680	1	3	
Two I	Bdrm:	26	1673	2 x rent	618-850	2	5	
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE LIHTC; Income re: Section 8 voucher 4 studios only at 3 Deposit equal to o \$17 background of	strictions s accepte 60% AMI -	apply. ed. - \$550 mo. o's rent		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:				le.			TO REMAIN ON W	, , ,
Age 18				\ \ /\/\ITI	.IST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO:	F	PETS OK: NO
]	AS	SSET LIMITS:		Limited, on-si	te parking available	Pets not all	owed.	
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO	O:			LEASE:		Engaging s	social spaces, new dows, 9 ft. ceilings,	interiors, floor-to-
				12 month		wood-style site manag call emerge	flooring, some uni	ts have lanais, on- illities, elevator, on- WiFi in common
INCOME CRITERI	IA:							entry, bike sotrage
30% AMI units - m \$27,510; 2 person 60% AMI maximui \$62,880, 3 - \$70,7	- \$31,44 m income	0. e for 1 - 55,020,	2 -	FURNISHED: Major applian window cover counter tops	ces, microwave,			
1-PERSON MAXIM				4585				

		Last Comp	lete Update:	8/7/2023			AREA:	Chinatown
PROJECT NAME:	RHF	PAUAHI K	(UPUNA H	IALE		F	PROJECT TYPE:	Elderly
ADDRESS:	167 Nort	th Pauahi St.				F	PHONE: 808-524	1-5844
CITY:	Honolulu	I	STATE: HI	ZIP:	96817		FAX: 949-258	54
		acey, Manager				DRESS: debaker Rd. h, CA. 90815-490	00	OUT-OF-STATE APPLICATION
1		nent Housing F	oundation		(562) 257-5			ACCEPTED: YES
APPLY ATTN		4.5044				EMAIL: w	ww.rhf.org	
APPLY PHONE	: 808-52	4-5844			FAX:			
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	12	0		539	1	1	YES
One	Bdrm:	36	0		579	1	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE 2023 Update: No a contact informatio	action rec			Water, sewer &			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 96 AIT LIST
AGE CRITERIA:						т	O REMAIN ON W	
Head of household			der, or	WAITI IS	ST FOR PARKING:		CALL EVERY	
disabled (mobility	impaired)			PARKING INFO):	PET INFO:	F	PETS OK: YES
]	AS	SSET LIMITS:	NONE	Parking not ava	ailable			
AN OWN RESI						GENERAL IN	NFO:	
ASSET LIMIT INF	O:			LEASE:		outside hom	are allowed with Ne. If elderly tenanal rent the unit.	ID letter; can work nt dies, under age
				, you			neal site next door	
INCOME CRITER	IA:			,		Funding: Se	ction 202	
Maximum Annual persons - \$39,700		1 person - \$34,	750; 2	FURNISHED: Partly furnished appliances only		Project will o waitlist.	call applicant to ke	eep application on
					,		ement to mail it st with self-addres	ssed stamped
1-PERSON MAXIM	NOM MUI	ITHLY INCOM	E:	2895				
2-PERSONS MAXI	ІМИМ МС	NTHLY INCO	ME:	3308				

	Last Compl	ete Update:	8/7/2023			4054	McCully
BBO IECT NAME.	RHF PHILIP ST	DEET AD	ADTMENIT	C NOT ACC	CEDTI	AREA: PROJECT TYPE:	
		KEET AP	AKIMENI	S - NOT ACC	EPII]=
ADDRESS:	1605 Philip St.					PHONE: 808-949	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 949-25	54
			,				
MANAGER	: Sue Stacey, Manager	- Suite 200		APPLY AD			
APPLY TO	: Retirement Housing Fo	oundation			idebaker Rd. ch, CA. 90815-4 5100	1900	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						YES
APPLY PHONE	: 808-949-2555			FAX: 949-2554	EMAIL:	www.rhf.org	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio: 10	0	NO	550	1	1	YES
One E	3drm: 24	0	NO	575	1	2	YES
Two E	3drm:						
Three E	3drm:						
Four E	3drm:						NO
2023 Update: No a	NT IS 30% OF INCOME action required unless up n or in response to comm	dating	UTILITIES INC Electricity and			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 96
AGE CRITERIA:						TO REMAIN ON W	,
one member of the	e household must be age		WAITLI	ST FOR PARKING	:	CALL EVERY	
household may be	ust be 18+. Other member 18+.	ers or the	PARKING INFO	O: YES	PET INFO		PETS OK: YES
J			Available		One smal	I pet only	
AN OWN PESIT	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO		110	LEASE:		Caregiver	s are allowed with N	
			1 year, then m	onth to month		ome. If elderly tena e may rent unit.	nt dies, under age
					Opened 1	993	
INCOME CRITERI	A:				Funding:	Section 202 100%	
Maximum Annual 2 persons - \$38,35	Income: 1 person - \$33,5 50.	550;	FURNISHED: Partly furnishe appliances onl		Send requences	on: agement to mail it uest with self-addres om manager's office	
	UM MONTHLY INCOME		3404				

	Last Comple	ete Update:	5/4/2023			AREA:	Chinatown
PROJECT NAME: F	RIVER PAUAHI					PROJECT TYPE:	Family
ADDRESS: 1	155 River St.					PHONE: 808-892	2-1812
CITY:	lonolulu	STATE: HI	ZIP:	96817		FAX: None	
MANAGER:	Luis; Ste. 111			APPLY AD	DDRESS: St Honolulu, H	I 96817	OUT-OF-STATE
APPLY TO:	River Pauahi Apt. c/o l	Jnited Horizon Re	alty, LLC				APPLICATION ACCEPTED:
APPLY ATTN:	Certified Occupancy S	pecialist (Lv mes	sage)				YES
APPLY PHONE:	808-892-1812			FAX: 892-1801	EMAIL:		
Unit T	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	idio:						VEQ.
One Bo		0	NO		1	3	YES
Two Bo		0	NO		3	5	YES
Three Bo							
Four Bo	drm:						
RENT INFO: REN	T IS 30% OF INCOME		TILITIES INC lectricity and			MINIMUM W ESTIMATE MAXIMUM W	(Months): 60
AGE CRITERIA:		P.				ESTIMATE TO REMAIN ON V	
	must be 18 years or old	der	\\/ A T	ST FOR PARKING:		CALL EVERY	
		P	ARKING INF		PET INFO:	F	PETS OK: NO
]		N	lo parking.				
	ASSET LIMITS:	NONE					
AN OWN RESIDE ASSET LIMIT INFO:	ENTIAL PROPERTY:	NO			GENERAL		
ASSET EINIT IN O.			EASE:		.	Section 8 100%	4.0 h.daaa
			year		3 nandicar	o units 2 - 1 bdrm 8	k 1 - 2 baims
INCOME CRITERIA	:						
2 persons - \$38,000	come: 1 person - \$33,2 ; 3 persons - \$42,750; ; 5 persons - \$51,300.	F	URNISHED: Partly furnishe ppliances on		-		
I-PERSON MAXIMU	IM MONTHLY INCOME	E: 2	771		Į.		
2-PERSONS MAXIM	UM MONTHLY INCOM	ME: 3	167				

		Last Comp	lete Update:	9/4/2024			AREA	. Makiki
PROJECT NAME:	ROYA	L KINAU	APARTM	ENTS		F	PROJECT TYPE	Elderly
ADDRESS:	728 Kina	u St.				F	PHONE: 808-52	1-3678
CITY:	Honolulu		STATE: HI	ZIP:	96813		FAX : 521-29	31
MANAGER	t: Rick Zci	nski, Commu	nity Manager		APPLY AD	DRESS: Street, Honolulu,	HI 96813	OUT-OF-STATE
APPLY TO	: Royal K	inau Apartme	nts					APPLICATION ACCEPTED: YES
APPLY ATTN	l:							123
APPLY PHONE	: 808-521	-3678			FAX: 521-2931		tps://www.royalk yalkinaumanage	inau.com/ r@royalkinauapts.co
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	60	1228	1.5 x rent	541	1	2	YES
	Bdrm:	24	1473	1.5 x rent	741	1	4	YES
Three I	Bdrm:							NO
,				,		,		
RENT INFO: RE				UTILITIES INC			TOT	AL UNITS: 83
No action is requir information. Long				Electric, water	, and sewer		MINIMUM V ESTIMATE	
Section 8 certifica		need not mee	et the min				MAXIMUM V ESTIMATE	
AGE CRITERIA:						T	O REMAIN ON \	WAITLIST
All residents must	be 62 or 0	older		WAITL	IST FOR PARKING:		CALL EVERY	(Months):
				PARKING INF	1	PET INFO:		PETS OK: NO
]	AS	SET LIMITS:	NONE		led, 57 spaces I. First come first	Service anim documentati	nals are allowed on.	with proper
AN OWN RESI						GENERAL IN	NFO:	
ASSET LIMIT INF	O:			LEASE:		opened 1998		
5,000				1 year; then m	nonth-to-month	Funding: LIF	HTC, Section 8	
J						8 handicapp	ed access	
50% AMI: 1 perso		; 2 persons \$	52,250; 3	FURNISHED:		Application:	st with self addre	esad stampad
persons \$54,250:	4 persons	\$60,250		Partly furnishe appliances on		envelope Pick up from Email reque	n manager's offic	e
]						Nov. 1st 20	24 rent increases	s, already reflected.
1-PERSON MAXIM				3771				

	Last Comp	olete Update:	11/24/2021			AREA:	Downtown
PROJECT NAME:	SAFE HAVEN	MENTAL H	EALTH K	OKUA		PROJECT TYPE:	Emergency/Transi
ADDRESS:	126 N. Pauahi St.					PHONE: 808-524	l-7233
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 524-035	3
]						
MANAGER	t: Bill Hanrahan			APPLY ADD			OUT OF OTATE
APPLY TO	: Mental Health Kokua Intake Monday - Frida		n	126 N Paual Honolulu, HI			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						NO
APPLY PHONE	:: 808-524-7233			FAX : 524-0353	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio: 25			80	1	1	
One	Bdrm:						
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:				<u> </u>		
RENT INFO: RE	NT IS 30% OF INCOM	E:	UTILITIES INC	CLUDED:		TOTA	L UNITS: 25
Includes 3 meals	y ill. (bi-polar, Schizoph		All utilities			MINIMUM W ESTIMATE	(Months): 2
depression). To yi	3 of older.					MAXIMUM W ESTIMATE	
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be 18 years or o			IST FOR PARKING:		CALL EVERY	
			PARKING INFO	O:	PET INFO); F	PETS OK: NO
	ASSET LIMITS:						
	DENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INF	O:		LEASE:		mentally i		•
			Month-to-mon	th	AUW, C a	HUD Continuum of 0 & C Esg; State HPH, residential, Case Mo	A; other services
INCOME CRITER	IA:		r		Plcmt Se Activity C	rvices, enter (waiting list) - ¡ , med/psych svcs, ch	orovides social
Max income limits	- None		FURNISHED: dep			dency treatment, co	
			Bed, dresser		integratio service		
						PONSE IN 2023	
<u> </u>					I TO INCOM	0.10L II1 2020	

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	NOT ACCEPTING AP			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 Water and allo	CLUDED: wance for electricity		TOTA MINIMUM WA ESTIMATE (MAXIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:	d must be 19 veers or al	dor			٦	TO REMAIN ON W	
nead of nousehold	d must be 18 years or ol	uei	WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: YES
	ASSET LIMITS:	NONE	Included	O.	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	Crystai met	namphetamine of s	sex offender
	IUM MONTHLY INCOM		4570				

	Last Comp	olete Update:	3/17/2020			AREA:	Waianae
PROJECT NAME:	SEA WINDS A	PARTMEN	NTS, 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:	
OII I.	vvalanae	STATE: HI	211 .	96792			
MANAGER	: Jesse Smith, Genera	ıl Manager		APPLY ADD			
APPLY TO	: Pick up and drop off days Thurs./Sat./Sun			Apartments,	nager, Sea Win 85-295 Kauiok nae, Hawaii 967	alani Pl.	OUT-OF-STATE APPLICATION ACCEPTED:
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 I	3drm:						
Two I	30**	1295	2000	770	4	7	
Three I	3drm:						
Four I	Bdrm:						NO
RENT INFO: RE	NT IS 30% OF INCOM	E: NO	UTILITIES INCLUD	DED:		ТОТА	L UNITS: 50
20 Transtional stu- stay. Rents range	dio units with 36 month	maximum	Water, sewer, trasl	า		MINIMUM W	Į.
'	bdrm townhouse renta	als on site				ESTIMATE	(Months): 6
	rents of \$850 - \$1295	alo on oite				MAXIMUM W ESTIMATE	
AGE CRITERIA:					٦	TO REMAIN ON W	
18 and older			WAITLIST F	FOR PARKING:		CALL EVERY	(Months): 0
			PARKING INFO:	NO	PET INFO:		PETS OK: YES
			\$25 month			al household pets e pet agreement fo	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				JENERAL I	NFO:	
ASSET LIMIT INFO	O:		LEASE:			of Housing Solutio	
HUD Urban Honol	ulu Low Income Limit		1 year		in a homele 2 units (incl handicappe	is given if applicar ess shelter. ludes 1 studio) are ed; 2 units (include hearing disabled.	adapted for
INCOME CRITERI	A:				I '	ŭ	
\$2000 minimum g food stamps) for 2 gross monthly inco		not including 0 minimum	FURNISHED: Drapes, tiled floors appliances (refrige stove top).			: m manager's office est to Jesse@hsis	
			3665				

	Last Compl	ete Update:	5/30/2024			AREA:	Iwilei
PROJECT NAME:	SENIOR RESID	ENCE AT I	WILEI		ı	PROJECT TYPE:	Elderly
ADDRESS:	888 Iwilei Rd.					PHONE: 808-888	3-0876
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 808-888	3-2565
MANAGER	R: Indigo Real Estate			APPLY ADE Manager's C		dulu Hi	OUT-OF-STAT
APPLY TO	: Senior Residence at Iv	vilei		96817	, ad	1414, 111	ACCEPTED:
APPLY ATTN	I: Manager's Office						120
APPLY PHONE	E: 808-888-0876			FAX: 808-888-2569	EMAIL:		
	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		1000	1.0 X TOTAL	010			
Four	Bdrm:						NO
Application fee - \$	NT IS 30% OF INCOME		JTILITIES INC Water and sew			MINIMUM W ESTIMATE MAXIMUM W	(Months): 2
ACE ODITEDIA.		Į.				ESTIMATE	
AGE CRITERIA: 62+ whole housho	old		\A/A IT. I	OT FOR RADIVINO	ı	O REMAIN ON V CALL EVERY	
		F	WALLE PARKING INFO	ST FOR PARKING: D: NO	PET INFO:	F	PETS OK: NO
			87 stalls				
AN OWN PESI	ASSET LIMITS: DENTIAL PROPERTY:				J GENERAL II	NEO:	
ASSET LIMIT INF	O:		EASE:		Application:		
Income from asse	ets cannot exceed maxim	ium limits. 📗 🖡	One-year			ement to mail it n manager's office ite office	9
INCOME CRITER	IA:						
	1 person; \$55,700 2 ppl 1 person; \$66,8409 2 p	ol;	FURNISHED: Partly furnishe appliances only	dmajor y; bathroom tub			
 - -PERSON MAXIM	1UM MONTHLY INCOM		4875				
			5570				

		Last Comp	olete Update:	6/6/2023			AREA:	Kaneohe
PROJECT NAME:	SENI	OR RESI	DENCE AT	KANEOH	E		PROJECT TYPE:	Elderly
ADDRESS:	45-705	Kamehameha	Hwy.				PHONE: 808-23	5-2898
CITY:	Kaneoh	е	STATE: HI	ZIP:	96744		FAX: 235-089	97
MANAGER	R: Joshua	a Monton, Res	dent Manager		APPLY AD			OUT-OF-STATE
APPLY TO): Bob Ta	anaka, Inc.						APPLICATION ACCEPTED:
APPLY ATTN	۱:							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:
	itudio:							YES
	Bdrm:	74	1025	2x rent	428			123
Three	Bdrm:				-			
Four	Bdrm:			ļ.		J	ļ	NO
*44 (HUD) Rents at 30 (LIHTC) units Deposit same as Section 8 certifications income requirements.	are 30% are \$102 rent. Mu ite holder	of income; wai 25; waitlist 1-3 st be below 60	tlist 4 - 6 yrs yrs. % AMI	Water & Sewe			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:							TO REMAIN ON V	, , , , , , , , , , , , , , , , , , , ,
All residents must	be 62 or	older		WAITLI	ST FOR PARKING		CALL EVERY	
				PARKING INF		PET INFO:		PETS OK:
<u> </u>	A	SSET LIMITS:	NONE	Monthly Rent I include paarkii First Come Fir	ng; 48 stalls;	LIHTC - No HUD - PE		
AN OWN RESI		PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	O:			LEASE:		Opened 20		
				6 months		floor near Units have onsite soc	ial worker	
INCOME CRITER 50% AMI: 1 perso persons \$58,800 60% AMI: 1 perso 2 persons - \$62,70	on \$45,75 on - \$54,9	000		FURNISHED: Partly furnishe appliances onl		Funding: Transporta Catholic C	LIHTC (30 units), So RHTF, Section 202 ation to Shopping a charities Hawai'I mail 9/4/2024	? (44 units),
 1-PERSON MAXIN	10M MUI	NTHLY INCOM	1E:	4575				
2-PERSONS MAXI	IMUM MO	ONTHLY INCC	ME:	5040				

	Last Comple	te Update:	5/11/2023			AREA:	Kapolei
PROJECT NAME:	SENIOR RESID	ENCE AT I	KAPOLEI	1 & 2		PROJECT TYPE:	Elderly
ADDRESS:	91-1034 Namahoe St.					PHONE: 808-674	l-2937
OITV		OTATE III	710			FAX: 674-293	38
CITY:	Kapolei	STATE: HI	ZIP:	96707		,	
MANAGER	t: Cat Suan, Resident Ma	nager		APPLY ADD 1055 Kalo Pl	RESS: ace Ste 103 F	lonolulu, HI	OUT-OF-STATE
APPLY TO): Bob Tanaka Inc.			96826			APPLICATION ACCEPTED: YES
APPLY ATTN	l: Ext 24						120
APPLY PHONE	: 808-949-4111			FAX : 949-7211	EMAIL:		
Unit	Type: Number	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	KEINI.	Required:	SQF1.	of People	People:	Allowed:
	Bdrm: 79	0		463-500	1	3	
Two	Bdrm:			1.00 000			
Three	Bdrm:						
Four	Bdrm:						NO
60 unit @ 30% AN Namahoe St. 20 91-1098 Namahoe Gross maximum r income (if qualifie	NT IS 30% OF INCOME: MGI at Kapolei 1 - 91-102 units @ 50% AMGI at Kap e St. ent: \$725/778 month or 3 d) Monthly amount is Su	polei 2 -		LUDED: \$88/ utility allowance \$87/utility allowance		TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE	(Months): 36 AIT LIST
AGE CRITERIA:	Tionodi = 1 monthic ron	•				TO REMAIN ON W	, , ,
	Caregiver allowed with M	F	WAITLIS PARKING INFO	1.1.5	PET INFO:	CALL EVERY	
	ASSET LIMITS:		Ü				
	DENTIAL PROPERTY:	NO			GENERAL		
	O: wn a majority interest in re	esidential 📗	EASE:		Opened 6/2 HUD PRAC	2009 C 202 RHTF	
real estate.			One-year		property, o fans. Acce	s include: screen d n bus route, laundr ss to the recreation	ry room, ceiling n center w/pool
INCOME CRITER		200.000			(not on-site	e; about a 10 minut	e walk).
30% of AMI: 1 per 50% of AMI: 1 per	son \$25,400; 2 persons \$ son \$45,750; 2 persons \$	529,000 F 552,250 F	FURNISHED:		1	al conviction = ineli se in Sept. 2024, O	
1-PERSON MAXIN	IUM MONTHLY INCOME	:	3812		Į.		

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	Last	Complete Update	5/10/2023			AREA:	Wahiawa
PROJECT NAME:	SILVERCE	REST				PROJECT TYPE:	Elderly
ADDRESS:	520 Pine St.					PHONE: 808-622	2-2785
CITY:) Wahiawa	STATE:	HI ZIP:	96786		FAX: 621-778	31
MANAGER	t: Lisa Esteron - I	Property Manager		APPLY ADDRESS: On-Site #116			OUT-OF-STATE
APPLY TO):						APPLICATION ACCEPTED: YES
APPLY ATTN	l:						ILS
APPLY PHONE	:: 808-622-2785			FAX: 621-7781	EMAIL:	https://hawaiisilverorg/	crest.salvationarmy.d
Unit	Type: Numb of UNI		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 78	0	NO	500	1	3	YES
Two	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						NO
RENT INFO: RE 30% of Adjusted In After application is sent. ALL HAP WORKE ON THE APPLICA AGE CRITERIA: Head of Househol (companion) 18+,	ncome s received, a conf ERS MUST STAT ATION d must be 62+. S minor children all	irmation letter is E THEIR NAME pouse lowed if HOH has	utility allowand	, Trash Removal, \$6 ce. IST FOR PARKING	S:	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 24 AIT LIST (Months): 36 /AITLIST (Months): 6
legal custody. Ad over 18 allowed.	ult children not al	lowed. Caregiver	PARKING INF	O: YES ded if available.	PET INFO 1 animal	; F	PETS OK: YES
	DENTIAL PROPE	MITS: NONE		parking in outside	GENERAL	. INFO:	
ASSET LIMIT INF	0:		LEASE:		Any convi denial (ap	ction in the last 7 yes	ears will result in
			1 year; Recert	tification	and sex o	iffenses will result in s of time. ccept any evictions/	automatic denial -
INCOME CRITER						995; Funding: Secti ommunity room, Lar	
Maximum Annual Income: changes per HUD			FURNISHED: Refrigerator, s	stove, carpet, blinds	Laundry F Applicatio Send requenvelope		t to mail it ssed stamped
T-PERSON MAXIM	IUM MONTHLY II	NCOME:			16		·

	Last Compl	ete Update:	5/17/2023			AREA:	Chinatown
PROJECT NAME: SMI	TH BERET	ANIA				PROJECT TYPE:	Family
ADDRESS: 1170 N	luuanu Ave.					PHONE: 808-52	1-6486
CITY: Honolu	ılu	STATE: HI	ZIP:	96817		FAX : 531-660	05
MANAGER: Ko No	orasing-Yun			APPLY ADI			OUT-OF-STATE
APPLY TO: Indigo	Real Estate Se	vices, Inc.					APPLICATION ACCEPTED:
APPLY ATTN:	***WAITLIST (CLOSED SINCE	2018***				
APPLY PHONE: 808-5	21-6486			FAX: 531-6605	EMAIL:	https://www.smithb	eretania.com/
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:	82	0	NO	548	1	2	YES
Two Bdrm:	82	0	NO	719	2	4	YES
Three Bdrm:							
Four Bdrm:							NO
RENT INFO: RENT IS 3 No action required unless timely response to comm	updating contac	t info or in	UTILITIES INCL Water	ODED:		MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA:	on 19 years or al	dor				TO REMAIN ON W	
Head of household must l	be to years or or		WAITLIS PARKING INFO	T FOR PARKING:	PET INFO:		PETS OK: NO
			Parking include		121 1141 0.		2.0 0.0 100
	ASSET LIMITS:]		
AN OWN RESIDENTIA ASSET LIMIT INFO:	L PROPERTY:				GENERAL Accepts no	INFO:	when announced
			LEASE: 1 year		Two weeks	s after announcement ated and accepted	ent, applications
						performed to selec	ct applicant's # for
INCOME CRITERIA:					the waitlist		
Maximum Annual Income 2 persons - \$41,850; 3 pe 4 persons - \$52,300; 5 pe 6 persons - \$60,700; 7 pe 8 persons - \$69,050	rsons - \$47,100; rsons - \$56,500;	·	FURNISHED: Partly furnished appliances only		Funding: 8	Section 8 100%	
 1-PERSON MAXIMUM MC	ONTHLY INCOME	 E:	3517]		
2-PERSONS MAXIMUM M	ONTHLY INCOM	ΛΕ:	4017				

	Last Comp	lete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	SPENCER HO	USF (HPH	Δ-hon) - N	OT ACCEPTIN	IG A	7.11.27.11	Family
	1035 Spencer St.		A HOH) IN	OT ACCEL TH		PHONE: 808-586	1 .
						FAX: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96822		100000	-
MANAGER	: Sol Sentous			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AF	PPLICATIONS		Honolulu, HI		CATIONS	APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications off NOT ACCEPTING AF				EMAII - k	anh aigh arafam (a).	NO
APPLY PHONE	: 808-832-5961			FAX : 832-3461	EWAIL: 1	nphaishereforyou.o	9
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Two E		0					YES
Three E		0		798	3	8	YES
RENT INFO: REI	NT IS 30% OF INCOME	E: YES	UTILITIES INC	CLUDED:		ТОТА	L UNITS: 17
Minimum Rent: \$0	for Federal Low Incom 8/2/2016*****	e projects	Water and gas electricity	s + allowance for		MINIMUM WA	AIT LIST (Months): 36
			<u> </u>			MAXIMUM WA ESTIMATE (_
AGE CRITERIA: Head of household	d must be 18 years or o	lder	WAITL	IST FOR PARKING:	-	TO REMAIN ON W CALL EVERY	
			PARKING INF	O: NO	PET INFO:	Pimals ok, but only c	ETS OK: YES
,	ASSET LIMITS:	NONE			the categor	ies listed below: nder 25 lbs) or cat	ine from each of
	DENTIAL PROPERTY:	NO			GENERAL I		
Cannot own a hou			LEASE: 1 year			NCES: Domestic V n transitional shelte	
					Funding: F	ed Low Inc Pub Hs	ing 100%
INCOME CRITERI						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				
	IUM MONTHLY INCOM		4570				

	Last Comp	lete Update:	6/7/2023			AREA:	Mililani
PROJECT NAME:	THE COURTY	ARDS AT M	ILILANI N	IAUKA		PROJECT TYPE:	Family
ADDRESS:	95-1015 Koolani Dr.					PHONE : (808)-5	89-1845
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 626-94	56
MANAGER	R: Tiffany Gates, Reside	ent Manager		APPLY ADD		05 1015	OUT-OF-STATE
APPLY TO	: The Courtyards at Mi	liani Mauka			agement Office Mililani, HI 967		APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	E: (808)-589-1845			FAX : 626-9456		nttp://www.location ble-rentals.aspx	srentals.com/afforda
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
		070	2.25xRent	626			
		979	2.25xRent	636			
Three		1319	2.25xRent	1068			
	Bdrm:	1319					YES
AGE CRITERIA:	d must be 18 years or c		Water			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON V CALL EVERY	(Months): 24 /AIT LIST (Months): 36 VAITLIST
Ticad of flouseflow	a must be 10 years or e		WAITL PARKING INF	O: NO	PET INFO:		PETS OK: NO
	ASSET LIMITS:		1 stall include	d; Max 2 stalls, but d to have 2nd stall,			i i i i i i i i i i i i i i i i i i i
AN OWN RESI	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF	O: jority interest in resident	tal I	_EASE:		LIHTC		
properties.	jenty interest in resident		1 year		Accepts Se	ection 8 & Rent Su	ipplement
INCOME CRITER	IA:					i: from website m manager's office	e
	rson \$55,020; 2 persons 4 persons \$78,600		FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIN	IUM MONTHLY INCOM	IE:	4585				

Last Complete Update:	3/3/2020			AREA	Kalihi
PROJECT NAME: THE TOWERS AT KUH	IO PARK			PROJECT TYPE	Family
ADDRESS: 1475 Linapuni St.				PHONE: 808-88	8-2816
CITY: Honolulu STATE: H	II ZIP:	96819		FAX: 888-06	31
MANAGER: Andrew Kopecky, Manager -Tower Tyrone Colding, Manager -Tower B-		APPLY AD on-site	DRESS:		OUT-OF-STATI
APPLY TO: The Michaels Organization					APPLICATION ACCEPTED:
APPLY ATTN:					YES
APPLY PHONE : 808-888-2816		FAX: 888-0631	EMAIL:	towers@tmo.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: 1566	3280	579			
Two Bdrm: 1879	3937 4268	792			
Three Bdrm: 2172	4200	944			
Four Bdrm:					
RENT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 555
Rent listed is for Tax Credit units (58). Apply directly to The Towers at Kuhio Park for market units.	Water, electric	ity and gas		MINIMUM W	Į.
Subsidized units - apply via Hawaiʻi Public Housing				ESTIMATE	(Months): 0
Authority	ļ			MAXIMUM W ESTIMATE	
AGE CRITERIA:				TO REMAIN ON V	
Head of household must be 18 years or older	WAITLI	IST FOR PARKING:		CALL EVERY	(Months):
	PARKING INFO		PET INFO:		PETS OK: NO
ASSET LIMITS:		ed. Each unit has stalls. Parking is			
AN OWN RESIDENTIAL PROPERTY: UNKNOW			GENERAL	INFO:	
ASSET LIMIT INFO: If asset generates income, then it is counted toward	LEASE:		Newly rend Fitness ce		
income	One-year		Social Ser City + Cou affordable	vices program for a inty Section 8 okay units	all residents on tax credit
INCOME CRITERIA:	r		24-hour m	aintenance and se	curity
2x rent	FURNISHED:		NO RESP	ONSE 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:	Emergency/Transi
ADDRESS:	2019 Vancouver Dr.					PHONE: 808-947	7-7181
CITY:	Honolulu	STATE: HI	ZIP:	96822		FAX: 944-397	76
APPLY TO	R: Chris Gerson D: Housing Solutions, In	nc.		APPLY ADE Referred by homeless sh	outreach ag	ency or	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	I: Chris Gerson			FAX: 944-3976	EMAIL	.: chris@hsiservices.i	net
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	tudio:						
	Bdrm: 25	1100		460	2	4	
	Bdrm: 8	1400		580	5	7	
Three	Bdrm:						NO
	NT IS 30% OF INCOM ; \$1400 for 2-bdrm	IE: NO	UTILITIES INC Electricity, wate disposal	LUDED: er, sewer, and refuse		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W	(Months): 6 AIT LIST (Months): 12
Adult 18+ with at or at least 6 month	least 1 minor child (18 hs pregnant	and under)		ST FOR PARKING:		CALL EVERY	
AN OWN RESIDENT ASSET LIMIT INF	ASSET LIMITS DENTIAL PROPERTY: O:		no guest parkir parking for resi	g at \$50 per 6-12 mon waitlist; ng on site. Street idents and guest st come first serve.	Homeles under 18 Head of	AL INFO: ss or at risk ss families with at lead 3 years. Household must be ween the second se	
INCOME CRITER	IA:		,		hours a		rod or in an
Less than 50% AM	MI		FURNISHED:		emerger	s = currently unshelte ncy shelter or at risk o onal Housing for Empl	of being homeless

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	11/24/202	1			AREA:	Ewa Beach
PROJECT NAME:	VILL	AGES OF	MOA'E K	U - PHA	SE I			PROJECT TYPE:	Family
ADDRESS:			_					PHONE : 808-681	-3000
			_	_				FAX: 681-300	
CITY:	Ewa Bea	ach	STATE: HI	ZIP:		96706			
MANAGER		wasaki, Mgr; Ja do, Admin Asst.		asing Agent;	Betty	APPLY AD			
400 V 70		•				91-1655 Pa Ewa Beach			OUT-OF-STATE APPLICATION
APPLY 10): EAH - '	Villages of Moa	re Ku						ACCEPTED:
APPLY ATTN	l:								YES
APPLY PHONE	: 808-68	1-3000			FAX	: 681-3004		www.eahhousing.or vmk-management@	
<u></u>				Minimu	m		MINIMUM	MAXIMUM	
Unit	Type:	Number of UNITS:	RENT:	INCOM Require	IE	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
	tudio:			Require	au.		oi reopie	r eople.	
	Bdrm:	6	986	2.5x re	_	674	1	3	
	Bdrm:	32	1175	2.5x re		797	2	5	
Three I	Bdrm:	25	1348	2.5x re	ent	1119	3	7	
Four I	Bdrm:								YES
RENT INFO: RE	NT IC 20	NO OF INCOME	: NO		INCLUDE	·D.		TOTA	L LINITC. O4
Based on 2019 M				UTILITIES Water/sew		:D.			L UNITS: 64
Change A security deposit	eguivale	ent to one month	n's rent is					MINIMUM W ESTIMATE	
required	944.74.19		. o ronk io					MAXIMUM W	AIT LIST
200/ AMI 4 unito 4	EUO/ VIVII	19 unito 60%	AMI 44	Į.				ESTIMATE	(Months):
AGE CRITERIA:	Dan a satur							TO REMAIN ON W	
18+ Multi-Family F	Property					OR PARKING:			
				PARKING		noodod"	PET INFO		PETS OK: NO
1				Assigned of basis. Cu	rent drive	rs license,	Assistance	nagement if have a se e animal	Service of
4N 0V4N DE015		SSET LIMITS:	YES	insurance, registration)	INIEO	
AN OWN RESID		PROPERTY:					GENERAL	. INFO: n Fee of \$35 per ad	ult
Depends on inpute		е		LEASE:			. ''	•	
				1 year				king property - smolon on the property, inc	
								nd/Totlot, Communit	
INCOME CRITERI							Laundry F high spee	Room, Picnic Area, d internet	Computer with
Maximum monthly annually	income	limits subject to	change	FURNISHE		rangahaad	. ` '	RHTF, LIHTC, CDE	IC NSD HOME
				blinds	א, stove, I	rangehood,	HMMF	MITE, LITTO, CDE	JO, NOF, HOWE,
							NO RESP	ONSE IN 2021	
							Update re	quest email sent on	9/5/2024
4 DEDCON MANUA	11 184 8408	ATLU V INIOCNA		4220			Į.		
1-PERSON MAXIM	IOIVI IVIOI	NITET INCOM	⊑.	4220					

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	Last Comp	lete Update:	11/24/2021			AREA:	Ewa Beach
PROJECT NAME:	VILLAGES OF	MOA'E KU	- PHASE II			PROJECT TYPE:	Family
ADDRESS:	91-1655 Pahika St.					PHONE: 808-681	-3000
CITY	F Beech	STATE: HI	ZIP:	00700		FAX: 681-300)4
CITT.	Ewa Beach	STATE. HI	ZIF.	96706			
	2: Gary Iwasaki, Mgr; Ja Mercado, Admin Asst 2: EAH - Villages of Moa		sing Agent; Betty	APPLY AD 91-1655 Pa Ewa Beach	ahika St.		OUT-OF-STATE APPLICATION
	-	i e i Ku					ACCEPTED: YES
APPLY ATTN	I :				EMAIL:	www.eahhousing.or	ra
APPLY PHONE	:: 808-681-3000		FA	X : 681-3004		g.c.	9
	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: 9	915	2.5xrent		1	3	
Two	Bdrm: 37	1082	2.5xrent		2	5	
Three I	Bdrm : 29	1245	2.5xrent		3	7	
Four	Bdrm:						YES
Max rent is around AMI % - 30/50/55 Based on 2020 M 2021 Update: Wai	NT IS 30% OF INCOME d 55% of income. TSP/VLI income limits dilist is purged annually a	and	UTILITIES INCLUI Water/sewer/trash			TOTA MINIMUM W. ESTIMATE MAXIMUM W. ESTIMATE TO REMAIN ON W. CALL EVERY	(Months): 12 AIT LIST (Months): 12
			PARKING INFO:	FOR FARRING.	PET INFO	: F	PETS OK: NO
<u> </u>	ASSET LIMITS:		Assigned on an "A basis. Current dri insurance, safety registration require	vers license, check,			·
AN OWN RESIDE	DENTIAL PROPERTY:				GENERAL An applica	INFO: ation fee of \$35 per a	adult household
Depends on inpute			LEASE: 1 year		member	ation lee of \$35 per a	addit HouseHold
INCOME CRITER Maximum monthly annually	IA: v income limits subject to	o change	FURNISHED: Refrigerator, stove	e, rangehood,	Laundry R high spee No Smoki	d/Totlot, Community toom, Picnic Area, C d internet ng on Property 4 units, 50% AMI 19	Computer with
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	blinds 4042		52 units Funding:	RHTF, LIHTC, CDB	G, HOME, HMMF
	MUM MONTHLY INCO		4620				

		Last Compl	ete Update:	3/5/2020			AREA:	Ewa Beach
PROJECT NAME:	VILL	AGES OF	MOA'E KU	- PHASE II			PROJECT TYPE:	Family
ADDRESS:				111710=11	· ·		PHONE: 808-681	1
							FAX:	-3000
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706		,	
	Mercad	wasaki, Mgr; Jar do, Admin Assis Villages of Moa'	tant	sing Agent; Betty	APPLY ADI 91-1655 Pal Ewa Beach,	hika Street		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	:: 808-68	1-3000		F	FAX: 681-3004	EMAIL:	www.eahhousing.or	g
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:		0					
One I	Bdrm:	4	996	2.5x rent	674	1	3	
Two I	Bdrm:	28	1185	2.5x rent	797	2	5	
Three I	Bdrm:	20	1361	2.5x rent	1119	3	7	
Four I	Bdrm:		0					YES
Based on 2019 MT change. 30% AMI 3 units, 5 units	TSP/VLI	Income Limits.	Subject to	UTILITIES INCLU Water/Sewer/Tra			MINIMUM W. ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 AIT LIST (Months): 0
AGE CRITERIA: 18+ Multi-Family F	Property						TO REMAIN ON W CALL EVERY	
l annual annual	Topolty			WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:	E	PETS OK: NO
	AS	SSET LIMITS:		Assigned on an 'basis. Current drinsurance, safety	rivers license, / check,		agement if have a	
AN OWN RESID	DENTIAL	. PROPERTY:		registered require	ed	GENERAL	INFO:	
ASSET LIMIT INFO		<u> </u>		LEASE:			ing property - smokon the property, inc	
						Playgroun	d/Tot lot, Communit	y Meeting Room,
INCOME CRITERI						Funding:R	HTF, LIHTC, CDBC	B, HOME, HMMF
Maximum monthly annually	income	limits subject to	change	FURNISHED: Refrigerator, storblinds	ve, rangehood,	Application Download		, , , , , , , , , , , , , , , , , , , ,
1-PERSON MAXIM				4220		J		

		Last Comp	ete Update:	6/1/2023			AREA:	Kapolei
PROJECT NAME:	VILL	AS AT A'E	LOA				PROJECT TYPE:	
				ss: 91-1130 Nam	ahoe St.)		PHONE: 808-674	I-4245
01774			07.175				FAX: 674-424	16
CITY:	Kapolei		STATE: HI	ZIP:	96707			
MANAGER	: Amand	la Mercado			APPLY A			
APPLY TO	: Location	ons LLC			91-1130 N Kapolei, H	Namahoe St. HI 96707		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Afforda	able Housing De	ept.					
APPLY PHONE	: 808-67	4-4245			FAX : 674-4246	EMAIL:	locationsrentals.cor rentals.aspx	m/affordable-
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:							
One E	3drm:	19	1100	2.25x rent	637	2	5	
Two E	Bdrm:	32	1200	2.25x rent	841	2	7	
Three E	3drm:	20	1500	2.25x rent	1068	3	9	
Four E	3drm:							YES
RENT INFO: REI Section 8 applicati income requirement Must be below 50% Minimum Income I 1 bdrm: \$2182.50-	ons are ont. % & 60% Requirent \$2322.50	exempt from the AMI nents:		UTILITIES INC			TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12
AGE CRITERIA:	<u> </u>	nn					TO REMAIN ON W	
Head of household	d must be	e 18 years or ol	der	WAITI	IST FOR PARKING	:	CALL EVERY	
				PARKING INF	O: NO	PET INFO	: F	PETS OK: NO
]	Α:	SSET LIMITS:	NONE	1 assigned pa	rking stall included			
AN OWN RESID						GENERAL	. INFO:	
ASSET LIMIT INFO	0:			LEASE:		LIHTC Fu	nding	
				1 year; then m	nonth to month	Accepts S	Section 8	
							or 60%AMI r 50% AMI	
INCOME CRITERI		0. 2 noroono 45	2.250.2	FUDNICUED.			Monthly Income be	elow based on 60%
50% AMI: 1 person persons \$58,800, 4 60% AMI: 1 person persons \$70,560, \$84,660, 6 persons	4 person n \$54,90 4 persor	s \$65,300, 0, 2 persons \$6 ns \$78,360, 5 p	52,700, 3	FURNISHED: Partly furnishe appliances on			n: d from website om manager's office)
						NO RESP	ONSE IN 2021	
1-PERSON MAXIM				4220 4820				

	Last Comp	lete Update:	6/7/2023			AREA:	Kapolei
PROJECT NAME:	VILLAS AT MA	ALU'OHAI				PROJECT TYPE:	Family
ADDRESS:	91-1025 Kaiau Ave.					PHONE: 808-888	3-2377
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 808-888	3-2297
	d: Natasha James, Prop Indigo Real Estate D: Villas at Malu'Ohai	perty Manager		APPLY ADI 91-1025 Ka Kapolei, HI	iau Ave		OUT-OF-STATE APPLICATION ACCEPTED: YES
	: Resident Manager :: 808-943-9314			FAX: 946-0572	EMAIL:	manager@villasatn	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Two	Bdrm: 55	1112	2.25xrent	713	2	5	
Three	Bdrm: 16	1329	2.25xrent	940	3	7	NO
Minimum income voucher. Credit ev tenants. Tenants	NT IS 30% OF INCOM requirements waived wireleast waited will be done for must have good landlorneet minimum criminal	th Sec 8 r all d	UTILITIES INC water, sewer			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 24 AIT LIST (Months): 4 /AITLIST
			PARKING INFO	ST FOR PARKING: D: NO earking stalls per	PET INFO	nimals allowed with	PETS OK: NO
AN OWN RESII	ASSET LIMITS: DENTIAL PROPERTY:		dint		GENERAL		
ASSET LIMIT INF Applicant cannot of properties	O: own a majority interest i	n residential	LEASE:	to month	shopping. Application	Room, air conditionir , schools and recrea on: utside of building ne	tion center.
3 persons \$58,800 60% AMI: 1 perso 3 persons: \$70,56 5 persons: \$84,66	IA: n \$45,750; 2 persons \$ 0; 4 persons \$65,300 n: \$54,900; 2 persons: 0; 4 persons: \$78,360 0; 6 persons: \$90,900 0; 8 persons: \$103,440	\$62,700	FURNISHED: Partly furnished appliances only			Maangement has ch tte 9/5/2024, no long	
 1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4575		J		

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		Last Comp	olete Update:	9/5/2024			AREA:	Liliha	
PROJECT NAME:	WAE	NA APAR	TMENTS				PROJECT TYPE:	Family	
ADDRESS:	1320 Aa	ala St.					PHONE: 808-550	0-0440	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 525-68	11	
MANAGER		ne Dietp, Prop ged by Douglas			APPLY AD	St.		OUT-OF-STATE	
APPLY TO): WAEN	IA APARTMEN	ITS		Honolulu, F	11 96817		APPLICATION ACCEPTED: YES	
APPLY ATTN	٧:							123	
APPLY PHONE	E: 808-55	50-0440		EMA FAX: 525-6811			L: weana@douglasemmett.com		
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm:	60	2050	2.5x rent	543	1	3		
Two	Bdrm:	196	2350	2.5x rent	745	1	5		
Three	Bdrm:	157	2700	2.5x rent	823	1	7		
Four	Bdrm:	55	2900	2.5x rent	1046	1	9	NO	
RENT INFO: RE Rent subject to ch market value. The 9/52024	nange on	a daily basis d	ue to	water, sewer, t			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 1	
AGE CRITERIA:							TO REMAIN ON V	_	
Head of Househo	ld 18+			WAITLI	ST FOR PARKING:		CALL EVERY		
				PARKING INFO	,	PET INFO		PETS OK: NO	
]	A	SSET LIMITS:	NONE	1 stall included	1	Service a document	nimals are allowed vation.	vith proper	
AN OWN RESI		PROPERTY:	NO			GENERAL	_ INFO:		
ASSET LIMIT INF	O:			LEASE:		NO RESE	PONSE IN 2023		
				1 year, month	to month		nanagement for apll ning application.	ication, there is a	
INCOME CRITER	IA:						n contact via text, ca onsive they will be re		
Max income limits	s - 140%	AMI		FURNISHED: Major applianc	es only				
1-PERSON MAXIN	MUM MOI	NTHLY INCOM	1E:	7828					
2-PERSONS MAX	IMUM M	ONTHLY INCO	ME:	8948					

	Last C	Complete Update:	12/15/2021			AREA:	Wahiawa
PROJECT NAME:	WAHIAWA	TERRACE (H	IPHA-cen)	- NOT ACCEP	PTIN	PROJECT TYPE:	Family
	337 Palm St.	•				PHONE: 808-622	2-6360
	<u> </u>					FAX: 622-636	
CITY:	Wahiawa	STATE: HI	ZIP:	96786			
MANAGER	: Jimary Quinones	S		APPLY ADD	DRESS:		
				1002 North			OUT-OF-STATE
APPLY TO		IO ADDI IOATIONO		Honolulu, HI NOT ACCEF	1 96817 PTING APPLI	CATIONS	APPLICATION ACCEPTED:
		NG APPLICATIONS					NO
APPLY ATTN	 Oahu application NOT ACCEPTIN 	ns office NG APPLICATIONS					
APPLY PHONE	· 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	org
ATTENTIONE	000 002 0001			TAX. 002 0401			
Unit	Type: Numbe	r	Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNIT		INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
s	tudio:	_					
				547			YES
	Bdrm: 12	0		547	1	4	
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 ********CLOSED	for Federal Low I		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMUM W	(Months): 36
A OF ODITEDIA			ļr.			ESTIMATE	
AGE CRITERIA: Head of household	d must be 18 years	s or older				TO REMAIN ON W	
Tiedd of Household	a must be no year.	o or older		IST FOR PARKING:	DET INCO		
			PARKING INF	0:	PET INFO	nimals ok, but only o	PETS OK: YES
,	ASSET LIM	MITS: NONE			the catego	ories listed below: under 25 lbs) or_cat	
AN OWN RESID	DENTIAL PROPER	RTY: NO			GENERAL	. INFO:	
ASSET LIMIT INFO			LEASE:			ENCES: Domestic V	
Cannot own a hou	se on Oahu		1 year		displaced		ers, involuntary
					Fundina: I	Fed Low Inc Pub Hs	sina 100%
1			1		All convio	tions must be 2 um	aga unlaga itla
INCOME CRITERI			FUDNICUED.			tions must be 3 yrs ethamphetamine or	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 person 00; 3 persons - \$6; 00; 5 persons - \$8; 00; 7 persons - \$9;	8,500; 2,200;	FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIM	IUM MONTHLY IN	ICOME:	4570		-		
2-PERSONS MAXI	MUM MONTHI Y I	NCOME:	5220				

	Last Comple	te Update:	12/15/2021			AREA:	Waianae
PROJECT NAME:	WAIMAHA/SUN	FLOWER	(HPHA-le	e) - CLOSED	F	PROJECT TYPE:	Family
	85-186 McArthur St.		•			PHONE: 808-697	7-7171
						FAX: 697-717	74
CITY:	Waianae	STATE: HI	ZIP:	96792		•	
MANAGER	: Mandy Miyamoto			APPLY ADD			
				1002 North S Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA				PTING APPLICA	ATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications office	9					NO
					EMAIL: hr	ohaishereforyou.c	ora
APPLY PHONE	: 808-832-5961			FAX: 832-3461			9
			Minimum		MINIMUM	MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
	OI OINITS.	IXENT.	Required:	3011.	of People	People:	Allowed.
S	tudio:						
One I	Bdrm: 52	0		513	1	4	YES
Two I	Bdrm: 46	0		650	2	6	YES
Three I	Bdrm: 32	0		991	3	8	YES
Four I	Bdrm:						
, ,				,			
RENT INFO: RE	NT IS 30% OF INCOME:	YES	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 130
Minimum Rent: \$5	0 for Federal Low Income	projects	Water and allo	wance for electricity		MINIMUM W	AIT LIST
Security Deposit is	s equal to rent amount					ESTIMATE	(Months): 36
*******WL CLOS	ED 8/2/2016*****					MAXIMUM W	(0.0 11)
P.	o communication by project	t ic	lt.			ESTIMATE	
AGE CRITERIA:	d must be 18 years or olde	er			Т	O REMAIN ON W CALL EVERY	
Ticad of flousefloid	a must be to years or old	GI .		IST FOR PARKING:	DET INICO		
			PARKING INF	0:	PET INFO: Subject to a		PETS OK: YES
1			Iniciaaca		Dubject to a	pprovar	
AN 004/N DE015	ASSET LIMITS:) OENEDAL IN	150	
AN OWN RESIL	DENTIAL PROPERTY: IN	NO			GENERAL IN	NFO: ICES: Domestic \	/iolence victims:
			LEASE:		homeless in	transitional shelt	
			1 year		displaced.		
					Funding: Fe	d Low Inc Pub Hs	sing 100%
INCOME CRITERI	IA:					ns must be 3 yrs amphetamine or	
ncome Eligibility =	: 80% of AMI Income: 1 person - \$53,2	50.	FURNISHED:		Crystal motil	amprictamine of	3CX Officials
2 persons - \$60,90	00; 3 persons - \$68,500;	50,	Partly furnishe appliances on				
6 persons - \$88,30	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		''				
8 persons - \$100,4	450						
J]		
1-PERSON MAXIM	IUM MONTHLY INCOME:		4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

		Last Comple	ete Update:	9/6/2024				AREA:	Waimanalo
PROJECT NAME:	WAIN	<u>ΛΑΝΔΙ Ω Δ</u>	PARTME	NTS				PROJECT TYPE:	Family
		Hihimanu St.	FARTIVIL	INIO					1 '
ADDITEOU.	41-343	i ili ilinanu St.						PHONE: 808-259	
CITY:	Waimar	nalo	STATE: HI	ZIP:		96795		PAX. 259-970	J3
	Cambr	it the moment, R ridge Manageme	nt Inc.	ger		APPLY AD 41-545 Hihi Hawaii 9679	manu Street, V	Vaimanalo,	OUT-OF-STATE APPLICATION
		analo Apartment	8						ACCEPTED: YES
APPLY ATTN	l:								
APPLY PHONE	: 808-25	59-5649			FAX:	259-9705		waimanalo@cmi.ne waimanaloapartme	
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:								V50
	Bdrm:	37	1566	2.5xrent	<u> </u>	576	1	3	YES
	Bdrm:	28	1879	2.5xrent		720	2	5	YES
Three I	Bdrm:	8	2172	2.5xrent	<u> </u>	864	3	7	YES
Four	Bdrm:	2	2422	2.5x rent		1134	4	9	YES
RENT INFO: RE Rent range - 1 bdrm - \$1093 - \$ 2 bdrm - \$1312 - \$ 3 bdrm - \$1516 - \$ 4 bdrm - \$1691 - \$	\$1312 \$1575 \$1819, 2	bath	NO	UTILITIES INC Electricity and charge			tra	TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 3
AGE CRITERIA: Head of household	d must be	o 19 voore or old	lor					TO REMAIN ON W CALL EVERY	
l lead of flousefloid	u must bi	e 10 years or or	iei	WAITL PARKING INF		R PARKING:	PET INFO:		PETS OK: NO
		P		Parking include parking spots	ded, 12 (PET INFO.	<u> </u>	LTS OK. INO
AN OWN RESI		SSET LIMITS:					JENERAL	INFO:	
ASSET LIMIT INF				LEASE:			Project do are filled o Barbecue	es not maintain a w in a first-come, first- area, on bus line	serve basis.
							1	·	
Maximum Annual 2 persons - \$62,88 4 persons - \$78,60 60% AMI, follows	Income: 80; 3 pers	sons - \$70,740;)20;	FURNISHED: Partly furnishe appliances on	edmajo	or	Application Ask mana Send requenvelope Pick up fro	mt by Cambridge M n: gement to mail it lest with self-addres om manager's office nrough waimanaloa	ssed stamped
1-PERSON MAXIM	10M MUI	NTHLY INCOME	::	4585			ja.		
2-PERSONS MAXI	мим мо	ONTHLY INCOM	IE:	5240					

Last	Complete Update:	10/16/2023			AREA:	Waimanalo
PROJECT NAME: Waimanal	o Emergency	Shelter; pro	<mark>eviously Wei</mark>	<mark>nber</mark>	PROJECT TYPE:	Emergency
ADDRESS: 41-490 Saddle 0	Dity Rd.				PHONE: 808-204	l-0982
CITY: Waimanalo	STATE: HI	ZIP:	96795		FAX : 744-061	6
Waimanaio	OTATE: IT	2	90793			
MANAGER: Destiny, Site M	lanager		APPLY ADI	DRESS:		0117.05.07475
APPLY TO:						OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:						NO
APPLY PHONE : 204-0982			FAX: 744-0616	EMAIL:	www.kahumana.org	
Unit Type: Numb		Minimum INCOME	00.57	MINIMUM Number	MAXIMUM Number of	CAREGIVER
of UNI	TS: RENT:	Required:	SQ FT:	of People	People:	Allowed:
Studio: 8 One Bdrm: 8	_		180	2	4	
One Bdrm: 8 Two Bdrm: 7			420	3	6	
Three Bdrm: 7			950	5	10	
Four Bdrm:						NO
RENT INFO: RENT IS 30% OF IN Emergency Shelter 30%; cap \$250/mon	ICOME: YES	UTILITIES INCI	LUDED:		TOTA MINIMUM W. ESTIMATE MAXIMUM W ESTIMATE	(Months): 0
AGE CRITERIA:					TO REMAIN ON W	/AITLIST
18yo		WAITLIS	ST FOR PARKING:		CALL EVERY	
		PARKING INFO	D:	PET INFO	fied with documenta	PETS OK: NO
ASSET LI AN OWN RESIDENTIAL PROPE				GENERAL		uon
ASSET LIMIT INFO:		LEASE:		Must part	icipate in programs	as determined by
		Program agree	ment: 90 Days	Playgrour Must follo	nd on site. ow Program Rules. villing to work if not c	disabled.
INCOME CRITERIA:						
None		FURNISHED: Stove, refrigera	ator, no carpet.			
		inflatable mattr				
T-PERSON MAXIMUM MONTHLY I	NCOME.]		

	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	n School St. HI 96817 EPTING APPLIC	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
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 Comp	olete Update:	9/6/2024			AREA:	Waipahu
PROJECT NAME:	WAIPAHU HAI	LL ELDEF	RLY			PROJECT TYPE:	Elderly
ADDRESS:	94-1060 Waipahu St.					PHONE : 808-671	-3801
01774	<u> </u>					FAX: 680-045	56
CITY:	Waipahu	STATE: H	ZIP:	96797		•	
	t: Collette Sanchez, Se Kelsey Chalmers, As: b: Cambridge Managem	sistant Commu		APPLY AE Waipahu H 94-1060 W Waipahu, I On-site dro	Hall Vaipahu St., Offic HI 96797	ce	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 808-671-3801			FAX: 680-0456		waipahu@cmiweb. https://www.waipah	
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: 72	0		636	1	3	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						NO
Max rent \$2027; n	NT IS 30% OF INCOMI o application fee.	E: YES	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 18 AIT LIST (Months): 24
Head of household	d must be 62 years or o	older, or				TO REMAIN ON W CALL EVERY	
disabled. Other m	nembers of the househo Idren, siblings, or friend	old may be	WAITL PARKING INF	IST FOR PARKING O: YES	PET INFO:	F	PETS OK: YES
of age and older.			Parking includ	ed		s;\$300 pet deposit	
	ASSET LIMITS:	NONE			CXCCPIIONS	and ver eneck rec	juned
	DENTIAL PROPERTY:	NO			GENERAL		
	ts cannot put househole . Asset limits are expec		LEASE: 1 year, then m	onth-to-month	Bbq Area & Recreation A gated co On-site ma	nter & social activi k lush landscaping room with tv mmunity on busling langement room system	
INCOME CRITERI	IA:				Recycling	orogram	vailable through
	income: 1 person - \$48 ; 3 persons - \$62,650	,750; 2	FURNISHED: Partly furnishe appliances on floor, tub show	ly, laminate tile	Catholic Cl Application Request by Ask Manag	tion to Shopping an narities Hawai'l :: / email waipahu@o gement to mail it m Manager's office	emiweb.net
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4062				

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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 flousefloid 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:	RIY: 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 Comple	ete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIPAHU II (HF	PHA-lee) -	NOT ACC	EPTING APP	S		Family
	94-132 Pupupuhi St.					PHONE: 808-483	3-2550
						FAX: 483-255	
CITY:	Waipahu	STATE: HI	ZIP:	96797		,	
MANAGER	: Marcus Asami			APPLY ADD	RESS:		
				1002 North S Honolulu, HI			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING APF	PLICATIONS			PTING APPLIC	CATIONS	ACCEPTED:
APPI Y ATTN	: Oahu applications office						NO
	NOT ACCEPTING APP				EMAII - F	nphaishereforyou.o	ra
APPLY PHONE	: 808-832-5961			FAX : 832-3461	LINAL	ipriaisricicioryou.o	19
				-			
Unit	Type: Number	DENT.	Minimum INCOME	CO. F.T.	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:						
One I	Bdrm:						
Two I	Bdrm: 16	0		635	2	6	YES
Three I	Bdrm: 4	0		822	3	8	YES
Four I	Bdrm:						
			,			,	
RENT INFO: RE	NT IS 30% OF INCOME:	YES	UTILITIES INC	CLUDED:		ТОТА	L UNITS: 20
Minimum Rent: \$0	for Federal Low Income	projects	Electricity and	water		MINIMUM W	AIT LIST
******** CLOSED	8/2/2016*****					ESTIMATE	
						MAXIMUM W	
J.			Į.			ESTIMATE	(Months): 60
AGE CRITERIA:	d must be 18 years or old	or			•	TO REMAIN ON W CALL EVERY	
Tieau oi fiousefioid	a must be to years or old	GI		IST FOR PARKING:	DET INIEO		
			PARKING INF	0:	PET INFO:	imals ok, but only o	PETS OK: YES
1			Iniciaaca		the categor	ries listed below:	
AN 004AL DE015	ASSET LIMITS:				,	nder 25 lbs) or cat	
AN OWN RESIL	DENTIAL PROPERTY: I O·	NO			GENERAL	NCES: Domestic V	/iolence victims:
Cannot own a hou			LEASE:		homeless i	n transitional shelte	
			1 year		displaced.		
					Funding: F	ed Low Inc Pub Hs	sing 100%
INCOME CRITERI	IA:					ons must be 3 yrs a	
ncome Eligibility =	: 80% of AMI Income: 1 person - \$53,2	50.	FURNISHED:		Crystar met	mamphetamme or s	Sex offerider
2 persons - \$60,90	00; 3 persons - \$68,500;	50,	Partly furnishe appliances on				
	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;						
8 persons - \$100,4	450						
J					<u> </u>		
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	F:	5220				

	Last Compl	ete Update:	10/16/2023			AREA:	Waipahu
PROJECT NAME:	WAIPAHU TOV	VERS			ı	PROJECT TYPE:	Family
ADDRESS:	94-337 Pupumomi St.					PHONE: 808-75	3-9440
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX:	
MANAGER	R: Sonja Tupua			APPLY ADD	DRESS: ae Avenue, Suite	200	OUT-OF-STAT
APPLY TO	D: Mark Development, In-	c.		Honolulu, HI		s 200	APPLICATION ACCEPTED:
APPLY ATTI	N:						YES
APPLY PHONE	E: 808-735-9099			FAX: (781)295-342	.7 ei		waii.com/waipahuto
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 2	0	<u> </u>	482	1	4	
	Bdrm: 62	0		684	2	6	YES
Three	Bdrm:						
Four	Bdrm:						YES
30% of household	ENT IS 30% OF INCOME		TILITIES INC			MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
AGE CRITERIA:		Į.			Т	ESTIMATE O REMAIN ON V	
Head of househol	ld must be 18 years or old	der	WAITLI	ST FOR PARKING:		CALL EVERY	
			ARKING INFo		PET INFO:	ation considered f	PETS OK: NO
	ASSET LIMITS:			rge for additional	service anim		or vermable
	DENTIAL PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INF	FO:		EASE:		Amenities: I Laundry Ro	Recreation Area, om	Playground,
			year		Funding: Pr	oject based Sec	3
INCOME CRITER	214.				Credit & Cri	minal checks	
Maximum Annual 2 persons - \$48,2	Income: 1 person - \$42, 200; 3 persons - \$54,350; 250; 5 persons - \$65,100	F	URNISHED: Partly furnishe ppliances onl			https://www.mdih c up from manage	awaii.com/waipahut er's office
-PERSON MAXIN	MUM MONTHLY INCOME	≣: 3	516]		
-PERSONS MAX	IMUM MONTHLY INCOM	ИЕ: 4	016				

		Last Comp	lete Update:	9/6/2024			ARE.	Moilili
PROJECT NAME:	WEIN	IBERG H	ALE				PROJECT TYPE	Singles or Couple
ADDRESS:	2734 S.	King St.					PHONE : 808-94	46-6953
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX : 973-0	605
MANAGER	t: Ruel A	benjar; Propert	y Manager		APPLY ADI			
APPLY TO): Housin	ng Solutions, In	c.		Referral fror 2734 S. Kin	n case manage g St.	er	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 946-69	953			FAX : 973-0605	EMAIL: r	uel@hsiservices	net
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	60	1250		266	1	2	
One I	Bdrm:							
	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							
Security Deposit \$ Section 8 accepte Shelter + Care pro or other housing v	d ogram			All utilities incl	uded		MAXIMUM \	(Months): 1
AGE CRITERIA:							TO REMAIN ON	
Head of household	d must be	e 18 years or o	lder	WAITL	IST FOR PARKING:		CALL EVER	
				PARKING INF		PET INFO:		PETS OK: YES
]	AS	SSET LIMITS:	NONE	pre approved guest parking		Under 25 p	ounds; limit 1 pe	unit
AN OWN RESID		PROPERTY:	NO	between 7am	to10pm.	GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE: Month to month the situation	th; dependent on	Funding: Shelter + C Funding: F		Section 8 100%
INCOME CRITER	ι Λ -					Ask manag	gement to mail it est with self-addro	essed stamped
Follows state guid limit.		nd 60% AMI ma	ax income	FURNISHED: No carpet, full microwave, ar	size refrigerator,	envelope Pick up fro	m manager's officest to maretta@h	pe .
				cabinet, kitche	enette			per Chris Gerson, nted in August 2024
I 1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4230		Į.		
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	4835				

	Last Comp	lete Update:	9/6/2024			AREA:	Lanakila
PROJECT NAME:	WEINBERG SE	NIOR RES	SIDENCE	AT MALUHIA		PROJECT TYPE:	Elderly
ADDRESS:	1111 Hala Dr.					PHONE: 808-842	2-1082
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 843-015	57
	Tionolaid	1		30017			
MANAGER	: Canary McClinton, Re	sident Manager		APPLY ADI		2	OUT OF STATE
APPLY TO	: Bob Tanaka, Inc.			Honolulu, H	Place, Suite 10 I 96826	3	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 808-949-4111			FAX : 949-7211		https://www.pacific- residence-at-maluh	housing.org/senior- ia
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: 39	965		400+	1	3	YES
	Bdrm:						
Three I	Bdrm:						NO
Preference is no lo frail (needing help living eg: eating, d	NT IS 30% OF INCOME onger given to applicants with at least 3 activities lressing, shopping, etc.) sit equal to 1 months rerer)	s who are of daily Minimum	UTILITIES IN Water, \$114	CLUDED: utility allowance		TOTA MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 12 AIT LIST
AGE CRITERIA:						TO REMAIN ON W	, , ,
	d and co-tenants must b application. Caregiver n		PARKING INI	LIST FOR PARKING: FO: YES ded but limited	PET INFO:	CALL EVERY	
	ASSET LIMITS:	NONE					
	DENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO Must not wholly ov real estate.	O: wn a majority interest in	residential	LEASE: 1 year; month	h to month	accessible shoot and lanai areas allowed wi	nower and closet, when, community center laundry room on eas, storage lockers. (ith MD letter; can weakley leads to be a locker to be a locke	Lounge, trash ach floor. Covered Caregivers are ork outside home
INCOME CRITERI MUST BE LESS T (Project follows HI				erator, garbage ly furnishedexcept pet and vinyl	site mana Full-time A	there's other care figer, interior landsca Activity Coordinator; HUD PRAC 202	aped courtyard.
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	3821				

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	Last Cor	mplete Update:	9/6/2024			AREA:	Ewa
PROJECT NAME:	WEST LOCH	ELDERLY	VILLAGE		PR		Elderly
l l	91-1472 Renton Rd				PH	ONE: 808-681	-0562
						FAX: 681-414	
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		001 111	
APPLY TO	: Koaneti Lauaki - R Lisa Oasay - Proje : Hawaii Affordable I	ct Admin Assistant		APPLY ADD 91-1472 Rer 96706	DRESS: nton Road, Ewa Be	each, Hi	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	•			FAX : 681-4140		netil@hawaiiaffo lbetho@hawaiia	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio: 90	865	2x rent	556	1	2	YES
One E	3drm: 60	940	2x rent	686	1	3	YES
Two E	Bdrm:						
Three E							NO
No application fee. Limited number of check with manage	subsidies available ement company. ery 6 months; applica	(max of \$170)	Gas (for stove water	LUDED: and water heater) and	d	MINIMUM WA	(Months): 12
AGE CRITERIA:			je.		TO	ESTIMATE (REMAIN ON W	, I
All residents must	be 62 years or older or disabled persons		WAITLI PARKING INFO	ST FOR PARKING: D: YES		CALL EVERY	
	ASSET LIMIT DENTIAL PROPERT		\$10/month are total of 53 Stalls assigned first serve and	There parking stalls.	1 cat, birds, fis Reg. w/ mgmt	h, or 1 dog und & vets "clean bi	er 30 pounds.
ASSET LIMIT INFO	O:		LEASE:		Caregivers are	allowed with M	D letter. Studio
income.	n assets puts applica		1 year		Funding: Partic Asst Prgm and Recreation hal	l Sec. 8 and Re	ity Housing Rntl nt Supplmnt Prgm ecurity; Resident
INCOME CRITERI			ELIDNICUED.		Shopping avail Hawaii; opene	able through Ca d 1993; no eleva	atholic Charities
Maximum Annual 1 person - \$55,000 2 persons - \$62,88 *60% AMI);		Partly furnishe appliances onl stove, 1 bdrm fan, bathtub		walk-up, lanais 10 Handicap A	s ccessible Units	
1-PERSON MAXIM	UM MONTHLY INCO	DME:	4583		<u> </u>		

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	Last Comp	lete Update:	7/16/2020			AREA:	Salt Lake
PROJECT NAME:	WESTLAKE AF	PARTMEN	TS			PROJECT TYPE:	Family
	3139 Ala Ilima St. Honolulu	STATE: HI	ZIP:	96818		PHONE: 808-839 FAX: 834-710	
	: Dana Montero, Reside : Hawaiian Properties L	-		APPLY ADI 1165 Bethel Honolulu, H	St., 2nd Fl.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 808-839-2027			FAX : 521-2714	EMAIL:	None	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Three I	Bdrm: 96 Bdrm: Bdrm:	0		872	3	6	
section 8 (project	NT IS 30% OF INCOME based) d must be 18 years or old		WAITLIS PARKING INFO \$40 per stall; m	ST FOR PARKING:	PET INFO	MINIMUM W ESTIMATE MAXIMUM W ESTIMATE TO REMAIN ON W CALL EVERY	(Months): 12 AIT LIST (Months): 48 /AITLIST
AN OWN RESIDE	ASSET LIMITS: DENTIAL PROPERTY: O:		LEASE:		Funding:	_ INFO: g pool, picnic area, I Section 8 100% PONSE IN 2021	aundry area
INCOME CRITER 50% AMI 5 persons - \$63,00 6 persons - \$67,65	00		FURNISHED:		Called 9/6 questions	5/2024, was too bus	y to asnwer

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	9/6/2024				AREA:	Wahiawa
PROJECT NAME:	WHITMORE CIF	RCLE APAF	RTMENT	S			PROJECT TYPE:	Elderly
ADDRESS:	111 N Circle Makai St.						PHONE: 808-753	3-3973
CITY:	Wahiawa	STATE: HI	ZIP:		96786		FAX: eFax: 3	23-648-8212
31111	Walliawa	OTATE: ITI	2		90700			
MANAGER	: Laura Lynn Daniels - P	roperty Manager			APPLY ADDF		Hanolulu	OUT-OF-STATE
APPLY TO	: Mark Development, Inc).,			Hawaii 96816		Torrorard,	APPLICATION ACCEPTED:
APPLY ATTN	: Mark Development - 73	35-9099						YES
APPLY PHONE	: 808-753-8474			FAX:	(781)295-3427		https://mdihawaii.co circle-	om/rentals/whitmore-
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 40	0		I I. I Г	516	1	3	YES
Two E	Bdrm: 4	0	_	i i	645	2	5	YES
Three E	3drm:							
Four E	3drm:							YES
RENT INFO: REI Section 8 vouchers eposit \$1,155 - 1 bedroor \$1,355 - 2 bedroor	m	V	TILITIES INC Vater and gas Residents are	s include			TOTA MINIMUM W ESTIMATE MAXIMUM W	(Months): 12
		Į.					ESTIMATE	į.
AGE CRITERIA: Head of household	d must be 62 years or old	ler, or	\A/A I=1				TO REMAIN ON W CALL EVERY	
	nembers of the household children if head of house		WAITL ARKING INF		R PARKING:	PET INFO:	F	PETS OK: YES
legal guardian.			Parking includ	led, upo	n	Pets are al	llowed, with restricti	ons
	ASSET LIMITS:							
AN OWN RESID	DENTIAL PROPERTY: O·	YES				GENERAL	INFO: s are allowed with M	ID letter: can work
		_	EASE: year; month	to mon	th	outside ho eligibility.3 Built in 199 Pictures a	me. Caregiver inco	ome included in ssable units.
INCOME CRITERI						Recreation	ee; Coin Operated nal Room equipped	with cable
50% of Honolulu N	ledian Income	F	URNISHED: Partly furnisheappliances on		or	Educational Open gaze Application	and computers with al and social activiti ebo and outside lou n:Download from m om manager's office	es nge area dihawaii.com
]						No need to	call to remain on v	waitlist, call to
1-PERSON MAXIM	IUM MONTHLY INCOME	i: 3	3004					
2-PERSONS MAXI	MUM MONTHLY INCOM	IE: 3	433					

		Last Comp	lete Update:	7/11/2024			AREA:	Makiki
PROJECT NAME:	WILD	ER VISTA	4				PROJECT TYPE:	Family
ADDRESS:	1618 Pu	ınahou St.					PHONE: 808-947	7-4846
CITY:	Honolul	u	STATE: HI	ZIP:	96822		FAX : 956-144	46
MANAGER	R: Yvette	James, Reside	ent Manager		APPLY ADI	2420		OUT-OF-STATE
APPLY TO	D: Wilder	Vista			Honolulu, H	11 96823		APPLICATION ACCEPTED:
APPLY ATTN	N: Reside	ent Manager						YES
APPLY PHONE	E: 808-94	7-4846			FAX: 735-1978		http://www.eahhous wilder-vista/	sing.org/apartments/
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	6	500	2.5x rent	525			
	Bdrm:	48	1260	2.5x rent	600			
Three	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE LIHTC property Section 8 certifica gross income req	ate holder	s need not mee		Water & Sewer			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 24
AGE CRITERIA:							TO REMAIN ON V	
Head of househol	ld must b	e 18 years or o	lder	WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 6
				PARKING INFO	_	PET INFO:	F	PETS OK: NO
J	A	SSET LIMITS:	NONE	61 parking stalls	S			
AN OWN RESI						GENERAL	INFO:	
ASSET LIMIT INF		verified to deter	mine	LEASE:		open Janu bathroom	ary 2004 has linen closet an	d pantry in 2bdrm
eligibility.				6 months; then	month-to-month	units Funding: L	.IHTC, RHTF, Sect	ion 8
INCOME CRITER	RIA:							
Food stamps accoriteria. 30% of AMI: 1 Pe	erson \$27	,510, 2 persons	\$ \$31,440	FURNISHED: Partly furnished appliances only				
 1-PERSON MAXIN	MUM MUN	NTHLY INCOM	E:	3820				
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	4366				

	Last Comp	lete Update:	7/16/2020			AREA:	Wahiawa
ROJECT NAME: V	VILIKINA PAR	K				PROJECT TYPE:	Elderly
ADDRESS: 29	98 Wilikina Dr.					PHONE: 808-622	2-6125
CITY: W	'ahiawa	STATE: HI	ZIP:	96786		FAX : 622-612	27
MANAGER: [Debra Fong; Sandalwood Manager	ment, Inc.		APPLY AD	DRESS:		OUT-OF-STA
APPLY TO: V	Vilikina Park Apartme	ents		G.: G.:G			APPLICATIO ACCEPTED
APPLY ATTN:							YES
APPLY PHONE: 8	808-622-6125		F.	AX : 622-6127	EMAIL:	wilikinapark@sanda	alwoodmgt.com
Unit Ty	/pe: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stuc	dio: 45	900	2xrent	479	1	2	YES
One Bd	rm: 19	1050	2xrent	627	1	2	YES
Two Bd	rm:						
Three Bd	rm:						
Four Bd	rm:						NO
Market Rents: studio onger waits for one at move in: must pay	- \$800, one bdrm - \$ bedroom. ONE full month's rei Not prorate 1st month	875. nt plus	Water, trash and			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months):
GE CRITERIA:						TO REMAIN ON W	· ·
8+, roommate can b	e 55 or disabled; spo be 55 or disabled. Ca	aregiver	_	FOR PARKING:		CALL EVERY	
llowed over 18yrs of	ld. Children under 18	3 allowed.	PARKING INFO: Long w/l for parki	YES ng, but parking	PET INFO	; and small dogs Or	PETS OK: YES w
	ASSET LIMITS:	NONE	is included	J. 1 J	note.		
AN OWN RESIDE	NTIAL PROPERTY:				GENERAL	. INFO:	
SSET LIMIT INFO:			LEASE:		Opened 1	994 CCH shopping van	. DDO
			1 year		clubhouse maintenar	e, trash chute on evence person lives on pped units (3 for mo	ery floor, site.
					Funding: I	Low Income Housin sistance Program	g Tax Credit &
ICOME CRITERIA:			FURNISHED:		INGINAI AS		
NCOME CRITERIA: NAXIMUM income: person - \$43,980			Partly furnished		NO DECE	ONSE IN 2021	

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		Last Compl	ete Update:	5/8/2023			AREA:	Chinatown
ROJECT NAME:	WINS	STON HAL	E.				PROJECT TYPE:	Family
ADDRESS:	1055 R	iver St.					PHONE: 808-74	4-1307
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX : 744-13	08
MANAGER	t: Justin	Gonsalves, Site	Manager		APPLY ADI			OUT-OF-STAT
APPLY TO): Hawai	ii Affordable Prop	perties Ltd.		Honolulu, H	I 96817		APPLICATION ACCEPTED
APPLY ATTN	I: Manaզ	ger						
APPLY PHONE	:: 808-7 <i>4</i>	44-1307			FAX : 744-1308	EMAIL:	https://www.hawaii ential-properties-oa	
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 I	Bdrm:							
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							NO
equired				Gas, electricity			MINIMUM W ESTIMATE MAXIMUM W	(Months):
AGE CRITERIA:				k			ESTIMATE TO REMAIN ON V	Į.
Head of household	d must b	e 18 years or ol	der	\//AITLIS	T FOR PARKING:		CALL EVERY	
				PARKING INFO		PET INFO) <u>:</u>	PETS OK: NO
				Parking not ava	ilable	Per reaso managem	nable accomodation	n from
		SSET LIMITS:						
AN OWN RESID		L PROPERTY:	YES			GENERAL Funding:		
				LEASE:			email 9/6/2024	
				, ,			3a.ii	
NCOME CRITER	IA:			,				
Maximum Annual I person - \$54,900 2 persons - \$62,70	0;			FURNISHED: Partly furnished allpiances only	major			
PERSON MAXIM	IUM MO	NTHLY INCOME	<u> </u>	4220		<u> </u>		

	Last Comple	ete Update:	5/14/2024			AREA:	Ala Moana
PROJECT NAME:	WISTERIA VIST	ГА				PROJECT TYPE:	Elderly
ADDRESS:	1239 South King St.					PHONE: 808-597	7-8963
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 735-197	78
MANAGER	t: Kayla Kedro, Resident	Manager		APPLY ADD 1239 S King	St		OUT-OF-STATE
APPLY TO	: Wisteria Vista			Honolulu, HI	96814		APPLICATION ACCEPTED: YES
APPLY ATTN	l: Resident Manager						150
APPLY PHONE	E: 808-597-8963			FAX: 808-735-1978		https://www.eahhou /wisteria-vista/	using.org/apartments
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 91	805	2xrent	384			YES
Three I	Bdrm:						NO
SNAP benefits car income requireme need not meet the	NT IS 30% OF INCOME n be included to meet mi ent. Section 8 certificate he e min gross income requi	nimum nolders	UTILITIES INC			MINIMUM W ESTIMATE MAXIMUM W ESTIMATE	(Months): 6 AIT LIST (Months): 12
AGE CRITERIA: All residents must	be 62 or older					TO REMAIN ON W	
			PARKING INFO	ST FOR PARKING: D: NO 2 stalls; once all gned, occupancy	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:			tenants without a]		
AN OWN RESIDE	DENTIAL PROPERTY:	YES			GENERAL Electric or	INFO: able and phone sep	arata Air
	ousing.org/apartments/wi	steria-vista/	LEASE: 1 Year		conditione and multi- social work Walking di	d units. Coin-opera purpose room on si ker available on site istance to grocery s ts. Has emergency	ated laundry room te. Library. CCH e 2x per week. tore, bus line and
INCOME CRITERI	IA:				opened 20	000	,
Maximum annual i 1 person - \$45,85 2 persons - \$52,40	50		FURNISHED: Partly furnished appliances, vin window mini bl bathtub. 7 ADA shower.	yl flooring,	Transporta	LIHTC - 50% AMI, F ation to Shopping a charities Hawai'I	
I-PERSON MAXIM	IUM MONTHLY INCOME	Ē:	3820]		

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