	Last Comp	lete Update:	1/21/2022			AREA	. Makiki
	1506 PI'IKOI A	PARTMEN	TS			PROJECT TYPE	Family
ADDRESS:	1506 Piikoi St.					PHONE: 536-15	506
CITY:	Honolulu	STATE: Hi	ZIP:	96822		FAX:	
MANAGER	R: Shanelle Lum			APPLY A	DDRESS:		OUT-OF-STATE
APPLY TO	D: Contact Shanelle Lum	n for an application	on				APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	E: 536-1506			FAX: 973-0605	EMAIL	: shanelle@hsiserv	ices.net
Unit	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	Studio:	750			1	2	
One I	Bdrm:	850			2	3	
Two	Bdrm:	1131			4	5	
Three	Bdrm:	1306			5	7	
Four	Bdrm:						
RENT INFO: RE	ENT IS 30% OF INCOME	E: NO	UTILITIES INC Yes	CLUDED:		MINIMUM V ESTIMATE MAXIN	
AGE CRITERIA:						TO REMAIN ON	WAITLIST
18 and older			WAITL	IST FOR PARKING	3 :	CALL EVERY	(Months):
			PARKING INF	O: YES	PET INFO	D:	PETS OK:
	ASSET LIMITS:						
	DENTIAL PROPERTY:				GENERA		
ASSET LIMIT INF	O:		LEASE:		Call for a office Two 3 & All applic	on: Request by ema appointment to pick 2 story walk up buil cants must be exper sness, sheltered or	up from manager's dings. iencing
\$40,850; 2 person	IIA: 50% of HUD Oahu AMI; ns - \$46,050; 3 - \$52,500 000; 6 - 67,650; 7 - \$72,3); 4 -	FURNISHED:		to reside conviction offender citizen. required NO RES	ency at the project. In two years prior; n Must show legal re Must be able to pay	No violent criminal oregistered sex esidency if not a rent, deposit and
" 1-PERSON MAXIN	JUM MONTHLY INCOM	E:	3404		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	3887				

APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY ATTN: APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net Email: pam@hsiservices.net ASKET UnitTs: Caregive Allowed: Allowed:		Last Comp	lete Update:	1/21/2022			AREA:	Moiliili
MANAGER: Pam Sakai APPLY ATTN: APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net ARPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net ARPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net ARPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net ARIMINUM MAXIMUM MA	,			STREET			PROJECT TYPE:	Family
MANAGER: Pam Sakai APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net Email: pam@hsiservices.net INCOME SQ FT: INMINIMUM MAXIMUM Number InCOME INCOM	ADDRESS: 1727 S	S. Beretania Stre	et					
APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY PHONE: 944-5020 FAX: 955-9915 EMAIL: Website: https://www.hsiservices.net Unit Type: Of UNITS: RENT: INCOME Required: SQ FT: Minimum INCOME Required: SQ FT: Minimum Maximum	CITY: Honoli	ılu	STATE: HI	ZIP:	96826		FAX: 955-59 ²	15
APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsisenrices.net Email: pam@hsisenrices.net	MANAGER: Pam	Sakai			APPLY ADI	DRESS:		OUT-OF-STA
APPLY PHONE: 944-5020 FAX: 955-5915 EMAIL: Website: https://www.hsiservices.net Email: pam@hsiservices.net Winimum INCOME SQ FT: Sq	APPLY TO: Hous	ing Solutions, In	c.					APPLICATIO ACCEPTEI
APPLY PHONE: 944-5020 FAX: 955-5915 Email: pam@hsiservices.net UnitType:	APPLY ATTN:							
Studio: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	APPLY PHONE: 944-5	5020			FAX: 955-5915			
One Bdrm: 18 942 600 2 4 Two Bdrm: 5 1131 700 5 7 Three Bdrm: 0 Four Bdrm: 0 UTILITIES INCLUDED: TOTAL UNITS: 23 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (MONTHS): MAXI	Unit Type:		RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
Two Bdrm: 5 1131 700 5 7 Three Bdrm: 0 Four Bdrm: 0 UTILITIES INCLUDED: TOTAL UNITS: 23 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): PARKING INFO: YES Parking included when available. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: GENERAL INFO: Described being or isk of being homeless and have at least on child under 18. Annerities include resident parking and laundry facilities. Two ADA compliant units.			0					
Three Bdrm: 0 Four Bdrm: 0 ENT INFO: RENT IS 30% OF INCOME: poplicants must be homeless or at risk of being pomeless and have at least one child under age 18. pdates are required every 6 months for those on e waitlist. GE CRITERIA: TO REMAIN ON WAITLIST ESTIMATE STEAMING: PARKING INFO: YES PARKING INFO: YES PARKING INFO: PETS OK: PET INFO: PETS OK: Design one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or at risk of being momeless and have at least on child under 18. Amenities include resident provided in the population of the provided in the population of the provided in the								
ENT INFO: RENT IS 30% OF INCOME: pplicants must be homeless or at risk of being omeless and have at least one child under age 18. pdates are required every 6 months for those on le waitlist. GE CRITERIA: B or older. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: UTILITIES INCLUDED: TOTAL UNITS: 23 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PET INFO: PET INFO: SERVE INFO: Low-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless on the required every 6 months for those on least on the complex of the			1131		700	5	7	
ENT INFO: RENT IS 30% OF INCOME: pplicants must be homeless or at risk of being omeless and have at least one child under age 18. pdates are required every 6 months for those on e waitlist. B or older. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: UTILITIES INCLUDED: TOTAL UNITS: 23 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: PET INFO: PET INFO: Don-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least on child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units.								
poplicants must be homeless or at risk of being smeless and have at least one child under age 18. doates are required every 6 months for those on e waitlist. BE CRITERIA: BY OR ORDER OF PARKING: PARKING INFO: SEET LIMIT INFO: LEASE: TO REMAIN ON WAITLIST CALL EVERY (Months): CALL EVERY (Months): PET INFO: PETS OK: GENERAL INFO: LEASE: COME CRITERIA: FURNISHED: MINIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): LEASE: FURNISHED: MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): LEASE: FURNISHED: MINIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): LEASE: FURNISHED: FURNISHED:	Four Barm:	0		ļ.				
omeless and have at least one child under age 18. pdates are required every 6 months for those on e waitlist. See CRITERIA: Or older. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: COME CRITERIA: FURNISHED: MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PET INFO: PET INFO: DESTIMATE (Months): LEASE: TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PET INFO: DESTIMATE (Months): LEASE: DESTIMATE (Months): DESTIMATE (Months): LEASE: DESTIMATE (Months): LE	ENT INFO: RENT IS 3	0% OF INCOME	Ξ: ι	JTILITIES INC	CLUDED:		TOTA	L UNITS: 23
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SEET LIMIT INFO: LEASE: COME CRITERIA: TO REMAIN ON WAITLIST CALL EVERY (Months): Parking included when available. BEASE: COME CRITERIA: TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST CALL EVERY (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST TO REMAIN ON WAITLIST CALL EVERY (Months): DESTINATE TO REMAIN ON WAITLIST TO	omeless and have at leap pdates are required eve	ist one child und	er age 18.				ESTIMATE	(Months):
WAITLIST FOR PARKING: PARKING INFO: ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: GENERAL INFO: LEASE: LEASE: GENERAL INFO: LEASE: LEASE: FURNISHED: FURNISHED:			Į					
PARKING INFO: YES Parking included when available. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SEET LIMIT INFO: LEASE: COME CRITERIA: PET INFO: PETS OK: GENERAL INFO: Low-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least on child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units.				W/AITI	IST FOR PARKING:			
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: SSET LIMIT INFO: LEASE: LEASE: COME CRITERIA: FURNISHED: GENERAL INFO: Low-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least one child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units.			<u> </u>			PET INFO:	F	PETS OK:
GENERAL INFO: LEASE: LOW-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least on child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units. FURNISHED: GENERAL INFO: Low-income permanent housing features 23 one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least on child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units.		ASSET I IMITS:		Parking includ	ded when available.			
COME CRITERIA: LEASE: one-and two-bedroom apartments for family size of 2-7. Applicants must be homeless or risk of being homeless and have at least on child under 18. Amenities include resident parking and laundry facilities. Two ADA compliant units.						general.	INFO:	
COME CRITERIA: FURNISHED: parking and laundry facilities. Two ADA compliant units.	SSET LIMIT INFO:			EASE:		one-and tw size of 2-7 risk of beir	vo-bedroom apartm . Applicants must b ng homeless and ha	nents for family be homeless or at ave at least one
	COME CRITERIA:		- I	FURNISHED:		parking an	d laundry facilities.	
PERSON MAXIMUM MONTHLY INCOME: 0	DEDOON MANUSCO	NITH WILLIAM		0]		

ADDRESS: 2	220 California 220 California Ave.						,
J_	220 California Ave.					PROJECT TYPE:	Elderly
CITY: \[\]						PHONE : 808-220	-7671
9	Vahiawa	STATE: HI	ZIP:	96786		FAX : 808-484	-4051
MANAGER:	Bradley Isa / Darlene	Higa			ha Street #26		OUT-OF-STATE
	Property Profiles Inc. Attn: Bradley Isa / Dar	rlene Higa		Aiea, Hawaii	96701		APPLICATION ACCEPTED:
APPLY ATTN:	Property Management	t Division					UNKNOWN
APPLY PHONE:	808-220-7671		F.	AX : 808-484-4051		orad@pro808.com online application -	pending
Unit T	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	ıdio:						
One Bo		850	1470	403	1	2	
Two Bo							
Three Bo							
Four Bo	drm:						NO
Fixed rent of \$850; ertificate holders ne income requirement *Confirmation letter	eed not meet the minim t. is sent after applicatio anagement if contact ii	num gross	UTILITIES INCLU All utilities include phone (\$25 per month)			TOTAI MINIMUM W/ ESTIMATE (MAXIMU LIST ES	(Months): 1
AGE CRITERIA:						TO REMAIN ON W	
All residents must b	e 55 or older		WAITLIST	FOR PARKING:		CALL EVERY ((Months): 6
			PARKING INFO: 1 stall for each un	NO	PET INFO:	Р	ETS OK: YES
,	ASSET LIMITS:		i stall for each un	iit.			
	ENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INFO): 		LEASE:		meeting ro	07. Picnic Area, C om, elevator, privat	e park with BBQ
			1 year		manager. 2 handicap	ry garden, visitor pa ped accessible united laundry on eacl	ts.
INCOME CRITERIA	Λ:				*Failure to	respond to commu	nication from
	n \$45,700; 2 persons \$ ted to help meet min. i		FURNISHED: Partly furnishedappliances; windovinyl flooring, gart	w coverings,		ent in a timely manr oved from the waitlis	
-PERSON MAXIMUM MONTHLY INCOME:			3809		<u> </u>		

		Last Comp	lete Update:	1/21/2022			AREA	.: Waikiki
ROJECT NAME:	436 E	ENA ROA	D				PROJECT TYPE	Family
ADDRESS:	436 Ena	a Rd.					PHONE: 941-34	136
CITY:	Honolul	u	STATE: HI	ZIP:	96815		FAX:	
MANAGER	R: Keala	Souza			APPLY AD Appointmen			OUT-OF-STAT
APPLY TO	: Housir	ng Solutions, In	IC.		пропино	nt only		APPLICATIO ACCEPTED
APPLY ATTN	l:							
APPLY PHONE	: 941-34	136			FAX:	EMAIL:	Website: https://w Email: kealo@hsi	ww.hsiservices.net/ services.net
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	32	1000			1	2	
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							
\$1000/month; \$1000/momeless. Updat chose on the waitl	es are re	sit. Applicants quired every 6	must be months for	Electric and wa	ter		MAXIM	(Months):
AGE CRITERIA:							TO REMAIN ON	STIMATE WAITLIST
Age 18+, singles	or couple	s only; 2 perso	ons max.	WAITLIS	ST FOR PARKING:		CALL EVER	
				PARKING INFO		PET INFO	:	PETS OK: NO
				Parking not ava	ailable	Doctor ve	rification required f	or service animal.
AN OWN RESII		SSET LIMITS: PROPERTY:				GENERAL	. INFO:	
SSET LIMIT INF				LEASE:		Low-incor	me permanent hou applicants must be	sing with 32
				Month-to-mont	h	feature pr No reside	ivate baths as well nt parking availabl ear a bus stop, reta	as kitchenettes. e but conveniently
NCOME CRITER	IA:							
				FURNISHED: Microwave and	mini refrigerator.			
-PERSON MAXIN	1UM MOI	NTHLY INCOM	1E:	0				
PERSONS MAX	ІМИМ МО	ONTHLY INCO	ME:	0				

		Last Comp	lete Update:	1/21/2022			AREA	Waikiki
PROJECT NAME:	AINA	HAU VIST	ГА				PROJECT TYPE	Elderly
ADDRESS:	2428 Tu	ısitala St.					PHONE: 926-67	00
CITY:	Honolul	u	STATE: HI	ZIP:	96815		FAX:	
MANAGER	R: Reside	ent Manager, He	eather Davis		APPLY ADI			OUT-OF-STATE
APPLY TO): Location	ons			Honolulu, H	1 96823		APPLICATION ACCEPTED:
APPLY ATTN	l: Proper	ty Managemen	t Division					YES
APPLY PHONE	: : 738-31	00			FAX: 735-1978	EMAIL:	https://www.locationable-rentals	nsrentals.com/afford
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	99	1053	2xrent	403			
Two	Bdrm:	7	1195	2xrent	607			
Three	Bdrm:							
Four	Bdrm:							YES
11 Units - 30%AM 88 Units - 50% AM 7 Units - 50%AM Section 8 certifica AGE CRITERIA:	MI 1 Bedr II 2 Bedro Ite holder	room - \$1053.00 poom - \$1195.00 rs need not mee	0	Electric, water,	and sewer		MINIMUM W ESTIMATE MAXIM	(Months): 24 UM WAIT STIMATE 60 VAITLIST
All residents must	1 DE 02 01	oldei		WAITLIS PARKING INFO	ST FOR PARKING: D:	PET INFO		PETS OK: NO
AN OWN RESIDES ASSET LIMIT INF	DENTIAL O:	SSET LIMITS: . PROPERTY:		18 tenant/ 5 ha \$40/mo. Once assigned, occurestricted to ter own a vehicle. LEASE:	all stalls	time. 6 h with kitch park/Victo 6 visitor p	- INFO: 2007. Has Social Wandicapped units. en; picnic area, trar ory Garden arking stalls, coin landing. Low Income	Community room nsportation, private
INCOME CRITERIA: 30% of AMI: 1 person \$26,460; 2 persons \$30,240 50% of AMI: 1 person \$44,100; 2 persons \$50,400 Food stamps accepted to help meet min. income criteria. Sect 8 certificate holders need not meet min. income requirements.			FURNISHED: Partly furnished appliances only window blinds, flooring	y; has A/C,	(50 % of 2021 UPI	% of AMI) 1 UPDATE - INFO FROM WEBSITE RESPONSE IN 2021 and since 2019.		
 1-PERSON MAXIM	10m mun	NTHLY INCOM	E:	3675		J		

Printed: 3/7/2023 Page: 5

		Last Compl	ete Update:	7/16/2020			AREA	Waikiki
PROJECT NAME:	AINA	HAU VIST	'A II				PROJECT TYPE	: Elderly
ADDRESS:	2426 Tus	itala Street					PHONE: (808)9	26-6700
CITY:	Honolulu		STATE: HI	ZIP:	96815		FAX:	
MANAGER	: Heather	Davis, Reside	ent Manager		APPLY ADD			OUT OF STATE
APPLY TO	: Contact	Randi Allmon	at (808) 926-67	00		inager's Office a Street,Honoli	ulu HI	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	:: (808) 73	8-3100		F	AX:		ttps://www.locatio	onsrentals.com/afford
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:	15	901	2x rent	377			
One	Bdrm:	47	966	2x rent	420			
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE 6 units - 30% AM 9 units - 50% AM 41 units - 50% AM 6 units - 60% AM	/II studio - : /II studio - : /II 1 bedrro	\$574 per mont \$901 per mont om - \$966 pe	th th r month	UTILITIES INCLUE Electricity, Water			MINIMUM W ESTIMATE MAXIM	(Months): 0
J				Į.				STIMATE 0
AGE CRITERIA:						٦	O REMAIN ON V CALL EVERY	
				WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: NO
	AS	SET LIMITS:		22 parking stalls to 50% and 60% month	, available only			٢
AN OWN RESID						GENERAL I	NFO:	
ASSET LIMIT INF	O:			LEASE:		Coin opera Locked ent Community educationa Visitor Park	ry door room for recreat activities	ional and
INCOME CRITER	IA:					2021 Upda	te - Info from Wel	osite
50% AMI \$4	1 Person 26,460/yr 44,100/yr 52,920/yr	2 Persons \$30,240/yi \$50,400/yi \$60,480/yi	r r	FURNISHED: Range/Oven, Ga Refrigerator/Free floor covering, W		NO RESPO 2019.	ONSE IN 2021. L	ast response was
 1-PERSON MAXIM	1UM MON	THLY INCOMI	= :	4410]		
2-PERSONS MAXI	MUM MOI	NTHLY INCOM	ЛЕ :	5040				

		Last Comp	olete Update:	11/2/2021			AREA	McCully
PROJECT NAME:	ARTI	ESIAN VIS	STA				PROJECT TYPE	Elderly
ADDRESS:	1828 Yo	oung St.					PHONE: 949-5	936; 947-4846
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX : 949-5	238
MANAGER	R: Rache	I, Resident Ma	nager		APPLY ADI			OUT-OF-STATE
APPLY TO	D: Location	ons			Honolulu, H	-		APPLICATION ACCEPTED:
APPLY ATTN	N: Proper	ty Managemer	nt Division					YES
APPLY PHONE	≣: 738-31	00			FAX: 735-1978	EMAIL:	http://www.locatio ble-rentals.aspx	nsrentals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:							
	Bdrm:	53	1058	2xrent	420			
	Bdrm:				-			
Three								
Four	Bdrm:			ļ.		J	J	YES
RENT INFO: RE 6 units at 30% are 47 units at 50% a 2 handicapped ur to meet min incon holders are not re	ea AMI re rea medi nits; food ne require	ent \$645 an income rent stamp benefit ement and Sec	t \$1058 can be used ction 8	UTILITIES INC			MINIMUM \ ESTIMATI MAXIN	E (Months): 24
AGE CRITERIA:				le .				ESTIMATE 60
All residents must	t be 55 o	rolder		\A/A ITI	IST FOR PARKING:		TO REMAIN ON CALL EVER	
				PARKING INF		PET INFO	:	PETS OK: NO
<u> </u>				14 parking sta	alls; \$40/ month			
		SSET LIMITS:						
AN OWN RESII		. PROPERTY:	YES			GENERAL		d once applciation
none	<u> </u>			LEASE: 6 months; the	n month-to-month	is received Has comp closet in b bars, no to	d. outer area and con oathroom, walk in s ub, has kitchen pa	nmunity room, no
INCOME CRITER	IA:			F.		on every f On-site so	loor. ocial worker	
30% of AMI: 1 pe 50% of AMI: 1 pe preference for 30° (<20%AMI) minir	rson \$44. % units g	100; 2 persons iven to lowest	s \$50,400		ces, vinyl flooring, olinds, a/c. garbage		prox. 9/2006 LIHTC, RHTF, Sec	ction 8
						NO RESF	PONSE IN 2020. L	AST UPDATE 2019
1-PERSON MAXIN	иим мо	NTHLY INCOM	ΛΕ:	3675		-		
2-PERSONS MAX	IMUM MO	ONTHLY INCC	ME:	4200				

Last Complete U	Jpdate: 10/15/2021	AREA: Palama
PROJECT NAME: BANYAN STREET	MANOR	PROJECT TYPE: Family
ADDRESS: 1122 Banyan St. CITY: Honolulu ST	ATE: HI ZIP: 96817	PHONE: 843-0021 FAX: 376-0042
MANAGER: Jodie Sakai APPLY TO: Banyan Street Manor	APPLY ADDRI 1122 Banyan S Honolulu HI 96	out-of-state
APPLY ATTN: Jodie Sakai APPLY PHONE: 843-0021	FAX : 376-0042	EMAIL: manager@banyanstreetmanor.com
Studio: One Bdrm: Two Bdrm: Four Bdrm: Four Bdrm: Three Bdrm: Four Bdrm: Studio: Three Bdrm: Four Bdrm: Four Bdrm: AGE CRITERIA: Head of household must be 18 years or older a time of application. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:	RENT: INCOME Required: SQ FT: GOVERNMENT: SQ FT: GOVERNMENT: SQ FT: GOVERNMENT: GOVERNMENT	MINIMUM Number of People: 1
1-PERSON MAXIMUM MONTHLY INCOME:	FURNISHED: Partly furnishedmajor appliances only	

		Last Comp	olete Update:	2/7/2022			AREA:	Ala Moana
PROJECT NAME:	BIRC	H STREE	T APART	MENTS			PROJECT TYPE:	Family
ADDRESS:	916 Birch	n St.					PHONE : 597-89	
CITY:	Honolulu		STATE: HI	ZIP:	96814		FAX : 589-28	97
MANAGER	: Luana F	Holi			APPLY AD P.O. Box 2			OUT-OF-STATE
APPLY TO	: Location	ns			Honolulu, F	-		APPLICATION ACCEPTED:
APPLY ATTN	: Property	y Managemer	nt Division					YES
APPLY PHONE	: 738-310	00			FAX: 735-1978		http://www.location ble-rentals.aspx	srentals.com/afforda
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:							
	Bdrm:	52	1458	2.5xrent	600			YES
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE	NT IS 309	% OF INCOM	E: NO	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 52
Units are advertise available. Section 8 certifications				Water, sewer	& trash		MINIMUM W ESTIMATE	
gross income requ	uirement.							UM WAIT STIMATE 60
AGE CRITERIA:							TO REMAIN ON V	VAITLIST
Head of household	d must be	18 years or c	older	WAITL PARKING INF	O: NO	PET INFO:		PETS OK: NO
				free	0. 110	1211110		210 014 140
		SET LIMITS:				<u> </u>		
AN OWN RESIDE		PROPERTY:	NO	LEASE:		GENERAL Funding: L	INFO: LIHTC, RHTF	
				1 year		Ask mana	from website gement to mail it	
INCOME CRITER	IA:			,			om Locations ofifice	
Maximum Yearly I 1 person \$50,640 2 persons \$57,840 3 persons \$65,100 4 persons \$72,300)))			FURNISHED: Partly furnishe appliances on		.	ate - Information fro	
1-PERSON MAXIM	IUM MON	THLY INCOM	1Ε:	4220]		

ADDRE C MANA	ITY: Honolu		STATE: HI	PLAZA ZIP:			PROJECT TYPE:	
MANA	Honolu GER: Shen Rando	ilu	STATE: HI	ZIP:			BUONE TO LOCA	r
MANA	GER: Shen Rand		STATE: HI	ZIP:			PHONE: 524-373	37
	Rand	Huang, Residen			96817		FAX: 528-529	99
APPLY /	Y IO: Hawa	eatte McEnroe P iian Affordable P es Ma	roperty Manage	r	APPLY ADI Chinatown (1031 Nuuar Honolulu, H	Gateway Plaza u Avenue		OUT-OF-STATE APPLICATION ACCEPTED: YES
	ONE: 524-3				FAX: 528-5299	EMAIL:	aa@cgphi.com	
	Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:	1	1100	2050	500	1	2	YES
	One Bdrm:	199	1200	2160	555	1	3	YES
	wo Bdrm:							
Th	ree Bdrm:							
F	our Bdrm:							NO
Rent posted i 1 Bedroom - accept sectio	s the low rer \$1200 (LIHT n 8			UTILITIES INCL Water + Sewer	.UDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITER	RIA:						TO REMAIN ON W	
Head of hous time of applic		oe 18 years or ol	der at the	WAITLIS PARKING INFO	T FOR PARKING:	PET INFO:	CALL EVERY	(Months): 12 PETS OK: NO
	A	ASSET LIMITS:	NONE	Parking starts a depends on ren				
AN OWN R ASSET LIMIT		L PROPERTY:	NO	LEASE:		GENERAL Participatii Rental Ass	INFO: ng in the City Hous sistance Program.	ing
				1 year			deck with bbq gril	ı
INCOME CRI	TERIA:			1				
Income 60% AMI or l	ess			FURNISHED: Partly furnished appliances only Washer/dryer in	. Carpet or tile.			

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	10/15/2021			AREA:	Chinatown
ROJECT NAME:	CHIN	IATOWN I	MANOR				PROJECT TYPE:	Family
ADDRESS:	175 No	rth Hotel St.					PHONE: 545-199	96
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 536-680	08
MANAGER	R: Susan	Chen			APPLY AD On-Site	DRESS:		OUT-OF-STATE
APPLY TO	: Chinat	own Manor			OH OHO			APPLICATION ACCEPTED:
APPLY ATTN	I: Winnie	e Louie						YES
APPLY PHONE	: 545-19	996			FAX: 536-6808	EMAIL:	winniel@hawaiiaffo	rdable.com
Unit	Type:	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	Bdrm:							
	Bdrm:							
Three								
Four	Bdrm:							NO
RENT INFO: RE	:NT IS 30	0% OF INCOME	E: NO	UTILITIES INCL	LUDED:		TOTA	L UNITS: 89
310 sq ft \$612 330 sq ft \$636				Water			MINIMUM W	
450 sq ft \$646 Must respond to c	communic	cation from mai	nagement				ESTIMATE	
in a timely manne	r to rema	in on the waitli	st.					JM WAIT STIMATE
AGE CRITERIA:							TO REMAIN ON W	
Head of househol time of applicatior		e 18 years or o	lder at the		T FOR PARKING:			
				PARKING INFO		PET INFO:	F	PETS OK: NO
	A	SSET LIMITS:	NONE					
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE:		Waitlist is	open until decision	to close.
				1 year		On-site la	undry facility and co	mmunity room
						Limited to	2 adults only	
INCOME CRITER								
Maximum Annual 2 persons - \$60,4		1 person - 52,	920	FURNISHED: Partly furnished appliances only				
-PERSON MAXIN	иим моі	NTHLY INCOM	IE:	4410				
-PERSONS MAXI	імим мо	ONTHLY INCO	MF:	5040				

	Last Comple	ete Update:	10/15/2021			AREA:	Ewa
PROJECT NAME:	D.E. THOMPSO	N VILLA	GE (EWA VI	LLAGE ELD	ERL	PROJECT TYPE:	Elderly
ADDRESS:	91-1295 Renton Rd.					PHONE: 681-496	60
CITV:	Ewa Beach	STATE: HI	ZIP:	96706		FAX : 681-496	51
OII I.	Ема веасп	STATE:	2	90700			
MANAGER	: EAH			APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO	: Closed for application						APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 681-4960		F	FAX: 949-7211	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 84	0		600	1	3	YES
	Bdrm:						
Three							
Four	Bdrm:			J]		NO
RENT INFO: RE	NT IS 30% OF INCOME	: YES	UTILITIES INCLU	JDED:	_	TOTA	L UNITS: 84
allowance = \$100 Deposit is based or responsible for up	on income. **Applicants a	are	Water; \$69 utility Utility Allowance	allowance	ge	MINIMUM W. ESTIMATE MAXIMU	
]	mber and address.		ļ.				STIMATE 24
AGE CRITERIA: Head, co-head, or	spouse, must be 62 year	ars or	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	F FOD DADIVINO		TO REMAIN ON W CALL EVERY	
provide a doctor's	(section 515). If disabled note (disability does not	need to	PARKING INFO:	FOR PARKING:	PET INFO	: F	PETS OK: YES
be disclosed) or c	opy of SSI/SSDI benefit	letter.	Parking included	I	With MD	etter, max 30 lbs.	
	ASSET LIMITS:				J GENERAL	INICO	
ASSET LIMIT INF	DENTIAL PROPERTY: O:	TES	15405			7 total, 5 for wheel	chair w/ 1 for sight
income from asse	ts cannot put applicant o	over income	LEASE: 1 year		given to 3 MD letter tenant die	nt, 2 for hearing imp 60% AMI. Caregivers can work outside hes, under age 62 spo t be income eligible.	s are allowed with ome. If elderly ouse may rent
INCOME CRITER			FURNISHES		Social Wo	orker from CCH. Fur ministration. CCH S	nding: Farmers hopping van
	Tenant must have adeq nt to afford own basic livi lectric, etc.)		FURNISHED: Partly furnished- appliances only,		available,	opened 1992. Mus cation from manage o remain on waitlist.	t respond to
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:	4475				

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		Last Compl	lete Update:	1/4/2022				Ewa	
DDO JECT NAME.	ED A I		, ,	\A/ A			AREA: PROJECT TYPE:		
PROJECT NAME:			VISTASE	WA]	
ADDRESS:	91-147	1 Miula Street					PHONE: 681-4000		
CITY:	Ewa Beach		STATE: HI	ZIP:	96706		FAX : 681-400)1	
MANAGER	: Comm	nunity Director -	Kathy McAliste	r	APPLY AI Waitlist is	DDRESS: currently open for	or all units	OUT-OF-STATE	
APPLY TO	: Franci	scan Vistas Ew	a					APPLICATION ACCEPTED: YES	
APPLY ATTN	l:							153	
APPLY PHONE	: 681-40	000			FAX : 681-4001		leasing@Francisca www.Franciscanvis		
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:	126	1250	1490	530	1	n/a		
Two E	Bdrm:	23	1480	1770	750	1	n/a		
Three E	3drm:								
Four E	Bdrm:							YES	
RENT INFO: RE 6 - 1 bedroom unit w/\$664 rent with m \$1176 - \$1380; Mi certif. holders. Min Stamp/Rent subsid	ts w/\$57 ninimum n. incom n income	1 rent and 2 - 2 income require ne not needed for	bedroom ment of or Sec 8	UTILITIES IN			MINIMUM W ESTIMATE MAXIMU		
AGE CRITERIA:							TO REMAIN ON W	1.2	
62 years of age at applicants.	the time	e of application a	and for all		LIST FOR PARKING	<u>:</u>	CALL EVERY	(Months):	
				PARKING INF	d on availability,	PET INFO: Service an		PETS OK: NO	
	^	SSET LIMITS:		102 stalls tota		00.7100 a			
AN OWN RESID			YES			GENERAL	INFO:		
ASSET LIMIT INFO	O:			LEASE:		Amenities:	Community cente		
Assets are taken i income eligibility.	nto cons	sideration in dete	ermining	1 year		room, fitne	room, kitchen, actives room, salon and each building.		
INCOME CRITERI	ι Λ •						30% AMGI, 1 unit (@ 60% AMGI	2 50% AMGI	
30% AMI - 1 perso \$30,240 60% AMI - 1 perso max - \$60,480	on - max				s electric range, disposal, and air	Ask mana	n: ciscanvistasewa.co gement to mail it m manager's office		
1-PERSON MAXIM	IUM MO	NTHLY INCOM	E:	4410					

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HALAWA VIE	W				PROJECT TYPE:	1 - 4
					PROJECT TIPE.	Family
99-009 Kalaloa St.					PHONE: 488-361	
Aiea	STATE: HI	ZIP:	96701		170. 400-010	50
: Tammy K. Lopez						OUT-OF-STA
: Halawa View Apts.			Aiea HI 96	701		APPLICATION ACCEPTED
: Management Office						NO
: 488-3613		F	AX : 486-6150	EMAIL:	tammy@pacificdg.c	com
Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
udio:						
			630	1	5	YES
32 Bdrm: 56	0		840	3	7	YES
3drm: 12	0		1080	4	9	YES
Section 8 units \$1500 maximum. 3 - \$1850 maximum. \$2000- maximum					MINIMUM W. ESTIMATE MAXIMU	(Months):
changes		Įt.				,
I must be 18 years or	older	WAITLIST	FOR PARKING:		CALL EVERY	
		PARKING INFO:	NO	PET INFO:	: F	PETS OK: NO
ACCET LIMITO	NONE					
				GENERAL	INFO:	
D:		LEASE:				
		1 year; then mont	th-to-month	- pick up f	from manager's offic	ce
A:		•				
4 persons: \$30,900		FURNISHED: Partly furnished appliances only.	major			
	Aiea Tammy K. Lopez Halawa View Apts. Management Office 488-3613 Type: Number of UNITS: udio: 52 ddrm: 52 ddrm: 56 ddrm: 12 NT IS 30% OF INCOM Section 8 units \$1500 maximum. \$2000- maximum. \$2000- maximum ed to remain on waitlist changes I must be 18 years or of the section of the se	Aiea STATE: HI Tammy K. Lopez Halawa View Apts. Management Office 488-3613 Type: Number of UNITS: RENT: Udio:	Aiea STATE: HI ZIP: Tammy K. Lopez Halawa View Apts. Management Office 488-3613 Type: Number of UNITS: RENT: RENT: Required: Udio: Sdrm: 52 0	Aiea STATE: HI ZIP: 96701 Tammy K. Lopez APPLY AD 99-009 Kal Aiea HI 96 Halawa View Apts. Management Office Halawa View Apts. Minimum INCOME Required: SQ FT: RENT: SQ FT: Aidm: 52 0 630 630 630 630 630 630 630 630 630 6	Aiea STATE: HI ZIP: 96701 Tammy K. Lopez APPLY ADDRESS: 99-009 Kalaloa St. Aiea HI 96701 EMAIL: Halawa View Apts. Management Office EMAIL: FAX: 486-6150 EMAIL: Type: Of UNITS: RENT: Of Bayes and Bayes	Alea STATE: HI ZIP: 96701 APPLY ADDRESS: 99-009 Kalaloa St. Alea HI 96701 EMAIL: tammy @ pacificdgr. Alea HI 96701 FAX: 486-6150 EMAIL: tammy @ pacificdgr. FAX: 486-6150 EMAIL: tammy @ pacificdgr. FAX: 486-6150 FAX: 486-6150 FAX: 486-6150 FAX: 486-6150 FAX: 486-6150 EMAIL: tammy @ pacificdgr. MINIMUM MAXIMUM Number of People of People. Indirection of Units: People. Iddres: 52 0 0 630 1 5 5 640 3 7 7 640 640 640 640 640 640 640 640 640 640

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		Last Comp	lete Update:	1/21/2022				AREA:	Kalaeloa	
PROJECT NAME:	HALE	E HA'I KA	'OPUA (Bu	uilding 37	')			PROJECT TYPE:	Family	
ADDRESS:	Building	37, 91-1039 S	Shangrila					PHONE: 682-194	19	
CITY:	Kapolei		STATE: Hi	ZIP:		96707		FAX: 682-1970		
	Rtaylo 91-107	r@Cantwell-Ar 78 Yorktown St			apolei	APPLY AD 91-1078 Yo Kapolei HI	orktown St.		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	HI 967 I: Cloudb		.LC / Attn: Leasi	ng Team					YES	
APPLY PHONE	: 682-19	949			FAX:	682-1970	EMAIL:	CloudbreakCommu CloudbreadHawaii		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required	:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:	39	650	1.5 x ren	t	111-221	1	1		
	Bdrm:				_					
Three					<u> </u>					
Four	Bdrm:								YES	
RENT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES IN	NCLUDE	D:		TOTA	L UNITS: 39	
\$650 deposit and units are single ro for independent si	om occu	pancy. Afforda	ble housing	Water, elect	ric, sewe	er, trash		MINIMUM W ESTIMATE		
									JM WAIT STIMATE 0	
AGE CRITERIA: Single, adult and/o	or votoro	nc						TO REMAIN ON W		
Single, addit and/t	Ji vetera	115				R PARKING:	-			
				PARKING IN 1 stall per ui		NO	PET INFO	:	PETS OK: NO	
	A	SSET LIMITS:					<u> </u>			
AN OWN RESI		. PROPERTY:					GENERAL	. INFO:		
ASSET LIMIT INF	O:			LEASE:	onth		Communi	ty Kitchen, Commu ty coin-laundry area , walk-up stairway.		
				Wionth-to-me	JIIIII		Applicatio	, ,		
INCOME CRITER	IA:						Cloudbrea	oy email to: akHawaii@Cantwell		
Applicant must mato sustain rental a		mes the rent a	nd be able	FURNISHED Fully furnish			Ask mana applicatio	gement to email ov n.	er rental	
 1-PERSON MAXIN	1UM MOI	NTHLY INCOM	1E:	0						
2-PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	0						

	Last Comp	lete Update:	10/18/2021			AREA:	Ala Moana
PROJECT NAME:	HALE KEWAL	O APARTI	IENTS (Clos	sed for appl	i <mark>cati</mark>	PROJECT TYPE:	Family
ADDRESS:	450 Piikoi Street					PHONE: 589-184	15 ext 15
CITY	Honolulu	STATE: Hi	ZIP:	96914		FAX: 589-184	11
	Tionolala	0.7.1.2.		30314			
MANAGER	: Hawaii Affordable Pro	pperties, Inc.		APPLY ADD	RESS:		OUT-OF-STATE
APPLY TO	:						APPLICATION ACCEPTED:
APPLY ATTN	:						
APPLY PHONE	: 589-1845 x15		F	AX:	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	0					
One I	3drm: 27	1093		530	1	2	
Two I	3drm: 71	1575		689-712	2	5	
Three I		1819		1071	5	7	
Four I	3drm:	0			J		
RENT INFO: RE	NT IS 30% OF INCOM	E: NO	UTILITIES INCLU	IDED:		TOTA	L UNITS: 127
30% AMI 1 Bdrm \$656 (7 ap 50%AMI	ots); 2 Bdrm \$787 (6 ap	ts)	Solar Hot Water I Trash Collection,			MINIMUM W ESTIMATE	
60% AMI	0 apts); 2 Bdrm \$1312	` ' /				MAXIMU LIST ES	JM WAIT STIMATE 0
AGE CRITERIA: One person in the	household must be 18	years or				TO REMAIN ON W	
older			PARKING INFO:	FOR PARKING:	PET INFO	; F	PETS OK: YES
	ASSET LIMITS:				weighing r	one: (1)small to me no more than 25 lbs cal water fish in tan	; (2) small cat; (3)
AN OWN RESID	DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INF	O.		LEASE:		Standford	losed for application Carr Development onolulu 96813 808-5	- 1100 Alakea
INCOME CRITER	IA:					nus pay for utilities on the cable, and internet	
Income Limit AMI 30% 1 person \$24,5° 2 persons \$27,98 3 persons \$31,50 4 persons \$34,98	90 \$46,650 \$55,98 90 \$52,500 \$63,00	00	FURNISHED:		Rents and	d Income are subjec	t to change
-PERSON MAXIM	IUM MONTHLY INCOM	1E:	0		1		

	Last Co	omplete Update	1/21/2022			AREA:	Waipahu
PROJECT NAME:	HALE KUH	A'O Weinb	perg			PROJECT TYPE:	Family
ADDRESS:	94-909 Kau'olu Pl.					PHONE: 678-089	92
CITY:	Waipahu	STATE:	HI ZIP:	96797		FAX : 678-088	37
3	VVaipanu	O 2.		90131			
MANAGER	: Marisa Olmeda-N	Macias, Res. Mg	r.	APPLY AI			
APPLY TO	: 1-800-466-7722 - Macias 702-259-		, COS; or Marisa Ol	St Paul N	ersity Ave. Wes MN 55114	st, #330	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		1000					YES
APPLY PHONE	: 678-0892			FAX: 651-209-66		housing@accessible	lespace.org
Unit	Type: Number	7	Minimum INCOME		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS		Required:	SQ FT:	Number of People	Number of People:	Allowed:
St	tudio:						
One E	3drm: 18			520		2	YES
Two E	Bdrm: 6			773		4	YES
Three E	Bdrm:	1					
Four E	Bdrm:						
RENT INFO: RE	NT IS 30% OF INC	COME: YES	UTILITIES INC	CLUDED:		MINIMUM W. ESTIMATE MAXIMU	
AGE CRITERIA:			_			TO REMAIN ON W	
Head of household have a qualifying of	d must be 18 years	or older and	WAITL	IST FOR PARKING):	CALL EVERY	(Months): 6
naro a quamymg c			PARKING INF		PET INFO	: F	PETS OK: YES
			Minimum park	ing available			
	ASSET LIMI		_		6=:/=-		
AN OWN RESID	DENTIAL PROPER O:	TY: NO			GENERAL covered la	₋ INFO: anai w/ bbq, roll in sl	nowers drapes
			LEASE:		entertainn units, heig opened in	nent center, ceiling f ght-adjustable work	an, window a/c stations
INCOME CRITERI	IA:					Res Manager are of	
Maximum annual i 1 person \$36,650; \$47,100; 4 person	2 persons \$41,850	D; 3 persons	FURNISHED:		_	aff = caretaker and : PONSE IN 2021 - La 3/10/2017	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Co	mplete Update:	1/21/2022			AREA:	Pearl City
PROJECT NAME:	HALFIAUL	IMA (HPHA-	lee) - NOT	ACCEPTING	APP	PROJECT TYPE:	
	1184 Waimano Ho	•	100) 1101	ACCEL TIME	7.1	PHONE: 483-255	<u> </u>
						FAX: 483-255	
CITY:	Pearl City	STATE: HI	ZIP:	96782		1.00	
MANAGER	: Marcus Asami			APPLY AD	DRESS:		
1				1002 North Honolulu. H			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING	APPLICATIONS		/	PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications						NO
APPLY PHONE	NOT ACCEPTING : 832-5961	S APPLICATIONS		FAX: 832-3461	EMAIL:	hphaishereforyou.or	rg
				-			
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER Allowed:
		IXEIVI.	Required:	OQ11.	of People	People:	Allowed.
	tudio:						
	3drm:						
Two E	3drm: 20			771	2	6	YES
Three E	3drm: 16			893	3	8	YES
Four E	3drm:						
Minimum Rent: \$0 the waitlist are to go change or check the	NT IS 30% OF INCO All HPHA applicange to: hpha.myhousineir status. A userned to access their access the access the access the access the access the access the access their access the	nts who are on ng.com to ame and	UTILITIES INC	CLUDED: owance for electricity		MINIMUM WA ESTIMATE (MAXIMU	Months): 36
**********	2/2/2016*****		Į.			LIST ES	TIMATE 60
AGE CRITERIA: Head of household	d must be 18 years	or older	WAITI	.IST FOR PARKING:		TO REMAIN ON W CALL EVERY (
			PARKING INF		PET INFO	: Р	ETS OK: YES
			Included			nimals ok, but only o ories listed below:	ne from each of
	ASSET LIMIT	S: NONE			one doa (under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERT	Y: NO			GENERAL		into an animima.
Cannot own a hou			LEASE:		homeless	ENCES: Domestic V in transitional shelte	
			1 year		displaced		
					Funding:	Fed Low Inc Pub Hs	ing 100%
INCOME CRITERI						tions must be 3 yrs a ethamphetamine or s	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$00; 3 persons - \$68, 00; 5 persons - \$82, 00; 7 persons - \$94,	500; 200;	FURNISHED: Partly furnish appliances or	edmajor			
1-PERSON MAXIM	UM MONTHLY INC	OME:	4570		į.		

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APPLY TO: Mark Development, Inc. APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Unit Type:	
MANAGER: MANAGER: APPLY ADDRESS: 3165 Waialae Avenue, Suite 200, Honolulu, Hi. 96816 APPLY ATTN: APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Minimum INCOME Required: Studio: 80 962 One Bdrm: 24 1024 Two Bdrm: 0 Three Bdrm: 0 Four	y
MANAGER: APPLY ADDRESS: 3165 Waislae Avenue, Suite 200, OUT APPLY ATTN: APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Unit Type: Number of UNITS: RENT: RENT: Required: Sq FT: of People Of Peop	
APPLY TO: Mark Development, Inc. APPLY ATTN: APPLY ATTN: BEMAIL: mdihawaii.com/moliilil APPLY PHONE: 808-735-9099 FAX: 781-292-3427 BEMAIL: mdihawaii.com/moliilil AXIMUM Number of People: All Number	
APPLY ATTN: APPLY ATTN: BMAIL: mdihawaii.com/moiliili APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Unit Type:	Γ-OF-STATI PLICATION
APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Unit Type:	CCEPTED:
APPLY PHONE: 808-735-9099 FAX: 781-292-3427 Unit Type: Number of UNITS: RENT: RENT: RENT: Required: SQ FT: MINIMUM Number of People: All Number of People: Required: SQ FT: MINIMUM Number of People: Studio: SQ FT:	
Studio: 80 962 One Bdrm: 24 1024 Two Bdrm: 0 Four Bdrm: 0 Four Bdrm: 0 Total Units Section (4 units) \$553; 50% AMI Studio (72 units) \$62; 60% AMI Studio (4 units) \$1166 30% AMI Studio (4 units) \$1024; 60% AMI One bdrm (20	
One Bdrm: 24 1024 Two Bdrm: 0 Three Bdrm: 0 Four Bdrm: 0 Four Bdrm: 0 UTILITIES INCLUDED: TOTAL UNITS 30% AMI Studio (4 units) \$553; 50% AMI Studio (72 units) \$962; 60% AMI Studio (4 units) \$1166 30% AMI One bdrm (2 units) \$87; 50% AMI One bdrm (2 units) \$1024; 60% AMI One bdrm (2 units) \$1243 - Preference for persons with a Housing Chaire Vaucher. AGE CRITERIA: AGE CRITERIA: AGE S5 plus for all residents. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: GENERAL INFO: GENERAL INFO:	EGIVER lowed:
Two Bdrm: O	
Three Bdrm: O Four Bdrm: O UTILITIES INCLUDED: TOTAL UNITS 30%AMI Studio (4 units) \$553; 50% AMI Studio (72 units) \$962; 60% AMI Studio (4 units) \$1166 30%AMI One bdrm (2 units) \$587; 50%AMI One bdrm (20 units) \$1024; 60%AMI One bdrm (2 units) \$1243 - Preference for persons with a Housing AGE CRITERIA: AGE CRITERIA: AGE S5 plus for all residents. WAITLIST FOR PARKING: PARKING INFO: PET INFO: PETS OF GENERAL INFO:	
RENT INFO: RENT IS 30% OF INCOME: NO MINIMUM WAIT LIST ESTIMATE (Months of MAXIMUM WAIT LIST ESTIMATE (MONT	
RENT INFO: RENT IS 30% OF INCOME: NO 30%AMI Studio (4 units) \$553; 50% AMI Studio (72 units) \$962; 60% AMI Studio (4 units) \$1166 as 30%AMI One bdrm (2 units) \$587; 50%AMI One bdrm (2 units) \$1024; 60%AMI One bdrm (2 units) \$1024;	
MINIMUM WAIT LIST Solva AMI Studio (4 units) \$553; 50% AMI Studio (72 units) \$962; 60% AMI Studio (4 units) \$1166 30% AMI One bdrm (2 units) \$587; 50% AMI One bdrm (20 units) \$1024; 60% AMI One bdrm (2 units) \$1243 - Preference for persons with a Housing Chaice Voluber AGE CRITERIA: Age 55 plus for all residents. WAITLIST FOR PARKING: PARKING INFO: PET INFO: PET SOL Covered parking ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: GENERAL INFO:	YES
WAITLIST FOR PARKING: PARKING INFO: PET INFO: PETS OF Covered parking ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: GENERAL INFO:	T (3): 1 T = 3
ASSET LIMITS: Covered parking AN OWN RESIDENTIAL PROPERTY: GENERAL INFO:	(:
	r
ASSET LIMIT INICO	
ASSET LIMIT INFO: LEASE: Laundry room and community resource on-site. Roof top space for residents.	ce center
NCOME CRITERIA: FURNISHED: Full range, refrigerator and garbage disposal.	
-PERSON MAXIMUM MONTHLY INCOME: 4575	

	Last Comple	ete Update:	2/7/2022			AREA:	Nanakuli
PROJECT NAME:	HALE MAKANA	O'NANAI	KULI			PROJECT TYPE:	Family
ADDRESS:	89-201 Lepeka Ave.					PHONE: 620-903	7, 754-7559 (cell)
CITY	Wai'anae	STATE: HI	ZIP:	00700		FAX: 620-903	8
CITT.	vvaranae	STATE. HI	ZIF.	96792			
APPLY TO	Annie Au Hoon, Resident Inc. Hale Makana O'Nanak Application Division		ark Developmer	Main Office	eka Ave., E101		OUT-OF-STATE APPLICATION ACCEPTED: YES
	: 735-9099, then 1			FAX: 781-295-3427	7	www.mdihawaii.con anniea@mdihawaii.	com
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:						
	3drm : 15	0			1	3	
	Bdrm: 8	0			3	7	
Three E		0			3	,	YES
Rents are approxi	NT IS 30% OF INCOME mately 30% of income. redit checks are done.	YES	UTILITIES INC Water; utility al			TOTA MINIMUM W/ ESTIMATE (MAXIMU LIST ES	(Months): 24
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be of adult age at ti-family Complex includes.		WAITLI	ST FOR PARKING:	PET INFO:	CALL EVERY (
AN OWN BESIT	ASSET LIMITS: DENTIAL PROPERTY:	NO	who can show	t car registration,	Accomada animal GENERAL	tion considered for	verifiable service
ASSET LIMIT INFO		NO	LEASE:		Funding:	RHTF, LIHTC, USD	A RD rent assist.
			1 year Recertification	annually	Gated con 3 ground-f 1bdrm)	nanager onsite nmunity loor handicaped uni ng, ramps.	ts (2-2-bdrm, 1-
INCOME CRITERI					Application	n available at www.r units are ADA for he	ndihawaii.com aring/vision
2 persons \$24 3 persons \$27 4 persons \$30	%AMI 40% AMI 1,120 \$28,160 4,120 \$32,160 7,150 \$36,200 0,150 \$40,200 2,580 \$43,440		FURNISHED: Stove, Refrige	rator	impaired a	and these are on the ONSE in 2021. Las	2nd floor.
1-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u> :	2346		Į.		

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Last Compl	ete Update:	1/4/2022			AREA:	Kapolei
HALE MOENA	KUPUNA			PRO	JECT TYPE:	Elderly
1020 Wakea Street				РНО	NE : 466-080)1
Kapolei	STATE: HI	ZIP:	96707	F	AX : 466-080)2
₹:						OUT-OF-STAT
D: Manager's Office			Kapolei, HI	96707		APPLICATION ACCEPTED:
N:						
E: 466-0801			FAX: 466-0802			
Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:		-	CAREGIVER Allowed:
Studio:	1258					
Bdrm:	1701					
Bdrm:						
ed. ipplication fee of \$30 in cl cash).	heck or				MINIMUM W ESTIMATE MAXIMU	
55 Ida						
oe 55 or older.						PETS OK: YES
ASSET LIMITS:		Parking is incluction come, first ser is ample street	uded on a first ved basis. There t parking for	One pet per apa	rtment with a	\$350 one-time pet
DENTIAL PROPERTY:		visitors and ex	tra resident cars.			
RIA:		LEASE:		Huge windows the Undercabinet lig Lobby, Trash Ch Covered Parking Deck, No smoking High-speed elev	hat open; Bre hting; nute,TV Loun g, 9,166 Sq. F ng allowed or ators, walkab	athtaking views; ge t. Recreation the property le neighborhood;
ns: MI, and 60% AMI	1			building access Security camera laundry;24-hour	s in common	areas; on-site
	HALE MOENA 1020 Wakea Street Kapolei R: C: Manager's Office N: E: 466-0801 Type: Number of UNITS: Bdrm: Bdrm: Bdrm: Bdrm: Bdrm: Cash). posit in check or money of ds). Is a separate of waitlist one 55 or older. ASSET LIMITS: DENTIAL PROPERTY: FO: RIA: BS:	Kapolei STATE: HI R: C: Manager's Office N: E: 466-0801 RENT: Studio: 1258 Bdrm: 1417 Bdrm: 1701 Bdrm: 1	HALE MOENA KUPUNA 1020 Wakea Street Kapolei STATE: HI ZIP: Kapolei STATE: H	HALE MOENA KUPUNA 1020 Wakea Street Kapolei STATE: HI ZIP: 96707 R: APPLY ADI 1020 Wakea Kapolei, HI 1020 Wakea	HALE MOENA KUPUNA 1020 Wakea Street Rapolei STATE: HI ZIP: 96707 R: APPLY ADDRESS: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 R: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 REMAIL: Webs Email Minimum Income of Units: RENT: Income of Units: RENT: Income of Units: Required: Income of People of Units: Remail Income of People of People of State of Composition of the Composition of th	HALE MOENA KUPUNA 1020 Wakea Street Rapolei STATE: HI ZIP: 96707 R: APPLY ADDRESS: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 R: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 R: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 R: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 REMIT: Number of UNITS: RENT: RENT: RENT: Required: SQ FT: Required: SQ

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	Last Compl	lete Update:	2/7/2022			AREA:	Pearl City
PROJECT NAME:	HALE MOHAL	U II Family	I			PROJECT TYPE:	Family
ADDRESS:	781 + 779 Kamehameh	na Hwy				PHONE: 456-942	20
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX:	
MANAGER					ADDRESS: ehameha Hwy., I 6782	Pearl City,	OUT-OF-STATE APPLICATION
APPLY TO	: Locations						ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	: 456-9420			FAX: 456-9406	EMAIL:	http://www.location ble-rentals.aspx	srentals.com/afforda
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One E	Bdrm:						
Two E	Bdrm: 126	950	2.5x rent	595			
Three E	Bdrm: 42	1325	2.5x rent	751			
Four B	Bdrm:		<u> </u>				YES
		E: NO	Water & sewe			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:			ķ			TO REMAIN ON W	STIMATE 60
			WAITL	IST FOR PARKING	G:	CALL EVERY	
			PARKING INF	O:	PET INFO	: F	PETS OK: NO
Į	A COET LIMITO		\$50/month				
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INFO	O:		LEASE:		4 handica On-site m Landscap 2 parking	ed community area stalls with 3 bdrm u	s
INCOME CRITERIA: 30% of AMI: 1 Person \$25,320, 2 persons \$28,920 50% of AMI: 1 Person \$42,220, 2 persons \$48,200 60% of AMI: 1 Person \$50,640, 2 persons \$57,840				osal, refrigerator, window coverings,	walk in (a office entrance 2020 Upd	ns: entals.com application box outsi rance) ate - Info from Web PONSE IN 2021. La	site
	NUM MONTHLY INCOM		3517 4017				

	Last Comple	ete Update:	2/7/2022				AREA:	Pearl City
PROJECT NAME:	HALE MOHALU	I II SENIOR				F	PROJECT TYPE:	
ADDRESS:	785 Kamehameha High	way					PHONE: 456-942	20
CITY:	Pearl City	STATE: HI	ZIP:		96782		FAX : 456-940	06
	I can ony	<u> </u>			00/02			
MANAGER	t: Kainoa Aitaro				APPLY AD	DRESS: anagement Divis	ion 614	OUT-OF-STATE
APPLY TO	: Locations					ve., Suite 102, F		APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	E: 456-9420			FAX:	456-9406		ttp://www.location le-rentals.aspx	srentals.com/afforda
	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 163	925	2 x rent		432			
	Bdrm:	923	ZXIEII		432			
Three I								
Four I	Bdrm:			İΓ				YES
RENT INFO: RE 9 Units - 30%Al	:NT IS 30% OF INCOME: MI - \$565		TILITIES INC					L UNITS: 163
130 Units - 60% A	•		,,				MINIMUM W ESTIMATE	
Food stamp &/or hused to meet min.	housing subsidy (Sect 8) . income.	may be						JM WAIT STIMATE 60
AGE CRITERIA:						Т	O REMAIN ON W	/AITLIST
	be 55 and older at occup pted up to 6 months prior	to			PARKING:	_	CALL EVERY	
applicant reaching		P	ARKING INFO			PET INFO:	F	PETS OK: NO
,		a	estricted to te	cupancy	shall be			
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		estricted to te own a vehicle; ovailable			J GENERAL II	NFO:	
ASSET LIMIT INF			EASE:			155 unit plu	s 8 handicap-acc	essible ones; multi-
			months - mo		1	services; loc	lding with activitie cked entry doors;	coin-operated
)	ear - some ur	nits		convenient t	elevators at both to bus and shopp	ing; on site
INCOME CRITER	IA:					HHFDC, LIF	nager. Financed HTC, RHTF, HMM	
Maximum Income 1 Pers			URNISHED:				: locationsrentals	
30% AMI \$26,46 60% AMI \$52,92	60/yr \$30,340/yr	r f	Range/oven, g efrigerator/fre looring, windo conditioner	ezer, vir	nyl	2021 Updat	box outside of rele - Information from NSE IN 2021. La 7/2019	om Website
1-PERSON MAXIM	IUM MONTHLY INCOME	i: 4	410]		
2-PERSONS MAXI	IMUM MONTHLY INCOM	1E: 5	040					

		Last Compl	ete Update:	10/15/2021			AREA:	Pearl City	
PROJECT NAME:	HALE	MOHAL	J SENIOR	APARTME	ENTS		PROJECT TYPE:	Elderly	
ADDRESS:	800 Thire	d St.					PHONE: 456-036		
01774	<u> </u>						FAX: 456-088	35	
CITY:	Pearl Cit	ty	STATE: HI	ZIP:	96782		,		
		Semana, Res	ident Manager		APPLY ADI 800 Third S Pearl City H	t.		OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	:					FMAII :	halemohalu@cbmg		
APPLY PHONE	: 456-036	68			FAX: 456-0885	LIVIAIL.	maicmonaid@comg	group.net	
Unit	Type:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER	
	,, ·	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:	
Si	tudio:	42	618	2x rent	420	1	2	YES	
One E	3drm:	30	723	2x rent	526	1	3	YES	
Two E	Bdrm:								
Three E	3drm:								
Four E	Bdrm:							YES	
Project also has 1: people, \$698 mon Must respond in a from management	36 efficier th, min. ir timely ma	ncy apts (436 s ncome - \$1396 anner to comm	sq ft, max 2 mo.) nunication	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 8	
AGE CRITERIA:								12	
One member mus	t be 55+;	The other mer	mber can	WAITLI	ST FOR PARKING:		TO REMAIN ON W		
be any age				PARKING INFO	O: NO	PET INFO): F	PETS OK: YES	
]	4.0	OCT LIMITO	NONE	Parking include serve - NOt gu	ed; First come first uaranteed		s under 40 lbs, neut I license. \$100 pet d		
AN OWN RESID		PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INFO		THOI EITH	1120	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				n month-to-month studios	outside h	vers are allowed with MD letter; can work home. ave 5 years landlord history and 2 al references or 5 personal references			
INCOME CRITERI		ma flavihility		FURNISHED:		Communi Free shut	ity room, laundry, bb ttle service	oq area	
Maximum Annual (studio) \$43,260 (epersons - \$49,440	Income: 1 efficiency	1 person - \$38, /1bdrm) (60% /		Partly furnishe	edmajor ly. Ceiling fans	>7 yrs fo	dicap accessible units for criminal record + HOME subsidies		
1-PERSON MAXIM	ILIM MON		F·	3355					

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	Last Comp	lete Update:	2/7/2022			AREA:	Pearl City
ROJECT NAME:	HALE O' HAU	OLI			PF	ROJECT TYPE:	
	950 Luehu St.				PI	HONE: 455-474	14
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX: 455-438	34
MANAGEF	R: Collette Sanchez, Ma	0 /		APPLY AD			
APPLY TO	Riyah, Assistant Mana D:	ager		On-Site; Ma	anager's Office (#1	02)	OUT-OF-STA APPLICATIO ACCEPTEI
APPLY ATTN	N:						YES
APPLY PHONE	E: 455-4744			FAX: 455-4384		auoli@cmiweb.no w.haleohauoli.co	
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 99	0		497	1	3	YES
	Bdrm:						
ENT INFO: RE	ENT IS 30% OF INCOME naximum rent		UTILITIES INC Electricity and			MINIMUM W. ESTIMATE MAXIMU	
	ld must be 62 years or o	lder, or	\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ST EOD DADVING	ТО	REMAIN ON W	
ead of househo	ld must be 62 years or o can be 18 and older.		PARKING INF		PET INFO:	CALL EVERY	(Months): YES
ead of househo				O:	PET INFO:	CALL EVERY	(Months): YES
lead of householisabled, spouse	can be 18 and older. ASSET LIMITS: DENTIAL PROPERTY:	YES	PARKING INF	O:	PET INFO: Small size do note saying the	CALL EVERY For the second of	(Months): PETS OK: YES eed a doctors
ead of househo sabled, spouse AN OWN RESI SSET LIMIT INF	can be 18 and older. ASSET LIMITS: DENTIAL PROPERTY:	YES YES	PARKING INFO Parking includ	O:	PET INFO: Small size do note saying the say	GALL EVERY gs or cats, but not need a pet. FO: en and activity retifully landscape site laundry site - Unit #102, or	(Months): PETS OK: YES eed a doctors ec. center, on d, close to call and arrange a
lead of househo isabled, spouse AN OWN RESI SSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: FO: ceed maximum income	YES YES	PARKING INFO Parking includ	O: ed if available	PET INFO: Small size do note saying the saying the outdoor garded busline, beau shopping, on-Manager on stour. Funding: Low Section 8	GALL EVERY gs or cats, but not need a pet. FO: en and activity retifully landscape site laundry site - Unit #102, or	(Months): PETS OK: YES eed a doctors ec. center, on d, close to call and arrange a g Tax Credit 50%

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		Last Comp	lete Update:	10/15/2021			AREA:	Chinatown
PROJECT NAME:	HALE	PAUAHI	TOWERS				PROJECT TYPE:	Family
ADDRESS:	155 Nor	th Beretania St					PHONE: 532-353	35
CITY:	Honoluli	u	STATE: HI	ZIP:	96817		FAX: 532-353	36
MANAGER	t: Michae	el Johnson				ADDRESS:		
APPLY TO) :				On-Site			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 532-35	35			FAX: 532-3536	EMAIL:	: n/a	
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	110	1159	2.5xrent	560	1	3	YES
Two	Bdrm:	214	1391	2.5xrent	729 - 745	2	5	YES
Three	Bdrm:	72	1607	2.5xrent	937 - 959	3	7	YES
Four	Bdrm:							NO
Must have verifiate Must respond to coin a timely manne	ole reside communic	ntial history. cation from mar	nagement	Water Sewer Trash pick up			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:				įe.			TO REMAIN ON W	STIMATE 60
Head of household time of application		e 18 years or o	older at the	WAITI	LIST FOR PARKING	G:	CALL EVERY	
ппо от арриоапот				PARKING INI		PET INFO): F	PETS OK: NO
1	AS	SSET LIMITS:	NONE					
AN OWN RESIDE		PROPERTY:	NO	\$40/mo		GENERAL		
ASSET EIIVIT IN	<u>o.</u>			LEASE:		Send req envelope Send req	agement to mail it uest with self addres	ssed stamped
Maximum Annual person - \$67,700 (\$87,000; 4 person 6 persons - \$112, persons - \$127,60	Income f 2 persons ns - \$96,6 150; 7 pe	s - \$77,350; 3 p 550; 5 persons -	persons - - \$104,400;	FURNISHED: Partly furnish appliances or garbage disp	nedmajor nly. Carpet, drapes,	Fully equ Meeting r Spacious	ipped Laundry Roon ooms, sprinkler/smo garden area	n oke/audio alarm
1-PERSON MAXIM	NOM MUI	NTHLY INCOM	E:	5642				
2-PERSONS MAXI	ІМИМ МО	ONTHLY INCO	ME:	6446				

		Last Com	plete Update:	10/15/2021			AREA:	Lanakila
PROJECT NAME:	HALE	PO'AI -	NOT ACC	EPTING AF	PLICATIONS	5	PROJECT TYPE:	Elderly
ADDRESS:	1001 No	orth School St					PHONE: 832-344	15
CITY:	J Honoluli	1	STATE: HI	ZIP:	96817		FAX: 832-179	95
	Jironolak		, <u>, , , , , , , , , , , , , , , , , , </u>		00011			
MANAGER	: Joseph	ваха			APPLY AD			OUT-OF-STATE
APPLY TO	: Hawaii	Affordable Pr	operties Inc.		дру оп о	ite		APPLICATION ACCEPTED:
APPLY ATTN	: Joanna	a Li						NO
APPLY PHONE	: 832-34	45			FAX: 832-1795		nttp://hawaiiafforda properties/	ble.com/residential-
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:	80	170	NO	390	1	1	YES
One E	Bdrm:	126	195	NO	544	2	2	YES
Two E	Bdrm:							
Three E	3drm:							
Four E	Bdrm:							NO
RENT INFO: REI Rent is 30% of inc 1bdrm \$195. All h floor Security Deposit e **********WL CLOS	come with andicapped	n studio minimoed units are o	on the first	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 60
AGE CRITERIA:				p.			LIST ES TO REMAIN ON W	STIMATE (AUTUST
One member mus		spouse must	be 55+.	\A/A ITI	IST FOR PARKING:		CALL EVERY	
(Caregivers must I	be 18+)			PARKING INF		PET INFO:	F	PETS OK: NO
<u> </u>	AS	SSET LIMITS:	YES	Parking include parking in back				
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INFO				LEASE:			are allowed with No., spouse may remain	ID letter. If elderly
2 people: \$44,100				1 year; renew following rece		move to a state the 1st floor Yearly income Has large r	studio unit. 18 han or. ome recertification multi-purpose room	dicap units all on w/kitchen
INCOME CRITERI				=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			tion to Shopping a narities Hawai'l	vailable through
Maximum Annual 2 persons - \$39,20		1 person - \$3	4,300	FURNISHED: Partly furnishe appliances on			end to communicati ent iin a timely man	
I-PERSON MAXIM	IUM MOI	NTHLY INCOM	ME:	2858		J		
2-PERSONS MAXII	мим мс	ONTHLY INCO	OME:	3266				

		Last Compl	ete Update:	1/6/2022			AREA:	Barbers Point
PROJECT NAME:	HALI	E UHIWAI	NALU (Bu	ildings 34	and 35)		PROJECT TYPE:	Single Veterans
ADDRESS:	91-1078	8 Yorktown Stre	et				PHONE: 682-194	19
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 682-197	70
APPLY TO	RTaylo 9: 91-107 Kapolo	le Taylor, Direct or@Cantwell-An 78 Yorktown St. ei HI 96707	derson.com	ŭ	APPLY AD 91-1078 Yo Kapolei HI	orktown St.		OUT-OF-STATE APPLICATION ACCEPTED: YES
	APPLY ATTN: Cloudbreak Hawaii LLC / Leasing APPLY PHONE: 682-1949				FAX : 682-1970	EMAIL:	CloudbreakCommu CloudbreakHawaii	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:	80 / 50	1350	1.5 x rent	208-374	1	1	
One I	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:]	NO
RENT INFO: RE	NT IS 30	0% OF INCOME	: NO	UTILITIES INC	CLUDED:		TOTA	L UNITS: 130
A clean + sober e \$1200 - \$1350 Bldg 34 - 80 units Accept HUD VAS subsidies. All unit	; Bldg.35 H vouch	5 - 50 units. er and other ren		Electric, water	r, sewer, trash			
AGE CRITERIA:							TO REMAIN ON W	Į.
SINGLE ADULT \	/ETERA	NS		WAITL	IST FOR PARKING:		CALL EVERY	(Months): 6
				PARKING INF	1	PET INFO	: F	PETS OK: NO
I				1 stall per uni	I			
AN OWN RESI		SSET LIMITS: PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF				LEASE:		Funding:	RHTF, Formerly US	S Vets
				1 year		5 handica Case Mar	n August 2001 p units nagement Services, nachines, Elevator	Coin laundry,
INCOME CRITER	IA:					Applicatio	n: oudbreakHawaii@C	antwell-
Affordable housing \$250 - \$84,600 pe	MCOME CRITERIA: Iffordable housing 250 - \$84,600 per year (Depending on subsidy type)			FURNISHED:			nudbreaknawaii@C .com gement to email it	antwen-
J						<u> </u>		

2-PERSONS MAXIMUM MONTHLY INCOME:

_		Last Comp	lete Update:	10/18/2021				AREA:	Waianae
PROJECT NAME:	HALE	WAI VI	STA II				PROJEC	T TYPE:	Family
ADDRESS:	86-086	Farrington Hwy	/.				PHONE:		
CITY:	Waiana	е	STATE: HI	ZIP:	96792		FAX:	696-825	59
MANAGER:	: Barbar	ra Ramos				ADDRESS: Farrington Highwa	nv.		OUT-OF-STAT
APPLY TO:	: Location	ons LLC				e, HI 96792	iy		APPLICATION ACCEPTED:
APPLY ATTN:	:								YES
APPLY PHONE:	: 696-82	258			FAX: 696-8259		http://www ble-rentals		srentals.com/afford
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXI Numb Ped		CAREGIVER Allowed:
One B									
Two B	3drm:	99	1177	2.5 x rent	595				
Three B	3drm:	33	1374	2.5 x rent	751				
Four B	3drm:						<u> </u>		YES
RENT INFO: REI 7 Two Bdrm (30% 83 Two Bdrm (50% (60% AMI) end uni 33 3 Bdrm (60% A	o AMI*) = % AMI*) its -= \$1: .MI*) = \$	= \$677 = \$1177; 11 T 202; 33; 1374		Water, sewer,			ES ⁻	IMUM W TIMATE	AIT LIST (Months):
* AMI- see income	eligibilit	y below							STIMATE 1
AGE CRITERIA: Head of household	d must b	e 18 years or o	older	\\/ \ ITI	IST FOR PARKIN	IG:	TO REMA CALL	_	/AITLIST (Months):
				PARKING INF		PET INFO	:	F	PETS OK: NO
	Α:	SSET LIMITS:	NONE	1st stall free, \$50/month	additional stalls	fish ok			
AN OWN RESID						GENERAL	. INFO:		
ASSET LIMIT INFO	O:			LEASE:					elopment Corp. g Tax Credits;
				12 months		RHTF Handicap bdrm	accessible	units - F	ive 2 bdrm & 3 3
INCOME CRITERI	A:			,		Application	n: ental.com		
30% of AMI: 1 pers 50% of AMI: 1 pers 60% AMI: 1 persor	son \$44,	100; 2 persons	\$ \$50,400;	FURNISHED: Stove, Oven, disposal, blind	Refrigerator only, ds	pick up fro Waitlist a	om manage	e contac	e ted via mail when
-PERSON MAXIM	UM MOI	NTHLY INCOM	1E:	4410					
-PERSONS MAXI			ME.	5040					

		10/18/2021			AREA:	Waianae	
HALE WAI VIS	STA I			I	PROJECT TYPE:	Family	
86-084 Farrington Hw	у				PHONE: 696-825	58	
Waianae	STATE: HI	ZIP:	96792		FAX: 696-825	58	
: Barbara Ramos						OUT OF STA	
: Locations LLC			Waianae, H	I 96792		OUT-OF-STATATION APPLICATION ACCEPTED	
:						YES	
: 696-8258			FAX : 696-8259	b	le-rentals.aspx		
Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Bdrm:		J					
8drm: 63	1177	2.5 x rent	595				
3drm: 21	1374	2.5 x rent	751				
Bdrm:						YES	
AMI*) = \$677 % AMI*) = \$1177 (3 tw le) unit (50% AMI*) = \$12	vo bdrms are	Water and sev	ver included; Must pa	ay	MINIMUM W ESTIMATE MAXIMU		
I must be 18 vears or o	older			Т	O REMAIN ON W CALL EVERY		
,				PET INFO:	F	PETS OK: NO	
		vehicle registr	ation & insurance	fish ok	NEO:		
D:	1.20	LEASE:		Owner: Ha	waiʻi Housing Dev		
		12 months		RHTF Application: pick up fron Waitlist app	locationsrental.co n manager's office dicants are contac	om e	
						cameras, visitor	
NCOME CRITERIA: 80% of AMI: 1 person \$26,460; 2 persons \$30,240 50% of AMI: 1 person \$44,100; 2 persons \$50,400			sal, 18 cu ft	parking, coi	king, coin-op laundry facility on each floor.		
	### Waianae ### Barbara Ramos ### Locations LLC ### 696-8258 Type:	### STATE: HI ### Waianae	Waianae STATE: HI ZIP: Barbara Ramos Locations LLC G96-8258 Type: Number of UNITS: RENT: RENT: RENT: RENT: Required: Req	### STATE: HI ZIP: 96792 ### Barbara Ramos ### Barbara Ramos ### Apply Abla 86-084 Farr Waianae, HAttn: Office ### Consider Holder Far Waianae, HAttn: Office ### Consider Holder HATT HATT HATT HATT HATT HATT HATT HAT	### STATE: HI ZIP: 96792 ### STATE: HI ZIP: 96792 ### APPLY ADDRESS: 86-084 Farrington Hwy Waianae, HI 96792 Attn: Office ### Attn: Office ### AWAII	### PHONE: 696-825 Barbara Ramos	

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			lete Update:	2/7/2022			AREA:	Haleiwa	
PROJECT NAME:	HALEI	NA SEN	IIOR CITIZ	ENS CEN	TER		PROJECT TYPE:	Elderly	
ADDRESS:	66-477 Paa	alaa Rd.					PHONE: 637-64	55	
CITY:	Haleiwa		STATE: HI	ZIP : 96712			FAX:		
	R: Thomas D		lent Manager		APPLY AD 1165 Bethe Honolulu, F	el St. 2nd Fl.		OUT-OF-STATE APPLICATION	
								ACCEPTED:	
APPLY ATTN		1		EMAI FAX : 637-7044					
Unit		lumber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	itudio:								
One	Bdrm:	63	0						
Two	Bdrm:								
Three	Bdrm:								
Four	Bdrm:								
RENT INFO: RE Deposit of market		OF INCOMI	E: YES	UTILITIES INC Water, \$85 uti			MINIMUM W ESTIMATE MAXIM	(Months): 12	
AGE CRITERIA:				įr.			TO REMAIN ON V	STIMATE 48	
Head of househol	ed. Family m	embers car	n be		IST FOR PARKING:	-	CALL EVERY	(Months): 6	
children. Roomm be 18+	ate must be	18+, careg	ver must	PARKING INF Parking not in limited.		PET INFO	:	PETS OK: NO	
		ET LIMITS:							
AN OWN RESIDENCE ASSET LIMIT INF		ROPERTY:		LEASE.		GENERAL Funding:	INFO: 100% Section 8 bui	iilding	
				LEASE:		8 handica	pped units		
						NO RESF update 20	PONSE in 2021; La: 020.	st completed	
INCOME CRITER									
3/2015 - follows H	IUD guidelin	es.		Partly furnishe appliances on					
1-PERSON MAXIN	NUM MONTH	HLY INCOM	IE:	2933]			
2-PERSONS MAX	IMUM MON	THLY INCO	ME:						

	Last Comple	ete Update:	10/13/2021			AREA:	Kakaako
PROJECT NAME:	HALEKAUWILA	A PLACE A	PARTMEN [*]	TS		PROJECT TYPE:	Family
ADDRESS:	665 Halekauwila Street					PHONE: 808-537	7-9000
CITY	Honolulu	STATE: HI	ZIP:	96813		FAX:	
OII I.	Honolulu	STATE. IN	2	90613			
MANAGER	: Danielle Delgado			APPLY ADD		Halakauwila OIIT-O	
APPLY TO	: Indigo Real Estate Ser	vices, Inc.			nter, 665 Halek olulu, Hi. 96813		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Live@halekauwilaplac	eapts.com					
APPLY PHONE	: 537-9000		F	AX : 728-0985	EMAIL:	www.halekauwilapla	aceapts.com
Unit	Type: Number	DENT	Minimum INCOME	00.57	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
	tudio: 26	1245	2 x Rent	396	1	2	
	3drm: 72	1325	2 x Rent	535	1	3	
Three B	Bdrm: 82	1571	2 x Rent	1511	4	7	
Four I		0					YES
1 1000	0	, ,	,	,		,	120
	NT IS 30% OF INCOME		JTILITIES INCLU		_	TOTA	L UNITS: 204
Based on 60% AM	r; no waitlist is maitained.	350 - 624	\$60 - Internet/Wi-	Fi/TV/phone		MINIMUM W. ESTIMATE	
score of 774 & ear	with cosigner (who has r rns 4 x rent) or increased ave unconditional approv	l deposit;				MAXIMU	JM WAIT OT THE TOTAL TOT
AGE CRITERIA:						TO REMAIN ON W	
		_		FOR PARKING:	DET INFO		
		-	PARKING INFO: 1 free parking sta	NO all per unit	PET INFO:		PETS OK: YES
•	ASSET LIMITS:						
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O:		EASE:			lula Mae bonds, LII uare footage range	
			12 months		424; 1 bed	lroom - 535 - 597; 2 093 - 1511.	
					Application	n: :auwilapalceapartm	ents com
INCOME CRITER		F	FURNISHED:		pick up fro	m manager's office	Citio.oom
1 peson: \$52,920 2 persons: \$60,48 3 persons: \$68,04 4 persons: \$75,54	0		ceiliing fans & A.d bedrooms	C.; carpeting in			
I 1-PERSON MAXIM	IUM MONTHLY INCOME	<u> </u>	1410		1		
2-DEDSONS MAY	MIIM MONTHLY INCOM	Λ Ε · μ	5040				

	Last Compl	ete Update:	7/16/2020			AREA:	Chinatown
ROJECT NAME: H	ALEWAI'OLU	SENIOR	RESIDENCI	ES (Year: 20	023)	PROJECT TYPE:	Elderly
ADDRESS:						PHONE:	,
CITY:		STATE:	ZIP:	0		FAX:	
,		ļ	,				
MANAGER:				APPLY AD	DRESS:		
APPLY TO:							OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN:							
APPLY PHONE:			ı	FAX:	EMAIL:		
Unit Typ	e: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studi	0:	0					
One Bdrr	n:	0					
Two Bdrr		0					
Three Bdrr		0					
Four Bdrr	n:	0]		
RENT INFO: RENT I	S 30% OF INCOME	: -	UTILITIES INCL	UDED:		TOTA	AL UNITS: 156
						MINIMUM W	/AIT LIST
						ESTIMATE	
			Į.				UM WAIT STIMATE
AGE CRITERIA:						TO REMAIN ON V	
				T FOR PARKING:	-	CALL EVERY	
			PARKING INFO:		PET INFO:		PETS OK:
	ASSET LIMITS:						
AN OWN RESIDEN					GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:			ion could start late completion in 2022	
						tar Advertiser Post	
							.04 =/ 10/=010
NCOME CRITERIA:							
			FURNISHED:		.		
]		
-PERSON MAXIMUM	MONTHLY INCOMI	Ξ:	0				
-PERSONS MAXIMUN	M MONTHLY INCOM	ЛЕ :	0				

	Las	t Compl	ete Update:	7/15/2020			ADEA	Lanakila
PROJECT NAME:	ע אין וא ט	<u> </u>	NOT ACC	EDTING /	ADDI ICATIO	NC	AREA: PROJECT TYPE:	
	851 North Sch		NOT ACC	EPTING F	APPLICATIO	CNI		
ADDRESS.	NOITH SCH	001 St.					PHONE: 586-759	
CITY:	Honolulu		STATE: HI	ZIP:	96817		FAX : 586-752	20
	: Thomas Ling	able Prop	perties Inc.		APPLY A	ADDRESS:		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Joanna Li							NO
APPLY PHONE	: 586-7595				FAX:	EMAIL:	http://hawaiiafforda properties/	ble.com/residential-
Unit	Type: Num of UN		RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 3	1	170	NO	408	1	1	YES
One I	Bdrm: 1	0	195	NO	540	2	2	YES
Two	Bdrm:							
Three I	Bdrm:							
Four	Bdrm:							YES
rent is 30% of inco \$195. Security deposit e Wait time for 1 bd Wait time for 2bdr	ome minimum s qual to 1 month drm 72 months	tudio \$17		UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	'AITLIST
One member must be Caregivers must be		e must b	e 55+;	WAITL	IST FOR PARKING	3 :	CALL EVERY	(Months): 12
Caregivers mast s	, , , , , , , , , , , , , , , , , , , ,			PARKING INF	1	PET INFO	: F	PETS OK: NO
	ASSET L	LIMITS:	YES					
AN OWN RESID		PERTY:	NO			GENERAL		
ASSET LIMIT INF				LEASE:		Caregiver tenant die	s are allowed with Nes, spouse must trar	ID letter. If elderly sfer to studio unit.
2 persons - \$44,10				1 year; renew following rece	rable yearly ertification		995 as Hale Po'ai ated laundry	
INCOME CRITER	IA:					Meeting r	oom w/kitchen and versetroom	wheelchair
Maximum Annual 2 persons - \$39,20		on - \$34,;	300;	Partly furnish appliances or		Funding:	Unknown PONSE IN 2021. Las	st completed
1-PERSON MAXIM	IUM MONTHLY	INCOME	Ē:	2858				
2-PERSONS MAXI	MUM MONTHL	Y INCOM	ΛΕ:	3266				

		Last Comp	lete Update:	2/7/2022			AREA:	Chinatown
PROJECT NAME:	HARE	OR VILL	AGE				PROJECT TYPE:	Family
ADDRESS:	901 Rive	er St.					PHONE: 528-275	53
CITY:	Honolulu	1	STATE: HI	ZIP:	96817		FAX : 566-09	14
MANAGER	: Shirley	Fludd			APPLY ADI 901 River S Honolulu, H	St.		OUT-OF-STATE APPLICATION
APPLY TO	: Locatio	ns LLC			Honoldia, H	11 900 17		ACCEPTED: YES
APPLY ATTN	l: Afforda	ble Housing D	ept.					120
APPLY PHONE	: 625-95	73			FAX : 521-2714		locationsrentals.co rentals.aspx	m/affordable-
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:	60	1495		575	1	3	
	Bdrm:	30	1990		750	2	5	
Three								
Four	Bdrm:			<u> </u>				YES
RENT INFO: RE 60% AMI: 1 Bdrm 1 Bdrm \$1,270; 2 120% AMI: 1 Bdrr 140% AMI: 1 Bdrr AGE CRITERIA: Head of household	\$1,190 ; Bdrm \$13 n \$1410; n \$1495;	2 Bdrm \$1,29 355; 2 Bdrm \$1710 2 Bdrm \$1990	0; 80%AMI:	Water + Sewe			MINIMUM W ESTIMATE MAXIMU	(Months): 6 JM WAIT STIMATE 36 /AITLIST
				PARKING INF		PET INFO:	F	PETS OK: NO
]		SSET LIMITS:		Parking includ	ded in rent			
AN OWN RESIDE		PROPERTY:	NO	15405		GENERAL 2020 UPD	INFO: ATE - Info from we	bsite
				LEASE: 1 year			ONSE in 2021. La I - 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 11,960 \$1	,000 \$93,280 \$	\$100,800	FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIM	NOM MUI	ITHLY INCOM	E:	8170		ja.		
2-PERSONS MAXI	мим мс	NTHLY INCO	ME:	9330				

		Last Comp	lete Update:	1/21/2022				Kalihi	
DDO IECT NAME.	LIAII	IVI HOME	C (UDUA I	oon) NOT	C ACCEPTING	ADD	AREA: PROJECT TYPE:		
			<mark>3 (ПРПА-І</mark>	ion) - NO	T ACCEPTING	APP		,	
ADDRESS:	1564-16	673 Meyers St.					PHONE: 832-333		
CITY:	Honolul	u	STATE: HI	ZIP:	96819		FAX : 832-338	35	
	,		,						
MANAGER	R: Julie V	Viggett , Acting	Manager		APPLY AD 1002 North			OUT-OF-STATE	
APPLY TO		ACCEPTING AF	PPLICATIONS		CATIONS	APPLICATION ACCEPTED:			
APPLY ATTN		applications offi						NO	
1	NOT A	ACCEPTING AF	PPLICATONS			EMAIL: h	nphaishereforyou.o	rg	
APPLY PHONE	: 832-59	961			FAX: 832-3461				
Unit	: Type:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER	
	1,700.	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:	
S	tudio:								
One I	Bdrm:								
Two I	Bdrm:	20	0	<u> </u>	786	2	6	YES	
Three I	Bdrm:	16	0		1034	3	8	YES	
Four I	Bdrm:	10	0		1110	4	10	YES	
,									
RENT INFO: RE				UTILITIES INC		_	TOTA	L UNITS: 46	
Minimum Rent: Or Three Bdrm - \$15	2; Four E	3drm - \$180. A	II HPHA	water and all	owance for electricity		MINIMUM W ESTIMATE		
applicants who are hpha.myhousing.c	com to ch	nange or check	their				MAXIMUM WAIT		
status. A usernan		assword is nee	ded to					STIMATE 60	
AGE CRITERIA:							TO REMAIN ON W		
Head of household older		•		WAITL	IST FOR PARKING:		CALL EVERY (Months):		
******** CLOSEI	D 8/2/20	16*****		PARKING INF	1	PET INFO:	F	PETS OK: NO	
]				first come firs	or serve				
		SSET LIMITS:				J	0		
AN OWN RESIDE		PROPERTY:	NO			GENERAL STATE HO	INFO: DUSING PREFERE	ENCES:	
Cannot own a hou	use on Oa			LEASE:		. 1.)The Elde	erly 2.) The Displac	ced 3.) Disabled	
times the applicab times that limit for			n or three	1 year		Families of was detern	// service connected deceased veterant inned to be service	s whose death connected. 5.)	
INCOME CRITER	IA:					Transitiona	rans 6.) Families roal Shelters 7.) All of		
50% AMI: 1 perso	n \$33,30			FURNISHED:		Wait			
persons \$42,800; must be <50% are government action	ea AMI u	nless displaced	l by				Funding: State Pub Hsing 100% All convictions must be 3 yrs old.		
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	IE:	3450					

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2-PERSONS MAXIMUM MONTHLY INCOME:

Last Complete Update:	10/20/2021			AREA:	Moiliili
PROJECT NAME: HAUSTEN GARDENS				PROJECT TYPE:	Elderly
ADDRESS: 808 Hausten St. CITY: Honolulu STATE: H	ZIP:	96826		PHONE: 947-342 FAX: 955-610	
MANAGER: Geraldine D. Bareng, Business Mar Indigo Real Estate Services, Inc. APPLY TO: Manager's Office	nager	APPLY ADI 808 Hauste Honolulu HI	n St.		OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN: Business Manager APPLY PHONE: 947-3423	FAX	(: 955-6105		manager@hausten www.indigorealesta	
Unit Type: Studio: One Bdrm: Two Bdrm: Three Bdrm:	Minimum INCOME Required:	SQ FT: 550	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
RENT INFO: RENT IS 30% OF INCOME: YES All rents are 30% of income. Contact information for applicant must be kept current.	UTILITIES INCLUDI \$47 allowance for e water, sewer and ga	lectricity and all		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA: Head of household must be 62+. All other members must be 62+. Caregiver over 18 allowed. Must show proof of caregiving. ASSET LIMITS: NONE	WAITLIST FOR PARKING INFO: Parking included; Contains available	OR PARKING: YES	PET INFO	TO REMAIN ON W CALL EVERY F ALLOWED. Service	(Months): 6
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO:	LEASE:		courtyard Funding: S Onsite lau Applicatio	"lanai" area in front area on each floor Section 8 100% Indry facilities	
INCOME CRITERIA: Maximum Annual Income: 50% Income Limits 1 person \$42,200 2 persons \$48,200	FURNISHED: Partly furnishedstrefrigerator, microw wood floors and blir	ave. Vinyl	envelope	om manager's office	
-PERSON MAXIMUM MONTHLY INCOME:	3517				

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	Last Compl	lete Update:	2/7/2022			AREA:	Hawaii Kai
ROJECT NAME: HA	WAII KAI R	<mark>etirement</mark>	and Assis	sted Living Co	<mark>ommu</mark>	PROJECT TYPE:	Retirement
ADDRESS: 428	Kawaihae St.					PHONE: 395-959	99
CITY: Hor	odulu	STATE: HI	ZIP:	96825		FAX: 396-082	20
911 11 1101	lolulu			30023			
	eli Chung, Assisted chael Weider, Gene		trator	APPLY AD	DRESS:		
APPLY TO:	onder Weider, Cent	oral Manager		On-Site			OUT-OF-STATI APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 39	5-9599			FAX: 396-0820	EMAIL	: michael.weider@ho	olidaytouch.com
Unit Typ	e: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
5.m. 1yp	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
Studio	0:	4500	NO	≤ 541			YES
One Bdrn	n:	6000	NO	≤ 810			YES
Two Bdrn	n:	7000	NO	≤ 1134			YES
Three Bdrn	n:	10000	NO	≤ 1950			YES
Four Bdrn	n:						NO
RENT INFO: RENT I 1 bedrm = large studio bedrm = cottage info; I weekly housekeeping, transportation, pool, ja	info; 2 bedrm = 1 b Rent includes 3 mea linen service, sche	odrm info; 3 als per day, duled		CLUDED: cluded except phone. k up included.		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
One tenant must be 55 age restriction	5+; other co-tenants	s have no	WAITL	LIST FOR PARKING:		CALL EVERY	(Months):
age rectiletion			PARKING INF	1	PET INFO		PETS OK: YES
			Parking inclu	ded	with heal	th certificate & up to	date vaccinations
	ASSET LIMITS:	NONE			J		
AN OWN RESIDEN	TIAL PROPERTY:	YES			GENERA		
ASSET LIMIT INFO: None			LEASE:		STUDIO:	ed living units. : \$3,295 - \$4,020; 39	
			Month-to-mor	nth		RM: \$4,395 - \$5,120 BDRM: \$5,495 - 6,2	
INCOME CRITERIA:			,				
No maximum annual ir	ncome.		FURNISHED:	:	.	living fee: \$2,200/mg	o and up
			Partly furnish appliances or			PONSE IN 2021 opleted update 9/7/20	017

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

Last Complete	Update: 6/1/2020	0		AREA:	,
DJECT NAME: HIBISCUS HILLS	APARTMENTS			PROJECT TYPE:	Family
ADDRESS: 94-1121 Ka Uka Blvd.				PHONE: 808-676	
CITY: Waipahu S	TATE: HI ZIP:	96797		FAX : 808-676	6-3533
MANAGER: Tashan Pacheco, Reside	nt Manager	APPLY AD	DDRESS:		OUT-OF-ST
APPLY TO:					APPLICAT ACCEPTE
APPLY ATTN:					
APPLY PHONE: 676-3533		FAX: 676-3533	EMAIL:	www.EAHHousing. hi-management@e	
Unit Type: Number of UNITS:	RENT: Minimul INCOM Require	E SO ET:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:					
Two Bdrm: 80	1650 2.5x re	nt 588	1		
Three Bdrm:					
Four Bdrm:					YES
NT INFO: RENT IS 30% OF INCOME:	NO UTILITIES	INCLUDED:		TOTA	L UNITS: 80
550 - \$1650	Water, sew	er, trash		MINIMUM W ESTIMATE	
					JM WAIT STIMATE
E CRITERIA:				TO REMAIN ON W	
ad of Household 18+	WAI PARKING I	TLIST FOR PARKING NFO: NO	: PET INFO		PETS OK: NO
		all, \$75 2nd stall	TET INTO	· ·	LTO OK. NO
ASSET LIMITS: NOWN RESIDENTIAL PROPERTY: YE	· ·		GENERAL	INFO:	
SET LIMIT INFO:	LEASE:		On-site m		
	1 year		Accepts \$	•	
			Call or en	nail to request applic	cation
COME CRITERIA: x income for 50 units is 80% AMI	FURNISHE	D·		om manager's office	9
income limits on 30 units	Partly furni	shedmajor only; ceiling fans; air	_ www.EAF	lHousing.org	
ERSON MAXIMUM MONTHLY INCOME:	0				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Cor	nplete Update:	10/13/2021			AREA:	Kakaako
PROJECT NAME:	HONUAKAH	A			- 1	PROJECT TYPE:	Elderly
ADDRESS:	545 Queen St.					PHONE: 522-79	19
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 522-79	17
	: Tamara Young, Re Administrative Ass		eff Lau - Projects		DRESS: Street, Honolulu Resident Mana	,	OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN	l: Affordable Housing	Dept.					YES
APPLY PHONE	: 808-522-7919		ı	FAX: 5227917	EMAIL: C	RYSTAL.YEE@l	ocationshawaii.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	960	2x rent	350	1	2	YES
One I	Bdrm: 9	1150	2x rent	488	1	2	YES
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						YES
Waitlist for 1 bedre Updates not requi applicants must re	NT IS 30% OF INCC oom is taking over 4 red to remain on wait espond to communica nent in a timely mann	years. list, however ation from	UTILITIES INCL Electricity and w			MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:					Т	O REMAIN ON V	
All persons in hou	sehold must be 62 ye	ears or older.	WAITLIS	T FOR PARKING:	PET INFO:	CALL EVERY	(Months): PETS OK: NO
	ASSET LIMIT DENTIAL PROPERT		Car stall is \$80 in motorcycle/scool mo; requests are wait list, as all stassioned.	oter stall is \$50 e accepted on a	Service animals ok GENERAL INFO:		
ASSET LIMIT INF	<u>U:</u>		LEASE: 12 months		conditioning Transportat Catholic Ch Social servi	ion to Shopping a arities Hawaii ces on site, part-t	vailable through
I INCOME CRITER	IA:		,		opened 199		
Must be below 60°)	FURNISHED: Major appliance tiles.	s, carpet or vinyl	3 for vision/	nits-1 one bed, 7 s	
1-PERSON MAXIM	IUM MONTHLY INCO	DME:	4410				

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	Last Comp	lete Update:	1/21/2022			AREA:	Kahaluu
PROJECT NAME:	HOOKIPA KAH	HALU'U (H	PHA-wind	I) - NOT ACCE	PTIN	PROJECT TYPE:	Family
	47-330 Ahuimanu Rd.			-		PHONE: 233-376	66
]					FAX: 233-376	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		200 070	,,,
MANAGER	: Roberta Kahele			APPLY AD	DRESS:		
APPLY TO	: HPHA NOT ACCEPTING AI	PPLICATIONS		1002 North Honolulu, H NOT ACCE		ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications off NOT ACCEPTING AI						NO
APPLY PHONE	: 832-5961			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: 8	0		540			YES
	Bdrm: 8 Bdrm: 32	0		697	2	6	YES
Three I		0		891	3	8	YES
Four I							
Minimum Rent: \$0 the waitlist are to g change or check to	NT IS 30% OF INCOMI), All HPHA applicants was to the control of	who are on com to e and	UTILITIES INC	CLUDED: owance for electricity		MINIMUM W. ESTIMATE MAXIML	(Months): 36 JM WAIT STIMATE 60
Head of household	d must be 18 years or o	lder	\\/ A T	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	F	PETS OK: YES
]	ASSET LIMITS:	NONE	Included		the categori	mals ok, but only o es listed below: der 25 lbs) or cat	one from each of
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL I	NFO:	
Cannot own a hou			LEASE:		PREFEREN homeless in displaced.	NCES: Domestic Voltansitional shelter	iolence victims; ers; involuntary
					Funding: Fe	ed Low Inc Pub Hs	ing 100%
INCOME CRITER						ons must be 3 yrs an amphetamine or	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350	· ·	Partly furnish appliances or	edmajor	NO RESPO	DNSE IN 2019 eted update 10/05/	
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	4570		p.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

APPLY TO: Linda West APPLY ATTN: Linda West APPLY PHONE: 847-8465 FAX: Unit Type:			Last Compl	ete Update:	11/2/2021			AREA:	Kalihi
MANAGER: Frederick Henry, Building Manager; Linda West, Office Manager APPLY TO: Linda West APPLY ATTN: Linda West APPLY ATTN: Linda West APPLY PHONE: 847-8465 FAX: Unit Type:	PROJECT NAME:	ISLA	ND WEST					PROJECT TYPE:	Family
MANAGER: Frederick Henry, Building Manager; Linda West, Office APPLY ADDRESS: On-Site 9am - 5pm M - F OUT-OF-STAT APPLY ATDRESS: On-Site 9am - 5pm M - F OUT-OF-STAT APPLY ATTN: Linda West APPLY PHONE: 847-8465 FAX: Unit Type: Number of UNITS: RENT: NOME Number of UNITS: RENT: NOME Number of People: People: People: Number of People: People: Number of People:	ADDRESS:	607 No	rth King St.					PHONE: 847-846	65
MANAGER: Frederick Henry, Building Manager; Linda West, Office Manager APPLY ADDRESS: On-Site 9am - 5pm M - F APPLYATIN: Linda West APPLY ATTN: Linda West APPLY ADDRESS: On-Site 9am - 5pm M - F OUT-OF-STAT APPLICATION ACCEPTED NO EMAIL: Linda @ HSiservices.net EMAIL: Linda @ HSiservices.net ASIMINIMUM Number of Popple Po	CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX: 808-442	2-0407
Manager APPLY TO: Linda West APPLY ATTN: Linda West APPLY PHONE: 847-8465 FAX: Unit Type: Number of UNITS: RENT: RENT: REQUired: SQ FT: MINIMUM Number of People People: CAREGIVER Allowed: SQ FT: Allo]							
APPLY PHONE: 847-8465 FAX: CAREGIVER Minimum INCOME Required SQ FT Required SQ FT Required SQ FT Allowed SQ FT Required SQ FT SQ	APPLY TO	Manag	ger West	ling Manager; L	Linda West, Office			F	OUT-OF-STATE APPLICATION ACCEPTED: NO
Unit Type: Number of UNITS: RENT: RENT: Required: SQ FT: Number of People: CAREGIVER Allowed: Studio: 400 750 1400 144 1 2adit,1kid YES One Bdrm: 3 1565 2750 300 1 3adit,1kid YES Two Bdrm: 1 1800 3050 400 2 4adit,1kid					F	AX:	EMAIL:	Linda@HSIservices	s.net
Studio: 400 750 1400 144 1 2adit,1kid YES One Bdrm: 3 1565 2750 300 1 3adit,1kid	Unit	Type:	Number						CARECIVER
One Bdrm: 3 1565 2750 300 1 3adit,1kid Two Bdrm: 1 1800 3050 400 2 4adit,1kid Three Bdrm:		турс.		RENT:		SQ FT:			
Two Bdrm: 1 1800 3050 400 2 4adit,1kid Three Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO Building A - rent is \$700 - Min income = \$1400 Building B - rent is \$750 - Min income = \$1400 Building B - rent is \$750 - Min income = \$1600 [169 sq. ft] Min Income requirement waived if have rep payee; Plus \$100 for extra person. Respond to mgmt in a limbly magnet is remained with time of application. AGE CRITERIA: Head of household must be 18 years or older at the time of application. ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. NO maximum annual income. FURNISHED:	S	tudio:	400	750	1400	144	1	2adlt,1kid	YES
Three Bdrm: Four Bdrm: NO RENT INFO: RENT IS 30% OF INCOME: NO Building A - rent is \$700 - Min income = \$1400 Building B - rent is \$750 - Min income = \$1600 [169 sq. ft] Min Income requirement waived if have rep payee; Plus \$100 for extra person. Respond to mgmt in a timely proposed to separate a waitlier. AGE CRITERIA: Head of household must be 18 years or older at the time of application. ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. NO maximum annual income. FURNISHED: TOTAL UNITS: 400 MINIMUM WAIT LIST ESTIMATE (MINIMUM WAIT LIST ESTIMATE (M	One I	Bdrm:	3	1565	2750	300	1	3adlt,1kid	
RENT INFO: RENT IS 30% OF INCOME: NO Building A - rent is \$700 - Min income = \$1400 Building B - rent is \$750 - Min income = \$1600 [169 sq. ft] Min Income requirement waived if have rep payee: Plus \$100 for extra person. Respond to mgmt in a blood from the time of application. AGE CRITERIA: Head of household must be 18 years or older at the time of application. ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. NOME CRITERIA: No maximum annual income. FURNISHED:			1	1800	3050	400	2	4adlt,1kid	
RENT INFO: RENT IS 30% OF INCOME: NO Building A - rent is \$700 - Min income = \$1400 Building A - rent is \$750 - Min income = \$1600 [169 sq. ft] Min Income requirement waived if have rep payee; Plus \$100 for extra person. Respond to mgmt in a Building B - rent is \$750 - Min income = \$1600 [169 sq. ft] Min Income requirement waived if have rep payee; Plus \$100 for extra person. Respond to mgmt in a Building B - rent is \$750 - Min income = \$1400 MINIMUM WAIT LIST ESTIMATE MAXIMUM WAIT LIST ESTIMATE WAITLIST FOR PARKING: PARKING INFO: YES \$35/month (first come - first served basis) ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. FURNISHED: FURNISHED:									
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. INCOME CRITERIA: No maximum annual income. \$35/month (first come - first served basis) GENERAL INFO: Handicapped access is from parking lot at back. Small rooms with no kitchen. Can bring in own refrigerator and hot plate. All units are unfurnished.	Building A - rent is Building B - rent is [169 sq. ft] Min Income requir Plus \$100 for extra simply manner to read AGE CRITERIA:	s \$700 - s \$750 - rement was person	Min income = \$1 Min income = \$1 vaived if have replance Respond to me	p payee;	Electricity and wa	ter FOR PARKING:	PET INFO	MINIMUM W ESTIMATE MAXIMU LIST ES TO REMAIN ON W CALL EVERY	AIT LIST (Months): 1 JM WAIT STIMATE 1 /AITLIST (Months): 0
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: LEASE: Month-to-month; or 1 year with Section 8 voucher. INCOME CRITERIA: No maximum annual income. GENERAL INFO: Handicapped access is from parking lot at back. Small rooms with no kitchen. Can bring in own refrigerator and hot plate. All units are unfurnished.	<u> </u>	А	SSET LIMITS:	NONE	\$35/month (first o				<u> </u>
Month-to-month; or 1 year with Section 8 voucher. INCOME CRITERIA: No maximum annual income. LEASE: Month-to-month; or 1 year with Section 8 voucher. back. Small rooms with no kitchen. Can bring in own refrigerator and hot plate. All units are unfurnished.	AN OWN RESID						GENERAL	_ INFO:	
No maximum annual income. FURNISHED:	ASSET LIMIT INFO	O:	·		Month-to-month; or 1 year with back. in owr			nall rooms with no ki frigerator and hot pla	tchen. Can bring
	INCOME CRITER	IA:							
	No maximum anni	ual incor	me.			urnished.			

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	1/4/2022			AREA:	Waipahu
PROJECT NAME:	JAC	(HALL	i.				PROJECT TYPE:	
		Kuhaulua St.					PHONE: 671-224	14
CITY	Waipah		STATE: HI	ZIP:	96797		FAX:	
	vvaipari	u	01A12. 111		90191			
MANAGER	R: Jesse	Johnasen			APPLY ADD			OUT OF STATE
APPLY TO): Bob Ta	anaka Inc.			Honolulu, Hi			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Ext. 24	ı						YES
APPLY PHONE	≣: 949-41	11			FAX: 949-7211	EMAIL:	Jackhallmemorial@	gmail.com
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	104	0	NO				YES
	Bdrm:	440	0	NO				YES
Three		110		110				
Four	Bdrm:							NO
RENT INFO: RE			:: YES	UTILITIES INC	CLUDED: llowance \$103 for 1			AL UNITS: 144
(minus \$103 util. a for two bedrooms Maximum amount	(minus \$	250 util. allowa		bedrm; \$250 fo		je		(Months): 12 JM WAIT
AGE CRITERIA:							TO REMAIN ON W	
Head of househole	d must b	e 18 years or ol	der	WAITLI	ST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO	: F	PETS OK: NO
]	Δ	SSET LIMITS:	NONE	Parking includ	ed			
AN OWN RESID						GENERAL	. INFO:	
ASSET LIMIT INF		t make tenant o	IO OVER	LEASE:			Project Based Subs	sidy
income limit.	, to Gaime	t make tenant g	0 010.	1 year; then m	onth-to-month	**Applicar info such address.	nts on waitlist MUST as change in phone	Call to update number or
INCOME CRITER								
max income: 1 be	edroom \$3	39,200; 2 bedro	om \$50,880	FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIM	10M MUN	NTHLY INCOM	E:	4475		Į.		
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ИE:	5113				

	Las	st Complet	e Update:	1/21/2022				Old settlem
					NOT AGOS	DTIN	AREA:	Chinatown
) - NOT ACCE	PIIN	PROJECT TYPE:	Family
ADDRESS:	Alokele & Kaiv	viula St., W	/aiakamilo Rd	. & McNeill St.			PHONE: 832-315	
CITY:	Honolulu		STATE: HI	ZIP:	96817		FAX : 832-318	38
	,		-					
MANAGER	: Cynthia Yosh	ida - Mana	ger		APPLY ADI	DRESS:		
	•				1002 North			OUT-OF-STATE
APPLY TO		TINIO 4 DD			Honolulu, H NOT ACCE	I 96817 PTING APPLIC	CATIONS	APPLICATION ACCEPTED:
ADDLY ATTN	NOT ACCEP							NO
APPLY ATTN	I: Oahu applica NOT ACCEP							
APPLY PHONE	: 832-5961				FAX: 832-3461	EMAIL:	nphaishereforyou.o	rg
Unit	Type: Num	nber		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UN	NITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:							
One I	Bdrm:							
Two I	Bdrm: 11	16	0	<u> </u>	714	2	6	YES
Three I	Bdrm: 3	6	0		888	3	8	YES
Four I	Barin:			ļ			,	
RENT INFO: RE	NT IS 30% OF	INCOME:	YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 152
Minimum Rent: \$0). All HPHA app	plicants wh	o are on	Water and allo	owance for electricity		MINIMUM W	
the waitlist are to go change or check t				and gas			ESTIMATE	-
password is neede							MAXIMU	JM WAIT
********OI OSED	Q/?/?N1&*****			Į.			LIST ES	STIMATE 60
AGE CRITERIA:							TO REMAIN ON W	
Head of household	d must be 18 ye	ears or olde	er	WAITL	IST FOR PARKING:		CALL EVERY	
				PARKING INF	0:	PET INFO:		PETS OK: YES
1		_					imals ok, but only or ries listed below:	one from each of
		LIMITS:				one doa (u	nder 25 lbs) or cat	
AN OWN RESID		PERTY: N	10			GENERAL		
ASSET LIMIT INF				LEASE:			NCES: Domestic V in transitional shelte	
				1 year		displaced.		
						Funding: F	ed Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:						ons must be 3 yrs	
ncome Eligibility =				FURNISHED:		crystal met	thamphetamine or	sex offender
Maximum Annual 2 persons - \$60,90			50;	Partly furnishe appliances on				
4 persons - \$76,10 6 persons - \$88,30					ily .			
8 persons - \$100,4		ψυ 1,000,						
1-PERSON MAXIM	IUM MONTHLY	INCOME:		4570				
2-PERSONS MAXI	MUM MONTHL	Y INCOME	≣:	5220				

		Last Comp	lete Update:	2/7/2022			AREA:	Kahala	
PROJECT NAME:	KAH	ALA NUI					PROJECT TYPE:	Retirement	
ADDRESS:	4389 M	alia St.					PHONE: 218-720	00	
OITY							FAX: 218-7150		
CITY:	Honolul	u	STATE: HI	ZIP:	96821		•		
MANAGER	ł:				APPLY AD	DRESS:			
APPLY TO):				On-Site			OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	l:							YES	
APPLY PHONE	: 218-72	200			FAX: 218-7150	EMAIL:	dmurai@kahalanui	.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:	145		5736	626	1	2		
Two	Bdrm:	103		9064	1224	1	2		
Three I	Bdrm:	22		11486	1522	1	2		
Four	Bdrm:							NO	
RENT INFO: RE Life Care commur deposit (entrance size of residence, fee, includes utiliti \$3585; 2nd persor	nity with a fee). Res from \$60 ies excep	a 90% refundat sident deposit t 03,103. Monthly ot for phone, sta	ole resident based on y service	UTILITIES INC All Utilities; exc			MINIMUM W ESTIMATE MAXIMU		
AGE CRITERIA:							TO REMAIN ON W		
All residents must	be 62 or	rolder			ST FOR PARKING:		CALL EVERY		
				PARKING INFO	1.10	PET INFO	h interview for: dogs	PETS OK: YES	
	Α:	SSET LIMITS:	NONE				·		
AN OWN RESI						GENERAL	. INFO:		
ASSET LIMIT INF				LEASE:			provides discounted		
				No lease - Life	Plan Community	when tran necessary Resident	ving, memory supp sfer to the on-site c /. Services: Houseke neals, wellness prog	are center is eping, linen	
INCOME CRITER	IA:					service, so	ecurity, valet parking by call system, interi	g, transportation,	
				FURNISHED: Appliances & F	Floor covering	maintenar NO RESP	nce, central air-cond PONSE IN 2021 Dieted update 08/9/2	ditioning.	

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	L	ast Comple	ete Update:	12/9/2021			AREA:	Honolulu
PROJECT NAME:	KAHAU	<mark>IKI VILL</mark>	AGE				PROJECT TYPE:	Family
ADDRESS:	2325 N. Nin	nitz Hwy					PHONE:	,
CITY:	Honolulu		STATE: Hi.	ZIP:	96819		FAX:	
MANAGER	t: Institute for	r Human Se	rvices		APPLY ADD	DRESS:		OUT-OF-STATE
APPLY TO		als to 425-5	168 attention t	o Family Program				APPLICATION ACCEPTED:
APPLY PHONE				1	FAX: 808-425-5168	EMAIL: 8		
Unit		umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One	Bdrm:		725		324			
Two	Bdrm:		900		540			
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE Rent is deducted tenats choosing. waitlist are not rec manager will be c	automatically Regular upda quired. Applic	through the ates to rema cant or the c	bank of in on the ase	UTILITIES INCL Water, electricity	UDED: y, internet, and cabl	е	MINIMUM W ESTIMATE MAXIMU	-
AGE CRITERIA:							TO REMAIN ON W	
Kupuna (62+ yrs) Families with cust	odial minor c	hildren		WAITLIS PARKING INFO 1 parking per ho		PET INFO		PETS OK: NO
AN OWN RESII		T LIMITS:		r painting por inc	AGOSTIOIG	GENERAL	INFO:	
ASSET LIMIT INF		от <u>с</u> т. т. т.		LEASE:		Families I	iving in Homeless E	
				6 month		will have pliving in su of being h	sitional Shelter for horiority for housing. ubstandard housing omeless may also st be minimum 1 ac	Families who are and are at a risk apply.
INCOME CRITER Maximum Income update."		- "Area inco	me HUD	FURNISHED:		under the All adults	table jobs are acce are subject to a Cri cluding Sexual Offer	pted) minal Background

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

AHUKU ELDI 154 Puuluana Pl. nuku	STATE: HI	UOLI HALE			PROJECT TYPE:	Elderly
	STATE: HI					
nuku	STATE: HI				PHONE: 293-14°	16
		ZIP:	96731		FAX : 293-14 ²	16
	,					
nanda San Agustin			APPLY AD			
All Housing Inc			56-154 Puւ Unit 100			OUT-OF-STATE APPLICATION
AH Housing, Inc.			Kahuku, Ha	awaii 96731		ACCEPTED:
						YES
3-1416		F	AX:	EMAIL	eahhousing.org ks-management@e	eahhousing.org
e: Number		Minimum		MINIMUM	MAXIMUM Number of	CAREGIVER
of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
0:						
n: 64	0		570	1	3	YES
n:						
n:						
n:						YES
and window boxes. ed to remain on the it changes to their c and respond in a tim	Regular waitlist. contact			ter	MINIMUM W ESTIMATE MAXIMU	AIT LIST
						00
	years or	WAITLIST	Γ FOR PARKING:		CALL EVERY	
olication.		PARKING INFO:	NO	PET INFO): F	PETS OK: YES
		Parking included		Small pet	s under 25 lbs. only	
				J		
TIAL PROPERTY:	NO			_		aned shouse can
			nth-to-month	remain in Section 8 Built 2013 coordinat	unit if can afford the HUD; 9% LIHTC 3; on-site manager, or, laundry room.	e rent. Funding:
				Catholic	Charities Hawaii	valiable trifougri
me: 50% AMI or les	ss	FURNISHED:	ceiling fan	Complete	online or	
		solar water heate range, microwav disposal, granite	ers, electric e, garbage countertops,	Pick up fi	om manager's office	e
	o: Number of UNITS: o: n: 64 n: m: 64 n: sand window boxes. ed to remain on the sit changes to their changes to their chand respond in a time in management. ASSET LIMITS: TIAL PROPERTY:	Parameter of UNITS: RENT: RE	Pe: Number of UNITS: RENT: Minimum INCOME Required: De: Number of UNITS: Rent: Number of UNITS: INCLUMENT INCOME Allowance for election of the UNITS: None INCOME I	PARKING INFO: Number of UNITS: RENT: RENT	PET INCLUDED: ASSET LIMITS: NONE TIAL PROPERTY: NO LEASE: Turn: 50% AMI or less Tiant Number of Unity Signature countertops, window coverings. Minimum INCOME Required: SQ FT: of People of Unity Square of People	BEMAIL: eahhousing.org ks-management@of with the people in

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	Last Com	plete Update:	1/21/2022			AREA:	McCully	
PROJECT NAME:	KALAKAUA H	HOMES (HE	PHA-hon) -	NOT ACCEP	TING	PROJECT TYPE:		
	1545 Kalakaua Ave.	TOMES (TH	117 (11011)	THO I MODEL		PHONE : 973-019	1	
	To to realiance / tvo.					FAX: 973-0197		
CITY:	Honolulu	STATE: HI	ZIP:	96826		170. 973-018	,,,	
MANAGER	t: Ioane Ah Sam			APPLY ADI				
APPLY TO	D: HPHA NOT ACCEPTING /	APPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	I: Oahu applications o						NO	
APPLY PHONE				FAX: 832-3461	EMAIL: h	nphaishereforyou.o	rg	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:						YES	
	Bdrm: 127	0		559	1	4	YES	
Three	Bdrm: 58	0		901	3	8	120	
	Bdrm: 36	0						
Tour	Burin.		-			,		
RENT INFO: RE	NT IS 30% OF INCOM	ME: YES	UTILITIES IN	CLUDED:		TOTA	L UNITS: 221	
the waitlist are to change or check t	D. All HPHA applicants go to: hpha.myhousing heir status. A usernar	g.com to me and	Water and all	owance for electricity		MINIMUM W. ESTIMATE		
	ed to access their acc	ount.					JM WAIT	
AGE CRITERIA:	Q/2/2016*****				-	FO REMAIN ON W	00	
	d must be 18 years or	older	\^/	IST FOR PARKING:		CALL EVERY		
			PARKING INF		PET INFO:	P	PETS OK: YES	
<u> </u>	ASSET LIMITS	: NONE			the categor	imals ok, but only o ies listed below: nder 25 lbs) or cat		
AN OWN RESI	DENTIAL PROPERTY				GENERAL	INFO:		
Cannot own a hou			LEASE:			NCES: Domestic V n transitional shelte		
						ed Low Inc Pub H	sing 100%	
INCOME CRITER	IA:		•			ons must be 3 yrs		
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$5 00; 3 persons - \$68,50 00; 5 persons - \$82,20 00; 7 persons - \$94,35	00; 00;	FURNISHED: Partly furnish appliances or	edmajor	crystal met	hamphetamine or s	sex offender	
1-PERSON MAXIM	IUM MONTHLY INCO	ME:	4570					
2-PERSONS MAXI	IMUM MONTHLY INC	OME:	5220					

	Last C	omplete Update:	1/4/2022			AREA:	Ala Moana	
PROJECT NAME:	KALAKAUA	VISTA				PROJECT TYPE:	Elderly	
ADDRESS:	1628 Kalakaua A	ve.				PHONE: 946-59	36	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 949-55	25	
MANAGER	R: Kayla Kedro, Re	sident Manager		APPLY ADI			OUT-OF-STATE	
APPLY TO	: Locations			Honolulu, H	-		APPLICATION ACCEPTED:	
APPLY ATTN	I: Property Manage	ement Division					YES	
APPLY PHONE	E: 738-3100			FAX: 735-1978		http://www.location ble-rentals.aspx	srentals.com/afforda	
	Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm: 80	1058	2xrent	430	1	2	YES	
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:						YES	
8 units at \$616; 72 Section 8 certifica gross income requ	ite holders need no	t meet the min	UTILITIES INC	CLUDED: , sewer, and trash		MINIMUM W ESTIMATE MAXIMI	(Months): 6	
AGE CRITERIA:			Įę.			LIST ES TO REMAIN ON V	STIMATE 60	
	be 62 or olderat th	ne time of	WAITLI	ST FOR PARKING:		CALL EVERY		
аррисацоп.			PARKING INF	O: NO	PET INFO:	F	PETS OK: NO	
•	ASSET LIM	ITS: NONE						
AN OWN RESIDE	DENTIAL PROPER	RTY: YES			GENERAL Stop in ab	INFO: ower only; no batht	tu h	
ACCET ENVIT IIV	<u>o.</u>		LEASE: 1 year; then m	nonth-to-month	Air-Conditi	oned case manager 2 da		
	IΔ·		<u> </u>		Funding: L	IHTC, RHTF, Sect	ion 8	
INCOME CRITERIA: Maximum income requirements: 30% of AMI: 1 person \$26,460; 2 persons \$30,240 50% of AMI: 1 person \$44,100; 2 persons \$50,400			FURNISHED: Partly furnishe appliances on		Pick up fro	ation: laod from website p from manager's office lanagement to mail it		
 1-PERSON MAXIN	IUM MONTHLY IN	COME:	3675]			
2-PERSONS MAXI	IMUM MONTHLY II	NCOME:	4200					

	Last C	Complete Update:	1/4/2022			AREA:	Mililani
PROJECT NAME:	KALANI GA	ARDENS				PROJECT TYPE:	Family
ADDRESS:	95-081 Kipapa Dr	r.				PHONE: 623-98	11
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 623-72	12
MANAGER	R: Heather Weddle	•		APPLY A	DDRESS:		OUT-OF-STATE
APPLY TO) :						APPLICATION ACCEPTED:
APPLY ATTN	I: Kalani Gardens						YES
APPLY PHONE	<u>:</u> : 623-9811			FAX : 623-7212	EMAIL:	website: www.eah kg-management@	
	Numbe of UNIT:		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:						
	Bdrm: 86	1236	YES	750	2	5	YES
Three		1374	TES	900	3	7	
Four	Bdrm:		ļ		J	J	YES
Rent cannot exce One person house New rents as of 1 2BR \$1126 - \$123 3BR \$1253 - \$137	36 74 - Not Accepting	Applications	UTILITIES INC Gas, electricity sewer	CLUDED: y and water, trash a	and	MINIMUM W ESTIMATE MAXIMI	(Months): 9
AGE CRITERIA:	oquired to remain a	on the weitlist				TO REMAIN ON V	00
Head of househol	d must be 18 years	s or older at the	WAITI	IST FOR PARKING	3·	CALL EVERY	
time of application	٦.		PARKING INF		PET INFO	: 1	PETS OK: NO
			Parking includ	led			
AN OWN RESI	ASSET LIM DENTIAL PROPEF	IITS: NONE			GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			Section 8 and LIHT	С
			1 year				
INCOME CRITER	IA:						
persons - \$65,280 \$78,300; 6 persor	me: 2 persons - \$5 0; 4 persons - \$72, ns - \$84,120; 7 pers ry due to different c	480; 5 persons - sons - \$89,880;	FURNISHED: Partly furnishe appliances on				
I-PERSON MAXIM	IUM MONTHLY IN	ICOME:	,		ji.		
2-PERSONS MAXI	IMUM MONTHLY I	INCOME:	4820				

	Last Com	plete Update:	1/21/2022			AREA:	Chinatown
PROJECT NAME:	KALANIHUIA	(HPHA-hor	n) - NOT A	CCEPTING	APPLI	PROJECT TYPE:	Elderly
ADDRESS:	1220 Aala St.	•	•			PHONE: 586-972	24
	<u> </u>					FAX: 586-972	28
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
MANAGER	: Sol Sentous			APPLY A	DDRESS:		
APPLY TO	: HPHA NOT ACCEPTING /	APPLICATIONS		Honolulu,	th School St. HI 96817 CEPTING APPL		
APPLY ATTN	I: Oahu applications o						NO
APPLY PHONE	: 832-5961			FAX: 832-3461	EMAIL	: hphaishereforyou.c	irg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 60	0		420	1	2	YES
One I	Bdrm: 90	0		492	1	4	YES
Two I	Bdrm:						YES
Three I	Bdrm: 1						
Four I	Bdrm:						
Minimum Rent: \$0 the waitlist are to g change or check to	NT IS 30% OF INCOM O. All HPHA applicants go to: hpha.myhousing heir status. A usernar	s who are on g.com to me and	UTILITIES IN Allowance for			MINIMUM W ESTIMATE	(Months): 24
********CI OSED	9/2/2016*****						JM WAIT STIMATE 60
AGE CRITERIA:						TO REMAIN ON W	į.
	d or spouse must be 6	2 years or	WAITI	LIST FOR PARKING	3:	CALL EVERY	(Months):
older, or disabled			PARKING INI		PET INFO): F	PETS OK: YES
]			Included		Small per	ts under 25 lbs. only	
	ASSET LIMITS	: NONE			<u> </u>		
	DENTIAL PROPERTY	: NO			GENERA	L INFO:	
ASSET LIMIT INFO			LEASE:			RENCES:(A) domest nomeless in transition	
Carriot own a nou	isc on Canu.		1 year		Displace of income If elder d	d. (B) substandard he. (C) others = indefi ies, under age 62 sp ding: Fed Low Inc Pu	nsing; rent >50% nite wait. ouse may rent
INCOME CRITER			FLIDAVIOLIES		Income E	Eligibility=80% of AM	I
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$5 00; 3 persons - \$68,50 00; 5 persons - \$82,20 00; 7 persons - \$94,35	00; 00;	Partly furnish appliances or		crystal m	ctions must be 3 yrs ethamphetamine or apleted update 10/05	sex offender
1-PERSON MAXIM	IUM MONTHLY INCO	ME:	4570		F		
2-PERSONS MAXI	MUM MONTHLY INC	OME:	5220				

	Last (Comple	ete Update:		1/21/2022					AREA:	Kalihi
PROJECT NAME:	KALIHI VA	LLE'	Y HOME	S (H	HPHA-h	on) -	NOT AC	CEPT	PROJEC	T TYPE:	Family
	2250 Kalena Dr.								PHONE:	832-333	36
			_		_					832-338	
CITY:	Honolulu		STATE:	11	ZIP:		96819				
MANAGER	: Julie Wiggett						APPLY A				
APPLY TO	: HPHA NOT ACCEPTII	NG AP	PLICATIONS	S			Honolulu,	h School St. HI 96817 EPTING APPL	ICATIONS		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applicatio NOT ACCEPTII			S						,	NO
APPLY PHONE	: 832-5961					FAX:	832-3461	EMAIL	: hphaisher	etoryou.o	org
	Type: Number of UNIT		RENT:		Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	Num	IMUM ber of ople:	CAREGIVER Allowed:
	tudio: 52				<u> </u>	 	404		.	4	YES
	Bdrm: 52 Bdrm: 60		0] [.] [674	2	- 1	6	YES
Three I			0				834	3		8	YES
Four I			0	1			1115	4		10	YES
RENT INFO: RE Min. Rent: \$0; 26 - applicants who are hpha.myhousing.c status. A usernan access their accou	5 Bdrm units. As on the waitlist are com to change or ne and password	II HPH e to go check t	A to: heir		TILITIES IN		D: for electricity	у		IIMUM W STIMATE MAXIMU	(Months): 36 JM WAIT
AGE CRITERIA:				ĮŁ					TO DEM		STIMATE 60
Head of household	d must be 18 year	s or old	der		\A/A ITI	IST EO	R PARKING	_	TO REMA		(Months):
				P/	WALL ARKING INF		NO NO	PET INFO):	F	PETS OK: YES
	ASSET LIN	IITS:	NONE	OI	ne space pe	er unit		the categ	animals ok, ories listed under 25 lb	below:	one from each of
AN OWN RESID	DENTIAL PROPE	RTY:	NO					GENERA	L INFO:		
Cannot own a hou					EASE:				s in transitio		/iolence victims; ers; involuntary
				ľ	you.				Fed Low Ir	nc Pub Hs	sing 100%
INCOME CRITER	IA:			-							ago, unless it's
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 person 00; 3 persons - \$6 00; 5 persons - \$8 00; 7 persons - \$9	8,500; 2,200;	250;	P	JRNISHED: artly furnish ppliances or	edmaj		crystal m	ethamphet	amine or	sex offender
1-PERSON MAXIM	IUM MONTHLY IN	COME	<u>.</u>	45	570			r			
2-PERSONS MAXI	MUM MONTHLY	INCOM	ΛΕ:	52	220						

	Last Comp	lete Update:	2/7/2022			AREA:	Hawaii Kai	
PROJECT NAME:	KALUANUI SE	NIOR APA	RTMENTS			PROJECT TYPE:	Elderly	
ADDRESS:	6950 Hawaii Kai Drive					PHONE:	,	
CITY:	Honolulu	STATE: HI	ZIP:	96825		FAX:		
	t: Mike Klein, Complian			APPLY ADI 394-6688	DRESS:		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	l:						YES	
APPLY PHONE	E: 394-6688			FAX:	EMAIL:	halealiigroup@yah	oo.com	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One	Bdrm: 10	981		525				
Three I	Bdrm:						NO	
Lower rent units for 3 1bdrm 3 2bd	or people at <50%AMI	E: NO	UTILITIES INCI	LUDED:		MINIMUM W ESTIMATE MAXIMU	(Months): 12 JM WAIT	
AGE CRITERIA:			je.			TO REMAIN ON W		
One member mus	st be 62+; spouse can b	e 18+	WAITLIS PARKING INFO	1.10	PET INFO	CALL EVERY	(Months): 6 PETS OK: NO	
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:			3.18.1	GENERAL	. INFO:		
ASSET LIMIT INF	O:		LEASE:		and ceiling ventilation have tub,	1/15/2003 all units of grans in bdrms and a lever handles on a 2bdrm have showe ty Lounge with TV,	I living room, cross doors. 1bdrm units r with low lip.	
INCOME CRITER	IA:		ļ		Inc Hsing Funding:	Tax Credit 100%	-	
	30% of AMI: 1 person \$21,650; 2 persons \$24,750 50% of AMI: 1 person \$36,050; 2 persons \$41,200		FURNISHED: Partly furnished appliances only			NO RESPONSE IN 2021 Last completed update 10/20/17		
	MUM MONTHLY INCOM		3004]			

		Last Comp	lete Update:	2/7/2022			AREA:	Kakaako	
PROJECT NAME:	KAMA	KEE VIS	TA				PROJECT TYPE:	Family	
ADDRESS:	1065 Kav	vaiahao St.					PHONE: 594-012	21	
CITY:	Honolulu		STATE: HI	ZIP:	96814		FAX : 594-0123		
MANAGER					APPLY ADI On-Site Apt			OUT-OF-STATE APPLICATION	
APPLY TO		Affordable Pro	perties Inc.					ACCEPTED: YES	
APPLY PHONE					FAX : 594-0123		kkamakeevista@ha http://hawaiiafforda	awaii.rr.com ble.com/residential-	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One	Bdrm:	90	1510	3338	570 720	1 2		YES	
Three I	Bdrm:							YES	
RENT INFO: RE Rental Assistance \$175 deducted fro Deposit = 1 month	e (RAP) lim om market	nited to 135 ur		UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMU		
AGE CRITERIA: Head of househole	d must be	18 years or o	der	WAITLI	ST FOR PARKING:		TO REMAIN ON W CALL EVERY	/AITLIST	
				PARKING INF		PET INFO:	F	PETS OK: NO	
AN OWN RESIDERS ASSET LIMIT INF	DENTIAL F		YES	LEASE:		GENERAL INFO: (All units can be converted to handicap unit Caregivers are allowed with MD letter.			
INCOME CRITERIA: No maximum annual income. Min Income for market 1 bdrm = \$3775 2 bdrm = \$4553			FURNISHED: Partly furnishedmajor appliances only.		Send requenvelope Pick up fro Request b	gement to mail it est with self-addresom manager's office y email or fax ONSE 2021. Last 0	•		
1-PERSON MAXIN	IUM MON	THLY INCOM	E:	3700					

	Last Comple	ete Update:	2/7/2022				AREA:	Waipahu
PROJECT NAME:	KAMALU - HOʻ	OLULU E	LDERLY -	NOT	ACCEP	TING	PROJECT TYPE:	Elderly
	94-941 Kauolu Pl.						PHONE: 675-009	99
							FAX: 675-009	
CITY:	Waipahu	STATE: HI	ZIP:		96797			
MANAGER	: Venus R. Katano				APPLY ADI			OUT-OF-STATE APPLICATION
	: Hawaii Affordable Prop	erties Inc.						ACCEPTED:
APPLY ATTN	: Venus R. Katano							
APPLY PHONE	: 675-0099			FAX:	675-0098	EMAIL:	http://hawaiiafforda properties/	ble.com/residential-
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME		SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER Allowed:
			Required:	-		of People	People:	YES
		170		. J. 1 - E	443	1	1	YES
	Bdrm: 50	195			599	2	2	120
				+				
Three I				-				
Four I	Barm:		ļ.	ļ.				YES
RENT INFO: RE	NT IS 30% OF INCOME	YES	UTILITIES INC	CLUDE	O:		TOTA	L UNITS: 221
	studio is \$170 and for on come, whichever is more		Electricity and	water			MINIMUM W	AIT LIST
	_OSED since 8/2/2016**						ESTIMATE	(Months): 36
Waitiist Ci	LOSED SINCE 6/2/2016							JM WAIT STIMATE 36
AGE CRITERIA:							TO REMAIN ON W	Į.
	d must be 62 years or old , spouse/partner must be		WAITL	IST FO	R PARKING:		CALL EVERY	(Months): 12
old.	i, spouse/partilei must be	e 55 years	PARKING INF			PET INFO	: F	PETS OK: NO
J.			Parking include	ded				
	ASSET LIMITS:					J		
AN OWN RESIDE	DENTIAL PROPERTY: O·	YES				GENERAL	. INFO: s are allowed with N	ID letter
Cannot own prope	erty in same county.	Asset	LEASE:	nth.		No prefere	ence for veterans ar 993-Kamalu 1994-F	ny more
Limit: 1 person - \$ 2 persons - \$44,10			INIOTILIT-TO-THOI	1111		Large gar	den	
						Transport	ining room with kito ation to Shopping a	nen vailable through
INCOME CRITER			ELIDNICHED.				Charities Hawaiʻi only in designated a	reas (not inside
Maximum Annual 1 person - \$34,300	0		FURNISHED: Partly furnished	edmai	or	unit)		
2 persons - \$39,20	00		appliances on Central heat; system	ıly.		NO RESP update 6/	PONSE in 2021. Las 16/20.	t completed
1-PERSON MAXIM	IUM MONTHLY INCOME	Ē:	2858			Į.		
2 DEDCONC MAY	NALINA NAONITLII V INICON	л г.	2267					

	Last Comple	ete Update:	1/21/2022			AREA:	Kalihi
PROJECT NAME:	KAMEHAMEHA	HOMES	(HPHA-ho	n) - NOT AC	CEPTI	PROJECT TYPE:	Family
	1541 Haka Dr.			,		PHONE: 832-315	53
	<u> </u>					FAX: 832-318	
CITY:	Honolulu	STATE: HI	ZIP:	96817		1002 0.00	
MANAGER	: Cynthia Yoshida - Man	ager			ADDRESS:		
APPLY TO	: HPHA NOT ACCEPTING API	PLICATIONS		Honolulu	rth School St. , HI 96817 CEPTING APPLI	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications offic NOT ACCEPTING API						NO
APPLY PHONE	: 832-5961			FAX : 832-3461	EMAIL:	hphaishereforyou.o	rg
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 62	0		540	1	4	YES
	Bdrm: 123	0	-	800	2	6	YES
Three I		0		980	3	8	YES
Four I	Bdrm:						
Minimum Rent: \$0 All HPHA applicar to: hpha.myhousir	NT IS 30% OF INCOME for Federal Low Income hts who are on the waitlis ng.com to change or cheo he and password is need unt.	projects t are to go ck their	UTILITIES INC	CLUDED: owance for utilities		MINIMUM W ESTIMATE MAXIMU	(Months): 36 JM WAIT
AGE CRITERIA:						TO REMAIN ON W	00
	d must be 18 years or old	der	\/\	IST FOR PARKING	G·	CALL EVERY	
1			PARKING INF		PET INFO	: F	PETS OK: YES
	ASSET LIMITS:	NONE	Included	,	the catego	nimals ok, but only ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	. INFO:	
ASSET LIMIT INFO			LEASE:		PREFERI homeless displaced	ENCES: Domestic \ in transitional sheltor.	/iolence victims; ers; involuntary
					Funding:	Fed Low Inc Pub Hs	sing 100%
INCOME CRITER	IA:					tions must be 3 yrs	
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		crystal me	ethamphetamine or	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u> :	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	1E:	5220				

	Last Complete	Update:	1/21/2022				Kaneohe
DDO IECT NAME.	-		/LIDITA	wind) NOT A	CCE	AREA: PROJECT TYPE:	
	KANE'OHE APAI		(НРНА-	wina) - NOT A			Family
ADDRESS:	45-507 & 45-513 Pahia Ro	1.				PHONE: 233-376	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX: 233-376	9
MANAGER	Daharia Kabala			ADDL V ADD	27500		
MANAGER	: Roberta Kahele			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	: HPHA			Honolulu, HI NOT ACCER	96817 PTING APPLIC	ATIONS	APPLICATION ACCEPTED:
	NOT ACCEPTING APPL	ICATIONS					NO
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APPL	ICATIONS					
APPLY PHONE	: 832-5961			FAX : 832-3461	EMAIL: h	phaishereforyou.o	rg
Linit	Type: Number		Minimum		MINIMUM	MAXIMUM	
Oilii	Type: Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
s	tudio:						
One I	Bdrm: 5	0	, 	429	1	4	YES
Two I	Bdrm: 19	0		600	2	6	YES
Three I	Bdrm:						
Four I	Bdrm:						
Minimum Rent: \$0 All HPHA applicar to: hpha.myhousir	NT IS 30% OF INCOME: of for Federal Low Income puts who are on the waitlist and an one of the complete or check the and password is needed ount.	rojects. re to go their	TILITIES INC /ater and allo	CLUDED: owance for electricity		MINIMUM WA ESTIMATE ((Months): 36
]							TIMATE 60
AGE CRITERIA: Head of household	d must be 18 years or older				ı	O REMAIN ON W CALL EVERY	
	•	P.	WAITL ARKING INF	IST FOR PARKING: O:	PET INFO:	P	ETS OK: YES
		Ir	ncluded			mals ok, but only o	
	ASSET LIMITS: NO	ONE				der 25 lbs) or cat	
	DENTIAL PROPERTY: NO)			GENERAL II		
ASSET LIMIT INF			EASE:			NCES: Domestic V n transitional shelte	
		1	year		displaced.		
						ed Low Inc Pub Hs	
INCOME CRITER			IDMIGUED			ons must be 3 yrs a namphetamine or s	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,2500; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;); F	JRNISHED: artly furnishe ppliances on				
1-PERSON MAXIM	IUM MONTHLY INCOME:	4	570		-		
2-PERSONS MAXI	MUM MONTHLY INCOME:	5.	220				

		Last Comp	lete Update:	11/2/2021			AREA:	Kaneohe
PROJECT NAME:	KANI	EOHE EL	DERLY				PROJECT TYPE:	Elderly
ADDRESS:	45-457 I	Meli Pl.					PHONE: 235-43	99
CITY:	Kaneoh	е	STATE: HI	ZIP:	96744		FAX : 235-00	33
MANAGER			being hired; Ne		nager - APPLY Leasing	ADDRESS:		OUT-OF-STAT
APPLY TO	: Cambr	idge Managem	ent Inc.		Loading	Ollide		APPLICATION ACCEPTED:
APPLY ATTN	l :							YES
APPLY PHONE	: 235-43	99			FAX: 235-0033		: kaneohe@cmiweb	.net
	туре:	Number of UNITS:	RENT:	Minimum INCOME Required	E SO ET.	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							YES
	Bdrm:	44	0	-	564	1	3	TES
Three								
Four	Bdrm:							NO
				Water and \$ taken off the	652 mo. utility allowa e rent.	ance		(Months): 36
				Į.				STIMATE 36
AGE CRITERIA: Head of househol				١٨/٨١٦	TLIST FOR PARKIN	NG.	TO REMAIN ON V CALL EVERY	
disabled. Other factoring disabled. Other factoring disabled in the caregivers allowed and the caregivers are consistent as a second disabled.	•		ates, and	PARKING IN	NFO: YES	PET INFO		PETS OK: YES
				Parking incl	uded if available	Subject t	o house rules and a	pproval
AN OWN RESII		SSET LIMITS: PROPERTY:				GENERA	L INFO:	
ASSET LIMIT INF				LEASE:			enhanced complex	
				1 year		Funding:	Low Income Housin Section 8 100%	ng Tax Credit 100%
INCOME CRITER	IA:						agement to mail it	
Maximum annual 2 persons \$46,650			50	Partly furnis appliances		envelope	quest with self-addre	ssea stampea
 -PERSON MAXIN	NOM MUN	NTHLY INCOM	IE:	3404				
2-PERSONS MAX	IMUM MC	ONTHLY INCO	ME:	3887				

	Last Co	mplete Update:	10/15/2021			AREA:	Lanakila
PROJECT NAME:	KAPUNA I -	NOT ACCEF	TING APF	PLICATIONS		PROJECT TYPE:	Elderly
ADDRESS:	1015 North School	St.				PHONE: 845-213	30
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 845-668	34
	ļ						
	R: Sherry Prevo D: Sage Apartment C	Communities, Inc.		APPLY AD 1015 North Honolulu, F	School St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	\ :						YES
APPLY PHONE	≣ : 845-2130			FAX: 845-6684	EMAIL:	kapunaonesage.co	m
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 162	0		530			YES
Three	Bdrm:						NO
RENT INFO: RE	ENT IS 30% OF INCO	OME: YES	UTILITIES IN	CLUDED:		TOTA	L UNITS: 162
	sed on anniversary of respond to mail from		Electricity and	d water		MINIMUM W ESTIMATE MAXIMI	
*\Maitlist appead 1	10/49/94 40/49/94 f	or a lottony	Į				STIMATE 9
AGE CRITERIA:	lication, Head of hou	sehold must				TO REMAIN ON W	
be 62 years or old	der, or 18+ w/ disabili	ty. Spouse		LIST FOR PARKING:	-		PETS OK: YES
	mily members, roomi d with mgmt approva		PARKING INF		PET INFO:	oved reasonable ac	
μ	ASSET LIMIT	S: NONE				questing pet	
AN OWN RESI	DENTIAL PROPERT				GENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:			st be notified if appli	
			1 year, then r	month-to-month.		Section 8 and Low I	
INCOME CRITER	IIA:					ation to Shopping a Charities Hawai'i upo	
	income is 80% AMI: ns - \$77,350, 3 perso		FURNISHED:		.	e in personally to up	
PREF: VERY LO	W INCOME (<30% (OF MEDIAN)	appliances or			with form sent to ap	
1-PERSON MAXIM	MUM MONTHLY INC	OME:	5642		Į.		
2-PERSONS MAXI	IMUM MONTHLY IN	COME:	6448				

	Last Compl	ete Update:	1/24/2022			AREA:	Waianae
PROJECT NAME:	KAU'IOKALAN	I (HPHA-le	e) - CLOSE	D		PROJECT TYPE:	Family
	85-658 Farrington Hwy.					PHONE: 697-717	71
CITY	J	STATE: HI	710.	20722		FAX: 697-717	
Cit 1:	Waianae	STATE: HI	ZIP:	96792			
MANAGER	R: Lui Faleafine			APPLY ADI			OUT OF STATE
APPLY TO) : НРНА			1002 North Honolulu, H			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications office	ce					NO
APPLY PHONE	≣: 832-5960		F	FAX: 832-3461	EMAIL:		
Unit	t Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	Studio:						
One	Bdrm:						
	Bdrm:						VEO
	Bdrm: 50	0		987	3	8	YES
Four	Bdrm:						J
Minimum Rent: \$8 projects NOT ACCEPTING	ENT IS 30% OF INCOME 50.00 for Federal Low Inc G APPLICATIONS		UTILITIES INCL	UDED: ance for electricity	only	MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	ELIY 0/5/5/14 C******					TO REMAIN ON W	00
Head of househol	ld must be 18 years or ol	der	WAITLIS'	T FOR PARKING:		CALL EVERY	
			PARKING INFO:		PET INFO	: F	PETS OK: YES
]	ASSET LIMITS:		Parking one stal	I	the catego	nimals ok, but only ories listed below: under 25 lbs) or_cat	
	DENTIAL PROPERTY:	NO			GENERAL	. INFO:	
Cannot own a hou			LEASE:			ENCES: Domestic \ in transitional shelt .	
<u> </u>					any corre	ts must respond in a spondence from HP	HA. No waitlist
INCOME CRITER			FURNISHED:		update ar	needed, however, apply contact information	n/household
2 persons - \$60,9 4 persons - \$76,1	Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200;	250;	Partly furnished- appliances only,		hpha.myh	on info, and check wousing.com (will new) e/password to do so)	ed
6 persons - \$88,3 8 persons - \$100,	00; 7 persons - \$94,350; 450				Funding:	Fed Low Inc Pub Hs	sing 100%
]					All convic	tions must be 3 yrs	ago, unless it's
1-PERSON MAXIN	MUM MONTHLY INCOM	≣: .	4570				
2-PERSONS MAX	IMUM MONTHLY INCOM	ΛE:	5220				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	2/28/2022			AREA:	Kakaako	
PROJECT NAME:	KAUHALE KA	KAAKO				PROJECT TYPE:	Family	
ADDRESS:	860 Halekauwila St.					PHONE: 593-903	35	
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 591-025	50	
	t: Melanie Hopeau				ADDRESS: Ste. #100		OUT-OF-STATE APPLICATION	
): Hawaii Affordable Pro	perties Inc.					ACCEPTED:	
APPLY ATTN	i: Kauhale Kakaako		EMA FAX: 591-0250			L: kauhalekakaako.co http://hawaiiaffordal		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Number of	CAREGIVER Allowed:	
	tudio: 116	1732	4200	578	1	4	YES	
	Bdrm: 152	2242	5400	728	2	5	YES	
Three I	Bdrm:						YES	
1 Bd Full Rent \$16 or \$1,732 (with sta 2 Bd Full Rent \$21	RENT INFO: RENT IS 30% OF INCOME: NO 1 Bd Full Rent \$1632 (without stainless appliances) or \$1,732 (with stainless appliances). 2 Bd Full Rent \$2167 (without stainless appliances) or \$2,242 (with stainless appliances).		UTILITIES INCLUDED: Water, Sewer, Garbage			TOTAL UNITS: 268 MINIMUM WAIT LIST ESTIMATE (Months): 1 MAXIMUM WAIT LIST ESTIMATE 3 TO REMAIN ON WAITLIST CALL EVERY (Months): 1 T INFO: PETS OK: YES		
	d must be 18 years or ol	der at the	WAITLIST FOR PARKING: PARKING INFO: PET					
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO:				Tax (2nd car); bo \$20 deposit for a	de GENER	Pets permitted with a \$200 refundable GENERAL INFO: *Along with completing regular waitlist applicants must keep all contact info c		
			1 year		well as manage	respond to communicatement in a timely manuries include a range with	ation from housing ner.*	
		200; 2	FURNISHED:		refriger fans, pl	ator, double kitchen sin none/cable jacks, and l conditioned and there	nks, blinds, ceiling lanai. The units	
Minimum Income for Market 1 bdrm - \$4,200; 2 bdrm - \$5,400 Maximum Income depends on number of occupants and size of unit.			Partly furnishe appliances &		recreati baskett playgro	ional deck on property ball/pickleball court, ba und, and convenience s currently being insta	that includes a rbecue areas, store. A fitness	
1 DEDCOM MAYIN	MUM MONTHLY INCOM	E.			On-site	Resident Manager/Ma	anagement Office,	

	Last Cample	to Unidate.	1/0.1/0.000				
	Last Comple		1/24/2022			AREA:	
	KAUHALE NAN	I (HPHA-c	<mark>en) - NOT</mark>	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	310 North Cane St.					PHONE: 622-636	60
CITY:	Wahiawa	STATE: HI	ZIP:	96786		FAX : 622-636	52
'		,					
MANAGER	: Jimary Quinones			APPLY ADI	DRESS:		
	·			1002 North			OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING APF	DUCATIONS		Honolulu, H NOT ACCE	1 96817 PTING APPLIC	ATIONS	APPLICATION ACCEPTED:
ΔΡΡΙ Υ ΔΤΤΝ	: Oahu applications office						NO
ALLETATIN	NOT ACCEPTING APP				FMAII · h	phaishereforyou.o	ara.
APPLY PHONE	: 832-5961			FAX : 832-3461	LIVIAIL.	priaisriereroryou.o	"g
			Minimum		MINIMUM	MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
			Required:		of People	People:	7.1.01104.
	tudio:						YES
	3drm: 14	0		564	1	4	
Two E	3drm: 16	0		727	2	6	YES
Three E	3drm: 20	0		958	3	8	YES
Four E	3drm:						
	NT IS 30% OF INCOME: of for Federal Low Income		UTILITIES INC Water and allo and gas	ELUDED: wance for electricity		TOTA MINIMUM W ESTIMATE	
010015	5/2/2010						JM WAIT STIMATE 60
AGE CRITERIA:					7	O REMAIN ON W	/AITLIST
Head of household	d must be 18 years or old	er	WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
			PARKING INF		PET INFO:		PETS OK: YES
]			Parking includ	ed		mals ok, but only only only only only only on the contract of	one from each of
	ASSET LIMITS:	NONE			one doa (ur	nder 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY: I	NO			GENERAL I		r-1
Cannot own a hou			LEASE:		homeless in	NCES: Domestic \ n transitional shelt	
			1 year		displaced.		
						must respond to a ence from HPHA,	
INCOME CRITERI	IA:				manner. No	waitlist updates r	needed, however,
ncome Eligibility = Maximum Annual	80% of AMI Income: 1 person - \$53,2		FURNISHED: Partly furnishe	dmajor	info/househ	old composition in us via hpha.myhou	nfo and check
	00; 3 persons - \$68,500; 00; 5 persons - \$82,200;		appliances on			ame/password to	
	00; 7 persons - \$94,350;				Funding: Fe	ed Low Inc Pub Hs	sing 100%
φ100,-	- - -				All conviction	ons must be 3 yrs	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		p.		
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

	Last Complete Upda	1/24/2022		AREA:	Waimanalo		
PROJECT NAME:	KAUHALE O'HANA (HPHA-wind) -	NOT ACCEPTING	_			
	41-1260 Kalanianaole Hwy.			PHONE: 233-37	<u> </u>		
	<u> </u>			FAX: 233-37			
CITY:	Waimanalo	: HI ZIP:	96795	1200 0			
MANAGER	: Roberta Kahele		APPLY ADDRESS		OUT-OF-STATE		
APPLY TO): HPHA NOT ACCEPTING APPLICATION	ONS	1002 North School St. Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS				
APPLY ATTN	l: Oahu applications office NOT ACCEPTING APPLICATION	ONS			NO		
APPLY PHONE	: 832-5961		FAX: 832-3461	EMAIL: hphaishereforyou.o	org		
Unit	Type: Number of UNITS: REN	T: Minimum INCOME Required:	Nu	IMUM MAXIMUM Number of People:	CAREGIVER Allowed:		
S	tudio:						
	Bdrm:						
Three I	Bdrm: 25 0	_	1003	3 8	YES		
	Bdrm: 25 0						
	NT IS 30% OF INCOME: YES Of for Federal Low Income projects 8/2/2016******	UTILITIES INC Water and all and gas	CLUDED: owance for electricity	MINIMUM W ESTIMATE MAXIMI	(Months): 36		
AGE CRITERIA:		,		TO REMAIN ON V	STIMATE 60		
	d must be 18 years or older	WAITI	LIST FOR PARKING:	CALL EVERY			
		PARKING INF	O: NO PE		PETS OK: YES		
]	ASSET LIMITS: NONE	_	the	ultiple animals ok, but only categories listed below: e doa (under 25 lbs) or ca			
	DENTIAL PROPERTY: NO		GE	NERAL INFO:			
Cannot own a hou		LEASE:	ho	REFERENCES: Domestic \ meless in transitional shelt splaced.			
INCOME ODITED	14.		co	pplicants must respond to rrespondence from HPHA, anner. No waitlist updates i	in a timely		
2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$53,250; 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	FURNISHED: Partly furnish appliances or	edmajor wanned nedmajor ned	plicants must update any o o/household composition in itlist status via hpha.myho ed username/password to nding: Fed Low Inc Pub H	contact nfo and check using.com (will do so).		
J			All	convictions must be 3 yrs	ago, unless it's		
	IUM MONTHLY INCOME:	4570					
2-PERSONS MAXI	MUM MONTHLY INCOME:	5220					

		Last Comp	lete Update:	2/28/2022			AREA:	Wahiawa
PROJECT NAME:	KAW	AHI MAL	UWAI APA	RTMENTS	1		PROJECT TYPE:	Family
ADDRESS:	730 Wil	likina Dr.					PHONE: 888-528	37
CITY:	Wahiaw	a	STATE: HI	ZIP: 96786			FAX : 888-5329	
MANAGER APPLY TO		ha Walker, Ma	nager		APPLY AI On-Site	DDRESS:		OUT-OF-STATE APPLICATION
		i Maluwai Apaı	rtments					ACCEPTED: YES
APPLY PHONE	: 888-52	87			FAX: 888-5329		awahi@cmiweb.n ww.KawahiMaluw	
	type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:	79	0	NO		1	3	YES
Two I	Bdrm: Bdrm:	39	0	NO		2	5	YES
Four	Bdrm:							
RENT INFO: RE project-based sec managed by Cam	tion 8 bui	lding with priva	ate owner	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:						7	O REMAIN ON W	/AITLIST
Head of household time of application		e 18 years or o	lder at the	WAITLI PARKING INF	O: NO	PET INFO:	CALL EVERY	(Months): 6 PETS OK: NO
	AS	SSET LIMITS:	YES		ntiful and included, enant must have	Only service	e animals with doc	r
AN OWN RESIDE		PROPERTY:	YES			GENERAL I		ar waitlist updates,
Property is counted	ed when c	interest rate (d		LEASE: One-year then thereafter	n month-to-month	applicants i	must keep all cont	act info current, as ation from housing
I INCOME CRITER	IA:					9 handicap	ection 8 100% + L ped accessible un	
Maximum Monthly	y Income:	5 persons - \$6	6510.00	FURNISHED: Partly furnishe appliances & r carpet.	ed with-major microwave. No	2 Elevators secured ke On-site ma Newly renn Transporta	Avel. , Community Roor , Community Roor y-card entry, 24 hr nagement and Lac ovated (2012) cion to Shopping ar parities Hawai'i	m, Playground, r. maintenance, undry Facilities.
1-PERSON MAXIM	NOM MUN	NTHLY INCOM	IE:	4220		-		
2-PERSONS MAXI	IMUM MC	ONTHI Y INCO	MF:	4820				

		Last Comp	lete Update:	2/1/2022			AREA:	Chinatown	
PROJECT NAME:	KEK	AULIKE C	OURTYAF	RDS			PROJECT TYPE:	Family	
ADDRESS:	1016 M	aunakea St.					PHONE : 545-29	93	
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX : 545-3654		
MANAGER	: Eric W	ong, Property I	Manager		APPLY A	DDRESS:			
APPLY TO	: Kekau	like Courtyards	Corp.					OUT-OF-STATI APPLICATION ACCEPTED:	
APPLY ATTN	l:							NO	
APPLY PHONE	: 545-29	993			FAX: 545-3654	EMAIL:	http://www.mutual- housing.org/kekaul	like-courtyards/	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Si	tudio:	12	793	2x rent	300	1	2	YES	
One E	Bdrm:	63	995	2x rent	500	1	4	YES	
Two E	Bdrm:								
Three E	Bdrm:								
Four B	Bdrm:							YES	
Waitlist is open (Japplication availate housing.org/kekau	ole at htt	p://www.mutual		Water and se	wei			(Months): 3 JM WAIT STIMATE 12	
Head of household				\\/ \ ITI	IST FOR PARKING	<u>.</u> .	CALL EVERY		
time of application caregiver must be				PARKING INF		PET INFO	s (2 max) and fish o	PETS OK: YES	
	A	SSET LIMITS:	NONE						
AN OWN RESID		PROPERTY:	NO			GENERAL		A 15 4	
ASSET LIMIT INFO	<u>O.</u>			LEASE: 1 year; then n	month-to-month	must keep respond to	st updates necessa c contact info currer c communication fro manner.*	nt, as well as	
INCOME CRITERI						building -	oom on every floor has only 1 laundry s, secure building.		
\$45,750 for 1 pers \$58,800 for 3 pers				Partly furnishe appliances or	edmajor	http://wwv	n available at: v.mutual-housing.or s/ (only during times		
 1-PERSON MAXIM	IUM MO	NTHLY INCOM	IE:	3813]			
2-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	4029					

Last Complete U	Jpdate: 2/22/2022			AREA:	Kapolei
PROJECT NAME: KEKUILANI COUR	RTS			PROJECT TYPE:	Family
ADDRESS: 91-1083 Kekuilani Lp.				PHONE: 674-040	05
CITY: Kapolei ST	ATE: HI ZIP:	96707		FAX : 674-042	26
MANAGER: Nua Vaovasa Site Manager: Amanda I. K	(aleikula-Velleses	APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO: Affordable Properties Inc.					APPLICATION ACCEPTED:
APPLY ATTN: Kekuilani Courts LLC					YES
APPLY PHONE : 674-0405		FAX: 674-0426		kekuilanicourt@hav http://hawaiiafforda	waii.rr.com ble.com/residential-
	RENT: Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	_				
One Bdrm: 80	1000	700			YES
Two Bdrm: 80	1800	790	1		120
Four Bdrm:					VEC
Pour Burni.					YES
RENT INFO: RENT IS 30% OF INCOME: NO Section 8 holders do not need to meet the minimum income requirement. Must have verifiable residential history.		CLUDED:		MINIMUM W ESTIMATE MAXIMU	(Months): 6
	Į.				STIMATE 12
AGE CRITERIA: Head of household must be 18 years or olderat	t the			TO REMAIN ON W CALL EVERY	
time of application.	PARKING INF	O: NO	PET INFO:	F	PETS OK: NO
ASSET LIMITS: YES	stall - \$15/mo	uded, additional			·
AN OWN RESIDENTIAL PROPERTY: NO			GENERAL	INFO:	
ASSET LIMIT INFO:	LEASE:		*Along with	n completing regula	ar waitlist updates, act info current, as
Property is counted when determining income eligibility.	1 year		well as res		ation from housing
INCOME CRITERIA:				s resident managei tral laundry facility,	
Income is not to exceed 80% AMI. Minimum in requirement was omitted.	Partly furnishe appliances; ga	ed major as range; disposal, th storage closet.	vending m parking, ca Membersh to the rec t Bus stops	achine, barbecue a ar wash area. ip in Kapolei Assoc acility and swimmi across street and r te application ever the waiting list.	rea, visitor ciation with access ng pool. next door.
7 1-PERSON MAXIMUM MONTHLY INCOME:	5640		je.		
2-PERSONS MAXIMUM MONTHLY INCOME:	6446				

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	2/28/2022			AREA:	Kapolei
PROJECT NAME:	KEKU	JILANI GA	RDENS			ı	PROJECT TYPE:	Family
ADDRESS:	91-1045	Kekuilani Lp.					PHONE: 674-66	47
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX : 674-41	70
MANAGER	: Mark D	evelopment, In	C.		APPLY AD I	DRESS: kuilani Lp., Kapo	olei	OUT-OF-STATE
APPLY TO	: Kekuila	ni Gardens			Hawaii 9670		5101,	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 735-909	99 ext 1			FAX : 674-4170		ttp://www.mdihaw ens	aii.com/kekuilanigar
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm: Bdrm:	55	0		790	2	5	YES
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE Priority given to ve AMI). Security De Monthly Allowable Market Note Rate AGE CRITERIA:	ery low inc eposit \$92 Rent \$92 Rent \$1,3	come (less than 25 25 354	n 30%	UTILITIES INCL Waterw	LODED:	T	MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): 60 JM WAIT STIMATE 72 VAITLIST
Head of household	d must be	e 18 years or ol	der		ST FOR PARKING:		CALL EVERY	
				PARKING INFO		PET INFO: Must have N		PETS OK: NO
AN OWN RESID		SSET LIMITS: PROPERTY:	YES			GENERAL II	NFO:	
ASSET LIMIT INF		etermining inco	ome	LEASE:		*Waitlist up	dates not required	d; Applicants must as well as respond
eligibility.	a when a	Cterrining mod	Sinc	1 year		to communi a timely ma	cation from housi nner.*	ng management in
INCOME CRITER	IA:					Funding: R Mark Devel On-site laur	opment Inc.	
Maximum Annual Very Low = 2 pers \$46,350; 4 person Once placed, you the Low Allowable	sons - \$41 ns - \$51,50 r adjusted	,200; 3 person 00; 5 persons - I income may r	s - \$55,650	FURNISHED: Partly furnished appliances only		Application: online mdih ask manage	·	3
-PERSON MAXIN	1UM MON	ITHLY INCOM	E:]		

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	Last Com	plete Update:	2/22/2022			AREA:	Waianae
PROJECT NAME:	KEOLA HOO	MALU				PROJECT TYPE:	Elderly
ADDRESS:	85-259 Plantation Ro	ad				PHONE: 524-27	31
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 545-52	14
MANAGER	: Sunnie Lee, COS.	Jay Okada, Off-Sit	e Manager	50 S. Ber	DDRESS: etania St., Suite	C101	OUT-OF-STATE
APPLY TO	: Urban Real Estate (Co.		Honolulu,	HI 96813		APPLICATION ACCEPTED:
APPLY ATTN	I: Housing Manageme	ent Department					YES
APPLY PHONE	: 524-2731 ext 3609			FAX: 545-5214	EMAIL:		
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 35						YES
	Bdrm: 35	0			1	2	
Three							
Four	Bdrm:						
Market \$1,100.00	ENT IS 30% OF INCOM	ME: YES	UTILITIES INC			MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:						TO REMAIN ON V	VAITLIST
	ld 62+ or disabled; spo ; all other members of			IST FOR PARKING	_	CALL EVERY	
household must b	e 62+ or disabled		PARKING INF		PET INFO: Subject to	Management Appr	PETS OK: YES
•	ASSET LIMITS	: NONE					
	DENTIAL PROPERTY	: YES			GENERAL		
ASSET LIMIT INF	<u>O:</u>		LEASE:	anth to month	_	Section 8 100%	
			i year, then n	nonth-to-month		er residing on site. inits not available fi	
INCOME CRITER	IA:		,		Application		
50% AMI: 1 perso	n \$40,850; 2 persons	\$46,650	FURNISHED: Partly furnishe appliances on		envelope NO RESP	est with self-addre ONSE IN 2021. LA OCCURRED ON 0	ST COMPLETED
1-PERSON MAXIM	IUM MONTHLY INCO	ME:	3404		1		
2-PERSONS MAXI	IMUM MONTHLY INC	OME:	3888				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	2/22/2022			AREA	Vineyard
PROJECT NAME:	KEOLA HOON	ANEA				PROJECT TYPE	Elderly
ADDRESS:	1465 Aala St.					PHONE : 533-45	82
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER	: Beverley Febenito - P Specialist; Sterling Ro			=	ni Blvd. Ste. 70	00	OUT-OF-STATE
APPLY TO	: Hawaiiana Manageme	ent Co.		Honolulu Hi	90013		APPLICATION ACCEPTED:
APPLY ATTN	: Housing Management	t Department					
APPLY PHONE	: 593-9100		F/	AX : 593-6333	EMAIL: \	www.hmcmgt.com	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						\
	3drm: 175	862	2.5x Rent	500	1	2	YES
	Bdrm:						
Three I							
Four I	Bdrm:						
70 units are Section by 30% of income not apply. Rest of \$862, based on 30	NT IS 30% OF INCOME on 8 units where rent is and the minimum incorr f units have rent range of 10% household of income requirement range \$18	calculated ne need of \$733 -	UTILITIES INCLU Electricity, gas an			MINIMUM W ESTIMATE MAXIM	
AGE CRITERIA:						TO REMAIN ON V	
	d must be 62 years or old rembers of household			FOR PARKING:		CALL EVERY	
62+ or disabled. (Caregivers over 18 yrs o	old allowed.	PARKING INFO: 50 stalls; no park	YES	PET INFO:		PETS OK: YES s approval, 2 cats
,	ASSET LIMITS:	NONE	avg. one year;	g .ee,ae.		ssible; \$100 pet de	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			tion to Shopping a	available through
			1 year; then mont	th to month	Federal Pr Application	harities Hawaii ef. i: Ask managemei est with self-addre	nt to mail it ssed stamped
INCOME CRITER	IA:				Pick up fro	m manager's offic Section 236 & Sec	
\$77,350 for Section	e: 1 person \$67,700; 2 on 236 unit. Max annual person - \$25,400; 2 per	income for	FURNISHED: Partly furnished appliances only	major	NO RESPO		AST COMPLETED
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	5642		J		

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	Last Comp	lete Update:	1/24/2022			AREA:	Makiki
PROJECT NAME:	KEWALO APA	RTMENT	S - Waitlist	is Open		PROJECT TYPE:	Family
ADDRESS:	1407 Kewalo St.					PHONE: 531-323	33
CITY	Honolulu	STATE: HI	ZIP:	96822		FAX : 529-051	16
OIII.	Honolala	OTATE: HI	2	90022			
MANAGER	: Kelli Lopez			APPLY AD			
APPLY TO	: Kewalo Apartments				nagement offi www.mdihav		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	:: 531-3233			FAX: 529-0516	EMAIL	: kellil@mdihawaii.co www.mdihawaii.cor	n (online
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm:						
Two I	Bdrm: 37	0	NO	610	2	5	YES
Three I	Bdrm:						
Four	Bdrm:						YES
Project-based Sec	NT IS 30% OF INCOME ction 8 - 32 units only LIHTC at \$822/mo.	E: YES	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	la.
Head of household time of application	d must be 18 years or o	lder at the		ST FOR PARKING:		CALL EVERY	
				ing for residents	PET INFO); F	PETS OK: NO
	ASSET LIMITS:	NONE	with one vehic	le			
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERA	L INFO:	
ASSET LIMIT INF	O:		LEASE:		*Applicar	nts must keep contact	et info current, as
			1 year; then m	onth-to-month		nent in a timely man	
					2-5 peop	le per unit	
INCOME CRITER	IA:		P		Units wer	re renovated as of 20	014.
Must qualify for LI	HTC income limits set b	y HHFDC	FURNISHED:		Property	common areas also	renovated.
and/or Section 8 li	imits set by HUD.		Partly furnishe appliances onl		Application		
J			<u> </u>		<u> </u>		

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	2/22/2022			AREA:	Kaneohe
PROJECT NAME:	KILO	HANA AP	ARTMENT	S - NOT A	CCEPTING A	PPLI	PROJECT TYPE:	Family
ADDRESS:	45-265	William Henry I	Rd.				PHONE: 235-184	14
CITY:	Kaneoh	е	STATE: HI	ZIP: 96744			FAX: 234-705	58
MANAGER	P Terrily	n Ahakuelo-Kal	nanu		APPLY ADI	DRESS:		
		ac Managemen		On-Site Ste. #J-06 ******CLOSED FOR APPLICATIONS***				OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Kiloha	na Apartments						YES
APPLY PHONE	: 235-18	344			FAX: 234-7058	EMAIL:		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One	Bdrm:	17	485		479	1	4	YES
Two	Bdrm:	90	610		634	2	6	YES
Three	Bdrm:	42	760		821	4	8	YES
Four	Bdrm:							
RENT INFO: RE *******CLOSED FO AGE CRITERIA: Head of househol	OR APPI	LICATIONS****	*****	UTILITIES INC Gas, electricity			MINIMUM W ESTIMATE MAXIMU	MONTHS): 120 JM WAIT STIMATE 132 VAITLIST
l lead of flouserior	u must b	e to years or o	iuei	WAITLIS PARKING INFO	ST FOR PARKING:	PET INFO		PETS OK: NO
				Parking include		FETTINIO	· '	LTO OK. INO
	A	SSET LIMITS:	NONE					
AN OWN RESI						GENERAL	. INFO:	
ASSET LIMIT INF	O:		·	LEASE:		Funding:	Section 221(d) 100%	6
				Month-to-mont	h		ONSE IN 2021. LA OCCURRED ON 10	
INCOME CRITER	IA:							
Maximum Annual 2 persons - \$73,0 4 persons - \$91,2 6 persons - \$108,0 persons - \$120,40	00; 3 per 00; 5 per 800; 7 pe	sons - \$82,100 sons - \$98,500	;	FURNISHED: Partly furnishe appliances onl				
1-PERSON MAXIN	IUM MOI	NTHLY INCOM	E:	5320]		
2-PERSONS MAXI	ІМИМ МО	ONTHLY INCO	MF:	6083				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	2/22/2022			AREA:	Makiki
PROJECT NAME:	KINAU VISTA					PROJECT TYPE:	Elderly
ADDRESS:	1150 Kinau Street					PHONE : 521-71	11
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 521-689	97
MANAGER	: Peggy Zayasu			APPLY ADD P.O. Box 22			OUT-OF-STATE
APPLY TO	: Locations LLC			Honolulu, HI	I 96823		APPLICATION ACCEPTED:
APPLY ATTN	l: Property Management	Division					YES
APPLY PHONE	: 738-3100			FAX: 735-1978		http://www.location ble-rentals.aspx	srentals.com/afforda
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm: 62	1272	2xrent	430			
Three I							
Four I	Bdrm:						YES
7 units (for 30 % A 24 units (for 50% 31 units (for 60%			UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT STIMATE 36 VAITLIST
	ply without verifiable res	idential	WAITLI PARKING INFO	ST FOR PARKING: O: NO	PET INFO:		PETS OK: NO
	ASSET LIMITS:	NONE		ndicap stalls; \$40	Pets not a		Į ·
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INF All income from as eligibility.	o: ssets is counted to deter	mine	LEASE:		keep all co		
INCOME CRITER	IΔ·				Opened 3 Has socia	/05. I worker on site for	services (PT).
30% of AMI: 1 per 50% of AMI: 1 per	rson \$25,320; 2 persons rson \$42,200; 2 persons rson \$50,640; 2 persons	\$42,300	FURNISHED: Partly furnishe appliances onl		Has guest Funding:	Low Income Housir max; RHTF + gran IHTC	ng Tax Credits-
					Application	n:	
-PERSON MAXIM	IUM MONTHLY INCOM	E:	3525				

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	Last Comple	ete Update:	1/24/2022			AREA:	Kaneohe
PROJECT NAME:	KO'OLAU VILL	AGE (HPH	A-wind) -	NOT ACCE	EPTING	PROJECT TYPE:	
	45-1027 Kamau Pl.	•				PHONE: 233-376	36
CITY	Kaneohe	STATE: HI	ZIP:	96744		FAX: 233-370	69
OII I.	Kaneone	STATE.	211.	96744			
MANAGER	: Roberta Kahele			ΔΡΡΙ Υ	ADDRESS:		
	. Rosona ranoio			1002 No	orth School St.		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING APF				ı, HI 96817 CEPTING APF	PLICATIONS	APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications offic						NO
	NOT ACCEPTING APP				EMAI	L: hphaishereforyou.c	org
APPLY PHONE	: 832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUN		CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People		Allowed:
S	tudio:						
One I	Bdrm: 8	0		526	1	4	YES
Two I	Bdrm: 24	0		662	2	6	YES
Three I	36	0		915	3	8	YES
Four I	Bdrm: 12	0		996	4	10	YES
	NT IS 30% OF INCOME: of for Federal Low Income 8/2/2016******		UTILITIES INC Water and allo and gas	CLUDED: wance for electric	sity	MINIMUM W ESTIMATE	
							STIMATE 60
AGE CRITERIA:	d must be 18 years or old	ler				TO REMAIN ON W CALL EVERY	
			WAITLI PARKING INF	IST FOR PARKIN O:	IG: PET INF	=O: F	PETS OK: YES
	ASSET LIMITS:		Included	. ,	multiple the cate	e animals ok, but only egories listed below: a (under 25 lbs) or car	one from each of
AN OWN RESID	DENTIAL PROPERTY:				GENER	AL INFO:	
ASSET LIMIT INF			LEASE:			RENCES: Domestic \	
Cannot own a hou	ise on Oanu		1 year		displace		ors, involuntary
INCOME CRITER ncome Eligibility = Maximum Annual			FURNISHED:	nd major	corresp manner applica info/hou	ants must respond to a condence from HPHA, r. No waitlist updates rents must update any cusehold composition in status via hpha.myhoi	in a timely needed, however, contact nfo and check
4 persons - \$76,10	00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350; 450		appliances on		need us Funding	g: Fed Low Inc Pub He victions must be 3 yrs	do so).
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		į.		
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220				

		Last Compl	lete Update:	2/22/2022				AREA:	Ewa Beach
PROJECT NAME:	KO'OL	OA'ULA	- CLOSE	o for apps	j		PROJEC1	TYPE:	Family
ADDRESS:	91-1159 K	eahumoa Pa	rkway				PHONE:	550-380	00
CITY:	Ewa Beach	1	STATE: HI	ZIP:	96706		FAX:	356-333	30
MANAGER	R: Laurie Bu	rgess - Prop	erty Manager			ADDRESS:	l #004		OUT OF STATE
APPLY TO) :					Keahumoa Plach, HI 96706	•		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:								YES
APPLY PHONE	: 550-3800				FAX: 356-3330		AIL: www.mutua	al-housir	ng.org
		Number f UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMU Number of Peop	er Numb	er of	CAREGIVER Allowed:
	Bdrm:	25	1000	>2x rent					
Two	Bdrm:	59	1155	>2x rent					
Three I	Bdrm:	20	1495	>2x rent					
Four	Bdrm:	15	1650	>2x rent					YES
RENT INFO: RE 60% AMGI: (see h (48); 3-bd (16); 4-l 50% AMGI: 1-bd ((3) - \$1,210; 4-bd AGE CRITERIA:	nigher rent a bd (12). (4) - \$865; 2	bove) 1-bd (20); 2-bd	Water and sev	CODED: wer; solar water h	eating	EST	MUM W FIMATE MAXIMU LIST ES	L UNITS: 136 AIT LIST (Months): 0 JM WAIT ETIMATE 0
18 and older				WAITLI	IST FOR PARKIN	IG:			(Months): 0
				PARKING INF	11.10	PET IN		F	PETS OK: NO
]	ASSI	ET LIMITS:	YES	one bedroom	all is included per unit ; two stalls Il other sized units		ot allowed.		
AN OWN RESID		ROPERTY:	YES				RAL INFO:		
ASSET LIMIT INF	O:			LEASE: 1 year		keep a	all contact info	current, a	l; Applicants must as well as respond ng management in
INCOME CRITER	IA:					Fundir			o Rent program. ily Tax Exempt
Gross income mu rent.	st be greate	r than two tii	mes the	appliances, ca	nergy efficient arpeted bdrms, arble counter tops eneer cabinets	Lands walkin laundr comm www.r Applic	caped grounds g paths and bb y room, resider unity room, on- mutual-housing.	q paviliont service site mar org	ns. Coin operated es office and nagement office.
1-PERSON MAXIM	IUM MONTI	HLY INCOM	E:	3520					
2-PERSONS MAXI	IMUM MON	THLY INCO	ME:	4020					

		Last Comple	te Update:	1/24/2022			AREA:	Kalihi
PROJECT NAME:	KUHIC	HOMES	(HPHA-h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahonui St		-	-			PHONE: 832-607	75
CITY	Honolulu		STATE: HI	ZIP:	96819		FAX: 832-343	38
OII I.	Honoiulu		STATE. HI	217.	96819			
MANAGER	: Nua Vao	vasa			APPLY ADI 1002 North			OUT-OF-STATE
APPLY TO	: HPHA				Honolulu, H		ICATIONS	APPLICATION ACCEPTED:
	NOT AC	CEPTING APP	PLICATIONS		NOT ACCE	I IIIIO AI I LI	ICATIONS	NO
APPLY ATTN		plications office CEPTING APF						
APPLY PHONE	: 832-5961	1			FAX : 832-3461	EMAIL:	hphaishereforyou.o	org
					-			
Unit		Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
St	tudio:							
One E	3drm:	20	0		490	1	4	YES
Two E	Bdrm:	32	0		688	2	6	YES
Three E	Bdrm:	37	0		877	3	8	YES
Four E	Bdrm:	37	0		1042	4	10	YES
RENT INFO: RE 8 5 Bdrm units Minimum Rent: \$0 *******CLOSED 8) for Federa	al Low Income		UTILITIES INC Water and gas electricity	CLUDED: s + allowance for		MINIMUM W ESTIMATE	
				Į.			LIST ES	STIMATE 60
AGE CRITERIA: Head of household	d must ha	18 years or old	or				TO REMAIN ON W	
li lead of flouseriole	a must be	TO years or old	Ci	WAITLI PARKING INF	ST FOR PARKING:	PET INFO		PETS OK: YES
				Included	0.		nimals ok, but only	
	ASS	SET LIMITS:	NONE				ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL P	ROPERTY:	NO			GENERAL	_ INFO:	
ASSET LIMIT INFO				LEASE:			ENCES: Domestic \s in transitional shelt	
Cannot own a hou	ise on Oan	u		1 year		displaced		ors, involuntary
INCOME CRITERI	IA:					correspor manner.	nts must respond to a ndence from HPHA, No waitlist updates r s must update any c	in a timely needed, however,
ncome Eligibility = Maximum Annual			50:	FURNISHED:	d main:	info/house	ehold composition in	nfo and check
2 persons - \$60,90 4 persons - \$76,10	00; 3 perso	ns - \$68,500;	00,	Partly furnishe appliances on			atus via hpha.myhoo rname/password to	
6 persons - \$88,30 8 persons - \$100,4	00; 7 perso					Funding:	Fed Low Inc Pub Hs	sing 100%
o persons - \$100,2	+30					All convic	etions must be 3 yrs	ago, unless it's
1-PERSON MAXIM	IUM MONT	HLY INCOME	:	4570		į.		
2-PERSONS MAXI	MUM MON	ITHLY INCOM	E:	5220				

		Last Comp	plete Update:	10/18/2021			AREA:	Liliha
PROJECT NAME:	KUK	UI GARD	ENS				PROJECT TYPE:	Family
ADDRESS:	1103 Li	liha St.					PHONE: 532-003	33
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 762-233	33
MANAGER:	: Sandie	e Ishimie, Prop	perty Manager		APPLY AD	DRESS: St., Ste. 102		OUT-OF-STATE
APPLY TO:	EAH F	lousing			Honolulu, F			APPLICATION ACCEPTED:
APPLY ATTN:	: Kukui	Gardens						YES
APPLY PHONE:	: 532-00)33			FAX: 762-2333	EMAIL:	www.eahhousing.o	rg
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:							
One B	Bdrm:	115	1239	3110		1	2	YES
Two B	3drm:	106	1472	3695		2	5	YES
Three B	Bdrm:	122	1685	4235		3	7	YES
Four E	Bdrm:	46	1864	4687		4	9	YES
RENT INFO: REI Deposit plus first m *Updates not requi updating contact ir respond to commu	nonth re fired to re fo), how inication	nt emain on waitl vever, applicar from housing	ist (unless	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	timoli/ m	onnor *					TO REMAIN ON W	Į
Head of household	d must b	e 18 years or	older	WAITLI	ST FOR PARKING:		CALL EVERY	
				PARKING INFO		PET INFO): F	PETS OK: NO
	A	SSET LIMITS:	NONE	1 stall included stall	d, waitlist for 2nd			
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO	<i>J</i> .			LEASE:	- d 40 th-	Funding:	LIHTC	
				First year: Fixe lease. Month-t	o-Month thereafter.	Accepting	g applications for AL	L bedroom sizes.
INCOME CRITERI	A:			•				
				FURNISHED: Partly furnishe appliances onl				
 1-PERSON MAXIM	UM MOI	NTHLY INCOM	ME:	4085				
2-PERSONS MAXII	мим мо	ONTHLY INCO	DME:	4665				

		Last Compl	ete Update:	2/1/2022			AREA:	Downtown
PROJECT NAME:	KUK	UI TOWER	R - CLOSE	ED FOR app	lications		PROJECT TYPE:	Family
ADDRESS:	35 Nortl	h Kukui St.					PHONE : 537-493	35
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 537-968	32
	Celest	a Malloe, Proper e Russell, Assis	stant Resident	Manager	APPLY AD	DRESS:		OUT-OF-STATE APPLICATION
		onnie Chan, Lea	ising Agent					ACCEPTED: YES
APPLY ATTN		935		F	FAX: 537-9682	EMAIL:	KT-Management@	eahhousing.org
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	126	778	1695	560	1	3	YES
	Bdrm:	254	846	1843	742	2	5	YES
Three	Bdrm:							
RENT INFO: RE Calculated by usir income, the minim \$778 for 1 bdrm; \$ income cannot be	ng 30% o num and 3737 - \$8	of the household maximum rents 346 2 bdrm. 30%	's adjusted are \$678 - % of	Water, sewer, ga			MINIMUM W. ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:	ו וססג כ	∩∧TI∩NI©*****		Į.			LIST ES	STIMATE 36
Head of househol	d must b	e 18 years or ol	der	WAITLIST PARKING INFO:	T FOR PARKING:	PET INFO	CALL EVERY	
AN OWN RESI		SSET LIMITS:		Parking 1st stall stalls range from \$175/month, dep availability.	n \$105 to	reasonabl	e accommodations INFO:	for disability
ASSET LIMIT INF	O:			LEASE:	nth-to-month		pdates must be cor ach year, via submis ard".*	
INCOME CRITERIA: Section 8 limit - 50% AMI; Section 236 limit - 80% AMI Applicant's monthly adjusted household income				FURNISHED: Partly furnished-appliances only	major	Complete Post card active on Swimming	sent once a year to	keep application
cannot exceed \$2						24 hour traction cameras.	ained personnel pat	rol.& closed circuit

Last Compl	ete Update: 1/24/2	022		AREA:	Makiki
PROJECT NAME: KULA O'KAHU	A APTS.			PROJECT TYPE:	Emergency/Transi
ADDRESS: 1311 Ward Ave.				PHONE: 599-575	59
CITY: Honolulu	STATE: HI ZI	P : 96814		FAX : 545-862	23
MANAGER: Tani Kalahiki and Kea	a Souza	APPLY	ADDRESS:		OUT-OF-STATE
APPLY TO:					APPLICATION ACCEPTED:
APPLY ATTN:					NO
APPLY PHONE : 599-5759		FAX:	EMAIL:	tani@hsiservices.n keala@hsiservices	
Unit Type: Number of UNITS:	RENT: Minin INCC Requ	OME SO ET.	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 24		255	1	2	YES
One Bdrm: 5		410	1	2	YES
Two Bdrm:					
Three Bdrm:					
Four Bdrm:					NO
RENT INFO: RENT IS 30% OF INCOME Rent is 30% of income up to the maximum Transitional Housing, where the goal of fin permanent housing is initially 3 months. Finds the following service plan to remain in program. Depost = \$0	of range. ding esidents	S INCLUDED: y and water		MINIMUM W ESTIMATE MAXIMU	(Months): 1 JM WAIT
AGE CRITERIA:	K				STIMATE 6
Head of household must be 62 years or ol		/AITLIST FOR PARKIN	NC.	TO REMAIN ON W CALL EVERY	
spouse/partner must be 18. Caregiver allophysician's note indicating the NEED for a	caregiver. PARKING	G INFO: YES	PET INFO	: F	PETS OK: NO
Applicants must have verifiable residential ASSET LIMITS:	very iiii	ited.	Service A	nimal - Doctor Verifi	ication Required
AN OWN RESIDENTIAL PROPERTY:			GENERAL	_ INFO:	
ASSET LIMIT INFO:	LEASE:		Must be h	nomeless. errals Only	
	Must acc housing.	cept offer for permaner	verificatio Must part	tation of homeless s n. icipate in social serv Homeless Stipend	
INCOME CRITERIA:		HED: rnishedmicrowave, tor, stovetop (no oven)	Applicatio	·	
1-PERSON MAXIMUM MONTHLY INCOM 2-PERSONS MAXIMUM MONTHLY INCOM					

	Last Comple	ete Update:	2/1/2022				AREA:	Makiki
PROJECT NAME:	KULANA HALE					PRO	JECT TYPE:	Elderly
ADDRESS:	1551 South Beretania S	St.				PHO	NE: 983-155	1
CITY:	Honolulu	STATE: HI	ZIP:	968	26	F	AX: 983-155	3
	: Tanya Metzker (Gener	al Mgr.)		On-S	LY ADDRESS ite loor, Manage			OUT-OF-STATE APPLICATION
	I: Tanya Metzker, GM							ACCEPTED: YES
APPLY PHONE				FAX: 983-1			@kulanahale.co kulanahale.co	
	Type: Number of UNITS: tudio: 122	RENT: 1295	Minimum INCOME Required:	SQ F	T: Null of P	-	MAXIMUM Number of People:	CAREGIVER Allowed: YES
One I	Bdrm: 42	1495		520		1 7	3	YES
Two I	Bdrm: 11	1855		594	-	2	4	YES
Four	Bdrm:							NO
RENT INFO: RE Credit Check Fee	NT IS 30% OF INCOME \$24.95	: NO	UTILITIES INC		enance		TOTAI MINIMUM WA ESTIMATE (MAXIMU LIST ES	(Months): 12
AGE CRITERIA: All residents must	ho EE or older						EMAIN ON W CALL EVERY (
All residents must	be 33 of older		WAITL PARKING INF	IST FOR PAR		T INFO:		ETS OK: NO
			Parking: \$60/			rvice Pets All		ETS OK. INO
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:	NONE YES			GE	NERAL INFO	:	
	O: ets counted towards total ver \$5k, .06% is consider		LEASE:	tial lease term)	ke	ep contact inf	o current, as v	; Applicants must vell as respond to ment in a timely
income. Access of	voi (voix) .0070 10 001101001	ca moonie			ma Fu	anner.* nding: LIHT(ID letter; cannot
INCOME CRITER					wo	ork outside ho Dened 1998		,
1 person - \$70,566 annually.	0 annually; 2 person - \$8	0,640	Partly furnishe appliances on ceiling fan, ov microwave	ıly. Carpet, blir	Ac Ap Or As	cepts Section plication: aline low-incor k manageme	n 8 Certificate me-senior-hou nt to mail it anager's office	-
1-PERSON MAXIM	IUM MONTHLY INCOME	<u> </u>	5880		<u> </u>			

		Last Comp	lete Update:	2/1/2022			AREA:	Kaneohe
PROJECT NAME:	KUL	ANA NAN	APARTIV	IENTS			PROJECT TYPE:	Family
ADDRESS:	46-229	Kahuhipa St.					PHONE: 247-06	02
CITY:	Kaneoh	ie	STATE: HI	ZIP:	96744		FAX : 247-06	02
MANAGER	: Farod	Jackson			APPLY AD On-Site Un			OUT-OF-STATE
APPLY TO	: Hawai	ian Properties			On-one on	II A 104		APPLICATION ACCEPTED:
APPLY ATTN	l: Kulana	a Nani						YES
APPLY PHONE	: 247-0	602			FAX : 247-0602	EMAIL:	kn-management@	eahhousing.org
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:	40	1575		745	2	5	YES
Three I	Bdrm:	80	1765		862	3	7	YES
Four I	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 MAXIMI	(Months): 12 JM WAIT
AGE CRITERIA:				•			TO REMAIN ON V	VAITLIST
Head of househole Applicants can ap					IST FOR PARKING:		CALL EVERY	
history. Minimum compos	ition for	2 bedroom units	s is 3	\$30/month \$50 for 2nd st	tall (if available)	Only assis	stive animals	PETS OK: NO
AN OWN RESID		SSET LIMITS: PROPERTY:				J GENERAL	_ INFO:	
ASSET LIMIT INF	O:			LEASE:		well as re	ts must keep contact spond to communic ment in a timely man	ation from
							urs: 8am - 4pm hru Friday	
5-PERSONS MAX \$6,510.00		MONTHLY INCO	DME:	FURNISHED:	edmaior	Basketba	Il courts, picnic/bbq	area
				appliances on range/oven), v	nly (gas	Application Send requestions	•	
1-PERSON MAXIN	IUM MO	NTHLY INCOM	E:	0				
2-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	3888				

	Last Com	plete Update:	1/24/2022				AREA:	Waimanalo
PROJECT NAME:	KULANAKAU	HALE MALU	IHIA O N	A KŪ	PUNA		PROJECT TYPE:	Elderly
ADDRESS:	41-209 Ilauhole St.						PHONE: 426-140	00
CITY:) Waimanalo	STATE: HI	ZIP:		96795		FAX : 426-140)1
MANAGER	: Nohealani Hoopii				APPLY AD	DRESS:		
	: Locations			41-209 Ilauhole St. #87 Waimanalo, HI 96795				OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Property Manageme	nt Division						YES
APPLY PHONE	: 426-1400			FAX:	738-8981		locationsrentals.cor rentals.aspx (click of	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 85	1000	2xrent		528	1	2-3	YES
Two E	Bdrm:							
Four E	Bdrm:							YES
Various rent amou \$825, \$960, and \$ *No waitlist update must keep contact	es needed, however, a t info updated. espond to correspond	50, \$800, pplicants	UTILITIES IN Water and se \$144/mo for e	wer. Uti	lity allowance	e of	MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	be 55 or older and HC	NH ha Nativa					TO REMAIN ON W	
Hawaiian	be 33 of older and the		WAITL PARKING INF		R PARKING:	PET INFO		PETS OK: NO
AN OWN RESID	ASSET LIMITS	:	Parking inclu- tenant stalls, handicap acc accessible.	including	g 9	GENERAL	INEO:	
ASSET LIMIT INFO			LEASE:				nust be native Hawa	aiian kupuna;
			1 year; then r	month-to	-month	Hawaiian Household processing	ants must be a minir Blood Quantum to a d). Verification can g. Section 8 accepte eed not meet the mi	apply (Head of be done at time of ed, and voucher
INCOME CRITERI	IA:					requireme	nt. *Applicants mus	t apply to Dept. of
Maximum income: 1 person 2 people 1 person 2 people 30% 24,510 27,990 80% 65,360 74,640 50% 40,850 46,650 100% 81,700 93,300 60% 49,020 55,980			Partly furnishedmajor appliances only. Carpet & vinyl floors, curtains.			property. 'application *Commun common I	Homelands, prior to Confirmation letter is received ity room, communit aundry area. 6 apt. e; onsite resident ma	mailed once y garden plots; are handicap
1-PERSON MAXIM	IUM MONTHLY INCOI	ME:	4828					

2-PERSONS MAXIMUM MONTHLY INCOME:

3/7/2023

Page:

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		Last Comp	lete Update:	2/22/2022			AREA	: Waianae
PROJECT NAME:	KULI	A I KA NU	JU (Kahiko	<mark>lu Ohana H</mark>	<mark>lale OʻWaiʻa</mark>	nae)	PROJECT TYPE	Family
ADDRESS:	85-296	Ala Hema St.					PHONE : 697-73	300 753-308
CITY:) Waiana	ie	STATE: HI	ZIP:	96792		FAX: 697-73	302
MANAGER	R: Leslie	Young, Site Ma	anager		APPLY ADI		740	OUT OF STATE
APPLY TO): Kulia I	Ka Nuu			Waianae, H	Akau St., Unit I 96792	1712	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	: 697-73	300		F	FAX:	EMAIL:	www.hawaiiafforda	able.com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	24	944					
One I	Bdrm:							
	Bdrm:	46	1418					
Three I	Bdrm:							
RENT INFO: RE 24 Studios @ \$55 46 Two Bedrooms units); based on 6	51 - \$944; s @ \$126	; based on 30% 60 (24 units) - \$	of income.	UTILITIES INCLI Electric, water, a			MINIMUM V ESTIMATE MAXIM	
AGE CRITERIA:							TO REMAIN ON V	
Head of household Applicants must h				WAITLIST PARKING INFO:	T FOR PARKING:	PET INFO		PETS OK: NO
]		SSET LIMITS:		Parking available (car registration, and insurance) redate				·
AN OWN RESIDERS		PROPERTY:				GENERAI		lar waitlist updates,
				LEASE:		applicant well as re	s must keep all con	tact info current, as cation from housing
NCOME CRITER	IΔ·]		Formerly O'Waiana	knowns as Kahikol ae.	u Ohana Hale
30% - 60% of Hor		edian Income		FURNISHED:		Funding:	RHTF	
						2. 6 mon 3. Birth o	ths of pay stubs ths bank statement certificates Security Card	ts

Printed:

	L	ast Comple	ete Update:	2/22/2022			AREA:	Barber's Point
PROJECT NAME:	KUMUH	IONUA ((Building	36)			PROJECT TYPE:	Transitional
ADDRESS:	91-1096 Yor	ktown St.					PHONE: 682-549	94
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 682-549	95
MANAGER APPLY TO	Carla Kaha		rogram Manag at Program Man		APPLY AD P.O. Box 75 Kapolei, HI	5547		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE					FAX: By CES	EMAIL	: Website: www.hcapweb.org/l	
Unit		umber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	itudio:	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", not uired. coordinated for public use	"Rent"		UTILITIES INC	LUDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	POLIDODOV						TO REMAIN ON W	
Adults ONLY (>18	Byrs); *Maxim	um 3 ppl pe	r unit	WAITLIS	ST FOR PARKING:	PET INFO	CALL EVERY D: F	(Months): PETS OK: NO
]				Parking include	ed			
		T LIMITS:				J		
AN OWN RESIDER ASSET LIMIT INF		OPERTY:		15405		GENERA *Waitlist	L INFO: updates not required	; Applicants must
				120 Days		keep all	contact info current, a unication from housing	as well as respond
INCOME CRITER No minimum inco	me requireme			FURNISHED:			02/09 rooms and two kitch sidents are responsib	
calculated by 30% incomes not provi				Small refrigera bathroom, mice		Program classes	provides case mana and workshops relate permanent housing a dence .	d to personal

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Co	omplete Update:	1/24/2022			AREA:	Moiliili
PROJECT NAME:	KUMUWAI A	APARTMENT	TS .			PROJECT TYPE:	Elderly
ADDRESS: 1	902 Young Stree	t				PHONE : 762-09	02
CITY:	onolulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER:	Maretta Espiritu			APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO:	Housing Solutions	s, Inc.					APPLICATION ACCEPTED:
APPLY ATTN:	Maretta Espiritu						NO
APPLY PHONE:	762-0902		F	AX:		Website: https://ww Email: Maretta@hs	ww.hsiservices.net/ siservices.net
Unit Ty	ype: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Stu	dio: 29	900			1	2	
One Bd	lrm:	0					
Two Bd		0					
Three Bd	lrm:	0					
Four Bd	lrm:	0					
Security Deposit: \$9 Section 8 and other AGE CRITERIA:	housing vouchers	s accepted.	All utilities include	ea.		LIST E	(Months): 1 UM WAIT STIMATE 6 VAITLIST
All applicants must b	oe 62 or older.			FOR PARKING:	-	CALL EVERY	
	ASSET LIMI	TS:	PARKING INFO: Parking included waitlist for parkin	, however, a	PET INFO:		PETS OK:
AN OWN RESIDE					GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:		for homele Features i Amenities facilities, a	ne permanent houses persons at leas nclude kitchens an include resident pa and common area lear a bus stop.	t 62 years old. d private baths.
NCOME CRITERIA:					located ne	ai a bus stop.	
			FURNISHED:				
-PERSON MAXIMUI	M MONTHLY INC	COME:	3675				
-PERSONS MAXIMI	LIM MONTHLY IN	ICOME:	4200				

	Last Comp	lete Update:	2/22/2022			AREA:	Kunia
ROJECT NAME: KUNI	4 VILLAC	SE .				PROJECT TYPE:	Family
ADDRESS: 92-1770	Kunia Road					PHONE: 808-439)-6375
CITY: Kunia		STATE: HI	ZIP:	96759		FAX : 808-439)-6375
MANAGER: Not prov	vided on last ι	update (2021).		APPLY ADD			OUT-OF-STA
APPLY TO: Kunia V	illage, EAH H	ousing		Kunia, HI 96	759		APPLICATIO ACCEPTED
APPLY ATTN: Manage	r's Office						
APPLY PHONE : 439-637	75			FAX: 439-6375	EMAIL:	KU-management@	eahhousing.org
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	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 309 Affordable housing developments agricultural industry. Resulted the combined household more agreements.	ment serving pent will not exc	persons in seed 30% of	UTILITIES INC	;LUDED:		MINIMUM W ESTIMATE MAXIMU	(Months):
AGE CRITERIA:						TO REMAIN ON W	TIMATE //
18+			WAITL	IST FOR PARKING:		CALL EVERY	(Months):
			PARKING INF	O: NO port for each house	PET INFO:	specific policy requ	PETS OK: YES
AS	SET LIMITS:				,		
AN OWN RESIDENTIAL I	PROPERTY:				GENERAL		
ASSET LIMIT INFO:			LEASE:		keep all co	pdates not required ontact info current, a nication from housin anner.*	as well as respond
NCOME CRITERIA:					United Sta	ber of the househol ites Department of	Agriculture
1 Person: \$52,920 2 Persons: \$60,480 3 Persons: \$68,040 4 Persons: \$75,540 5 Persons: \$81,600 6 Persons: \$87,660			carport, wash energy efficie	age closet in each e/dryer hook ups/ nt appliances/water tures in kitchen , solar water	On Site M On Site U Kunia Fari Communit	efinition of farm labor income as defined anager S. Post Office mers Market by gym, Community sketballl/volleyball c	by the USDA room with kitchen
-PERSON MAXIMUM MON			4410 5040				

	Las	st Comple	te Update:	1/24/2022				AR	EA:	Waialua
PROJECT NAME:	KUPUNA	HOME	O'WAI	ALUA (HPF	IA-ce	n) - NO	ГАСС	PROJECT TY		
	67-088 Gooda							PHONE: 637	7-824	14
			_					FAX: 622		
CITY:	Waialua		STATE: H	ZIP:		96791		Joza	- 00.	-
MANAGER	: Jimary Quino	nes				APPLY AD				
APPLY TO	: HPHA NOT ACCEP	TING APP	PLICATIONS			PO Box 17		Bldg L lu, HI 96817 PLICATIONS		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: NOT ACCEP	TING APP	LICATIONS							NO
APPLY PHONE	: 832-5961				FAX:	832-3461	EMA	IL: hphaisherefory	ou.o	rg
Unit	Type: Num of UN	nber NITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUI Number of Peopl	r Number o	of	CAREGIVER Allowed:
s	tudio: 2	4	0			390	1			YES
One	Bdrm: 1	6	0		ĪĒ	520	1			YES
Two	Bdrm:			<u></u>	1 6					
Three	Bdrm:									
Four	Bdrm:				ī					
,							,	,		
RENT INFO: RE				UTILITIES IN):		Т	ОТА	L UNITS: 40
Minimum Rent: \$0) for Federal Lo	w Income	projects	Water and ele	ectricity					AIT LIST
*********CLOSED	8/2/2016*****									(Months): 8
				Į.						JM WAIT STIMATE 24
AGE CRITERIA:								TO REMAIN C	N NC	,
Head of householdisabled	d must be 62 ye	ears or old	er, or	WAITL	IST FOR	R PARKING:	:	CALL EVE	ERY	(Months):
uisabieu				PARKING INF			PET INI			PETS OK: YES
J				Parking inclu	ded		Small p	oets under 25 lbs.	only	
		LIMITS: N					J			
AN OWN RESIDE		PERTY:	10				_	RAL INFO:		r-1
Cannot own a hou				LEASE:			homele	ERENCES: Domesess in transitional s		
				1 year			displac	ced.		
								cants must respondence from HF		
INCOME CRITER	IA:						manne	r. No waitlist upda ants must update a	tes r	needed, however,
80% AMI: 1 perso persons \$68,500;	n \$53,250; 2 pe 4 person \$76,1	ersons \$60 00.	,900; 3	FURNISHED: Partly furnish appliances or	edmajo		info/ho waitlist	usehold compositi status via hpha.m sername/passwor	on ir iyhoi	ofo and check using.com (will
							If elder unit.	dies, under age 6	52 sp	ouse may rent
1-PERSON MAXIM	IUM MONTHLY	/ INCOME:	:	4570			Į.			
2-PERSONS MAXI	MUM MONTHL	Y INCOM	E:	5220						

	Last Comple	te Update:	2/1/2022			AREA:	Wahiawa
PROJECT NAME:	LA'IOLA ELDEF	RLY - NOT	ACCEPT	ING APPLICA	ATIO	PROJECT TYPE:	Elderly
ADDRESS:	1 lho lho Pl.					PHONE: 622-635	50
						FAX: 622-635	51
CITY:	Wahiawa	STATE: HI	ZIP:	96786		,	
	: Jay Domanguera, Resi Lyn - Admin (675-0099 : Hawaii Affordable Prop)		APPLY AD Manageme 1 Iho Iho P Wahiawa, I	nt Office I., 1st Floor		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Lyn						NO
APPLY PHONE	:: 622-6350			FAX: 622-6351	EMAIL:	mu42laiola@gmail. http://hawaiiaffordal	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 60	170	YES	384	1	2	YES
One	Bdrm: 48	195	YES	506	2	2	YES
Two	Bdrm:						
Three I	Bdrm:						
Four	Bdrm:						YES
Deposit same as studio; \$195 for 1	NT IS 30% OF INCOME: rent. Minimum rent is \$17 bdrm. ED 8/2/2016*****		JTILITIES INC			MINIMUM WA ESTIMATE MAXIMU	(Months): 24
AGE CRITERIA:						TO REMAIN ON W	, 33
Head of Househol	ld must be 62 years or old		\\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	IST FOR BARKING.		CALL EVERY	
	5+. Caregiver 18+. Othe ousehold must be 62+.		WAITE PARKING INF	IST FOR PARKING: O: YES	PET INFO	: P	ETS OK: NO
Applicants must h	ave verifiable residential	history.	Parking includ	ded (limited)	Doctor's n	ote required	
	ASSET LIMITS:	YES					
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERAL	. INFO:	
ASSET LIMIT INF	O: erty in same county.	Asset	EASE:			ts must keep contact spond to communicate	
	38,600; 2 people - \$44,10		1 year			nent in a timely man	
					Opened 1	991	
INCOME CRITER Maximum Annual 2- persons - \$39,2	Income: 1-person \$34,30		FURNISHED: Partly furnishe appliances on		Funding	State Low Income 1	00%
1-PERSON MAXIM	IUM MONTHLY INCOME	 :	2858				
2-PERSONS MAXI	MUM MONTHLY INCOM	E: ;	3267				

	Last Comp	lete Update:	2/28/2022			AREA:	Lanakila
PROJECT NAME:	LANAKILA GA	RDENS				PROJECT TYPE:	Family
ADDRESS:	833 North School St.					PHONE : 949-41	11
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 949-72	11
	R: Shane Lyman, Reside	ent Manager		APPLY AD 1055 Kalo F Honolulu, H	Pl., Ste. 103		OUT-OF-STATE APPLICATION
APPLY TO): Bob Tanaka Inc.			rionolala, ri	11 30020		ACCEPTED:
APPLY ATTN	I: Ext. 24						120
APPLY PHONE	E: 949-4111			FAX : 949-7211	EMAIL:		
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 6	080	2.5xrent				YES
	Bdrm: 6 15	1099	2.5xrent				YES
Three		1215	2.5xrent				YES
	Bdrm:	1210					NO
City Section 8 vou	uchers accepted.		Water				(Months): 12
AGE CRITERIA:			Į.				STIMATE 24
	d must be 18 years or o	lder	\\/\ITI C	ST FOR PARKING:		TO REMAIN ON W	
			PARKING INFO		PET INFO	: F	PETS OK: NO
			Parking include	ed			
AN OWN DESI	ASSET LIMITS: DENTIAL PROPERTY:				J GENERAL	INEO:	
ASSET LIMIT INF	O:		LEASE:			Sect 8 Vouchers	
Income from asse income limit	ets cannot make applica	nts go over	1 year; then mo	onth-to-month	applicants well as re	th completing regula must keep all cont spond to communic tent in a timely man	act info current, as ation from housing
INCOME CRITER					managon	ione in a timoly man	
Min. income requi below income limi	ired. Must make 2.5x re it.	nt and be	FURNISHED: Partly furnished appliances only				
 1-PERSON MAXIN	NUM MONTHLY INCOM	E:	4696		J		
2-PERSONS MAX	IMUM MONTHLY INCO	ME:	5367				

		Last Comp	lete Update:	2/22/2022			AREA	: Kailua
PROJECT NAME:	LANI	HULI					PROJECT TYPE	: Elderly
ADDRESS:	25 Aulik	ke St.					PHONE: 263-02	268
CITY:	Kailua		STATE: HI	ZIP:	96734		FAX:	
MANAGER	R: Dale C	Cripps, Residen	t Manager		APPLY AD			OUT OF STATE
APPLY TO	D: Bob Ta	anaka Inc.			1055 Kalo F Honolulu, H			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	N: Ext. 24	4						YES
APPLY PHONE	E: 949-41	111		ı	FAX: 949-7211	EMAIL:		
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	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:							NO
Accepts section 8	3 voucher	rs		Water			MAXIM	VAIT LIST E (Months): 12 IUM WAIT STIMATE 24
AGE CRITERIA: Head of househol	ld must h	e 62 vears or o	older or				TO REMAIN ON Y	
disabled. Under a not without HOH.				WAITLIS PARKING INFO	T FOR PARKING: YES	PET INFO		PETS OK: NO
not wander for a				\$25/month	1120		al/assistance only	into Into
	A	SSET LIMITS:	NONE					
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INF Income from asse limits.		ot put person ov	ver income	LEASE: 1 year		outside h	ome. Participating Rental Assistance I 993	
INCOME CRITER	IA:					Accepts s	section 8	
Minimum Income	Required	d. Must make 2	2.5 x the rent	FURNISHED: Partly furnished appliances only.			OCCURRED ON	AST COMPLETED
 -PERSON MAXIM	иим мо	NTHLY INCOM	1E:	4696]		
2-PERSONS MAXI	IMUM M	ONTHLY INCO	ME:	5367				

Last Comp	olete Update:	1/24/2022			AREA:	Kakaako
ROJECT NAME: LOLIANA					PROJECT TYPE:	Family
ADDRESS: 565 Quinn Lane					PHONE: 522-054	41
CITY: Honolulu	STATE: HI	ZIP:	96813		FAX: 522-05	39
MANAGER: Jen Yu, General Mar	nager		APPLY AD	DRESS:		OUT-OF-STA
APPLY TO: Housing Solutions, Ir	nc.					APPLICATION ACCEPTED
APPLY ATTN:						
APPLY PHONE: 522-0541		F	FAX:	EMAIL: j	en@hsiservices.ne	et
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 43	900		319	2	4	
One Bdrm:						
Two Bdrm:						
Three Bdrm:						
Four Bdrm:						NO
ENT INFO: RENT IS 30% OF INCOM	IE: NO	UTILITIES INCLI	UDED:		TOTA	L UNITS: 42
900/month		Electricity, water	, refuse, sewer		MINIMUM W ESTIMATE	
						JM WAIT STIMATE
GE CRITERIA:					TO REMAIN ON W	,
dult 18+ with at least 1 minor child (und	der 18)	WAITLIS	T FOR PARKING:		CALL EVERY	(Months):
		PARKING INFO:	NO	PET INFO:	F	PETS OK: NO
ASSET LIMITS:		\$35/ month				
AN OWN RESIDENTIAL PROPERTY:				general.	INFO:	
SSET LIMIT INFO:		LEASE:			or at risk homeless	
		Month-to-month		Under 50%	e a registered sex	
ICOME CRITERIA:	ļ			Application):	
flust be less than 50%AMI		FURNISHED:		Ask manag jen@hsise	gement to email it, rvices.net	at
		unfurnished, ma only. No carpet	jor appliances			
PERSON MAXIMUM MONTHLY INCOM	ΛE:	0				

		Last Comp	olete Update:	1/24/2022			AREA:	Waianae
PROJECT NAME:	MA'IL	.I I (HPH	A-lee) - NO	OT ACCEP	TING APPICA	TION	PROJECT TYPE:	Family
ADDRESS:							PHONE: 697-717	71
			F				FAX: 697-717	74
CITY:	Waianae	9	STATE: H	II ZIP:	96792		,	
MANAGER	: Mandy	Miyamoto			APPLY AD	DRESS:		
					1002 North Honolulu, F			OUT-OF-STATE APPLICATION
APPLY TO		CCEPTING A	PPLICATIONS	3		PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN								NO
ADDLY BURNE			PPLICATIONS	•	 022 2464	EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 832-59	01			FAX: 832-3461			
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:							
Two	Bdrm:	7	0		912	2	6	YES
Three I	Bdrm:	13	0		1394	3	8	YES
Four I	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 ********CLOSED) for Fede	ral Low Incom		UTILITIES IN Water and all	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	P .
Head of household	d must be	18 years or o	older	WAITL	LIST FOR PARKING:		CALL EVERY	(Months):
				PARKING INI	O:	PET INFO		PETS OK: YES
	AS	SSET LIMITS:	NONE	Included		the catego	nimals ok, but only ories listed below: under 25 lbs) or cat	
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INF		hu		LEASE:			ENCES: Domestic \ in transitional shelt	
				1 year		displaced		
						*Applican	ts must respond to andence from HPHA,	any in a timely
INCOME CRITER	IA:					manner. I	No waitlist updates r s must update any c	needed, however,
ncome Eligibility = Maximum Annual	: 80% of A	AMI 1 person - \$53	3,250;	FURNISHED:		info/house	ehold composition in atus via hpha.myhou	nfo and check
2 persons - \$60,90 4 persons - \$76,10	00; 3 pers	sons - \$68,500);	Partly furnish appliances or	nly, no carpet		rname/password to	
6 persons - \$88,30 8 persons - \$100,4	00; 7 pers					Funding:	Fed Low Inc Pub Hs	sing 100%
F5.55.10 \$100,5						All convic	tions must be 3 yrs	ago, unless it's
1-PERSON MAXIM	IUM MON	ITHLY INCOM	ΛΕ:	4570				
2-PERSONS MAXI				5220				

		Last Comp	plete Upo	date:	1/24/2022				AREA:	Waianae
PROJECT NAME:	MA'ILI	II (HPH	A-lee	- NO	T ACCEP	TING /	APPL	ICATIO	PROJECT TYPE:	
ADDRESS:					. 7.002.				PHONE : 697-717	71
		·	_						FAX: 697-717	
CITY:	Waianae		STAT	E: HI	ZIP:		96792		1	
MANAGER	: Mandy N	/liyamoto						ADDRESS: orth School St.		OUT-OF-STATE
APPLY TO	. НРНА					I	Honolulu	ı, HI 96817		APPLICATION
ALLETTO		CEPTING A	PPLICAT	TIONS			NOT AC	CEPTING APPL	ICATIONS	ACCEPTED: NO
APPLY ATTN		plications of		TIONS						NO
ARRI V RUONE			AFFLICA	IONS		FAX: 8	20 2464	EMAIL	: hphaishereforyou.c	org
APPLY PHONE	:: 632-396	1				FAX: O	32-3401			
Unit	Type:	Number			Minimum INCOME			MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RE	NT:	Required:	S	Q FT:	of People	People:	Allowed:
St	tudio:					ī H				
One E	Bdrm:					Ī				
Two E	Bdrm:	12		0			912	2	6	YES
Three E	Bdrm:		Ë							
Four E	Bdrm:	12		0		1 (1394	4	10	YES
RENT INFO: RE Minimum Rent: \$0 *******CLOSED 8) for Feder	al Low Incom			UTILITIES INC		r electric	bity	MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:					•					00
Head of household	d must be	18 years or	older		\A/A ITI	IOT FOR		10	TO REMAIN ON W	
					PARKING INF	IST FOR O:	PARKIN	PET INFO): F	PETS OK: YES
]	ASS	SET LIMITS:	NONE		Included			the categ	animals ok, but only ories listed below: (under 25 lbs) or cat	
AN OWN RESID	DENTIAL F	PROPERTY:	NO					GENERA	L INFO:	
ASSET LIMIT INFO					LEASE:				ENCES: Domestic \s in transitional shelt	
Carriot own a nou	ise on Oan	ıu			1 year			displaced		ore, in relatively
									nts must respond to	
INCOME CRITERI	IA:							manner.	ndence from HPHA, No waitlist updates r	needed, however,
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30	= 80% of Al Income: 1 00; 3 perso 00; 5 perso 00; 7 perso	person - \$53 ons - \$68,500 ons - \$82,200	0; 0;		FURNISHED: Partly furnishe appliances on			info/hous waitlist st need use	s must update any c ehold composition in atus via hpha.myhou rname/password to Fed Low Inc Pub Hs	nfo and check using.com (will do so).
8 persons - \$100,4	+30							All convid	ctions must be 3 yrs	ago, unless it's
1-PERSON MAXIM	IUM MON	THLY INCOM	ME:		4570			,		
2-PERSONS MAXI	MUM MON	NTHLY INCO	OMF:		5220					

		Last Comp	lete Update:	2/1/2022			AREA:	Waianae
PROJECT NAME:	MA'II	LI LAND T	RANSITIC	NAL HOUS	SING		PROJECT TYPE:	Emergency/Transi
ADDRESS:	87-190	Maliona St.					PHONE: 696-488	35
CITY:	Waiana	Α	STATE: HI	ZIP:	96792		FAX : 696-713	31
	VValaria		0.72.		30732			
		sa Joseph, Prog	gram Director	System (CES)	APPLY ADI			OUT-OF-STATE APPLICATION
APPLY ATTN		alo tillough ook	Sidiliated Entry	5y5t6iii (020)				ACCEPTED: NO
APPLY PHONE	Ξ: 696-48	385			FAX: 696-7131	EMAIL:		
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:	7	550		380	2	4	
One	Bdrm:	4	650		620	5	6	
Two	Bdrm:	4	750		608	6	8	
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE Transitional Shelt must have at leas from here is equiv in terms of eligibil AGE CRITERIA: Adult 18+ with at	er for hor t one chi valent to l ity for HF	meless families ld under 19 yrs being evicted fr PHA housing	only and . Evicted om HPHA		ST FOR PARKING:		MINIMUM W ESTIMATE MAXIMULIST ES TO REMAIN ON W CALL EVERY	(Months): O JM WAIT STIMATE O VAITLIST (Months):
	Λ	SSET LIMITS:	NONE	PARKING INFO):	PET INFO): F	PETS OK: NO
AN OWN RESI						GENERAL	INFO:	
ASSET LIMIT INF				LEASE:	1	keep con communi manner.*		well as respond to ment in a timely
INCOME CRITER	IA:			,		participar		
				refrigerator; 2bc oven/range, all stovetop only (r	drm has other units have	VI-SPDA	s verification needed T Required though Coordinated	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	2/22/2022				AREA:	Aiea
PROJECT NAME:	MAKALAPA MA	ANOR (Co-	p Fee)				PROJECT TYPE:	Family
	99-120 Kohomua St.						PHONE: 487-711	4
CITY:	Aiea	STATE: HI	ZIP:		96701		FAX:	
	: Tracy Hefferon, mana	-			APPLY AD 3165 Waia Hi. 96816	DDRESS: lae Ave. #200,	Honolulu,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	:: 735-9099			FAX: 7	81-295-342		https://mdihawaii.co tracyh@mdihawaii.	om/makalapamanor com
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	s	Q FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 18	0				1	2	YES
Two I	Bdrm: 29	0				4	6	YES
Four I	Bdrm: 34	0				6	8	YES
5 - Five-bdrm units Down Payment bayear. 1 bdrm = \$1 (6/08) = \$27,105;	NT IS 30% OF INCOME s (8 min people 10 max) ased on size of unit and to the second of	ime of the 5; 3 bdrm Fees:	ITILITIES INC Vater	CLUDED:			MINIMUM WARE MAXIML	
AGE CRITERIA: Head of household	d must be 18 years or ol	der					TO REMAIN ON W	
	•		WAITLI PARKING INF	-	PARKING:	: PET INFO:	P	PETS OK: YES
	ASSET LIMITS:		Parking include	ded	,			,
AN OWN RESID	DENTIAL PROPERTY:	YES				GENERAL	INFO:	
ASSET LIMIT INF	O:	_	EASE: Call for info			1 2-bdrn 3 3-bdrn 2 4-bdrn 1 5-bdrn	า า า	
INCOME CRITER Maximum annual	income: 1 person - \$53,7	700, F	URNISHED:				ryer hookups in unit 24 units Section 8; r	
4 persons - \$76,65	50, 3 persons - \$69,000, 50, 5 persons - \$82,800, 50, 7 persons - \$95,050 200	a	Partly furnishe appliances onl nave carpet				ONSE IN 2021. MPLETED UPDATE 7.	E OCCURRED ON
	NUM MONTHLY INCOM		1475					

	Last Comp	lete Update:	1/24/2022				Nuuanu
DDO IFOT NAME.			NOT ACC	CEPTING APP	LICA	AREA: PROJECT TYPE:	
	MAKAMAE (HE	HA-non)	- NOT ACC	SEPTING APP			Elderly
ADDRESS:	21 South Kuakini St.				1	PHONE: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 586-972	8
MANAGER APPLY TO	t: Sol Sentons b: HPHA NOT ACCEPTING AF	PPLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCER	School St.	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications offi						NO
APPLY PHONE	NOT ACCEPTING AF	PPLICATIONS		FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 108	0		384	1	2	YES
One I	Bdrm: 16	0		500	1	4	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						
	NT IS 30% OF INCOME of for Federal Low Incom 8/2/2016******		Water and allo	CLUDED: owance for electricity		MINIMUM WA ESTIMATE ((Months): 24
AGE CRITERIA:					Т	O REMAIN ON W	
Head of household	d or spouse must be 62	years or	WAITL	IST FOR PARKING:		CALL EVERY	
'			PARKING INF	O: NO	PET INFO:		ETS OK: YES
1			Included		Small pets t	ınder 25 lbs. only	
AN OWN DECI	ASSET LIMITS: DENTIAL PROPERTY:				JENERAL II	NEO:	
ASSET LIMIT INF		INO	LEASE:		PREFEREN	ICES: Domestic V	
Cannot own a hou	ise on Oahu		1 year		homeless in displaced.	transitional shelte	ers; involuntary
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	. , , , , , , , , , , , , , , , , , , ,	FURNISHED: Partly furnishe appliances on		corresponde manner. No applicants n info/househ waitlist statu need userna	must respond to a ence from HPHA, waitlist updates n nust update any co old composition in us via hpha.myhou ame/password to co , under age 62 spo g: Fed Low Inc Pu	in a timely eeded, however, contact fo and check using.com (will do so). buse may rent
	MUM MONTHLY INCOM		4570				

	KANA HAL	_				PROJECT TYPE:]
ADDRESS: 95-1	41 Kipapa Dr.				1	PHONE: 623-392	20
CITY: Milila	ani	STATE: HI	ZIP:	96789		FAX: 623-392	20
MANAGER: Mid	hael Ramos			APPLY AD	DRESS: apa Drive, Mililar	ni 96789	OUT-OF-STA
APPLY TO: Ma	kana Hale Cooper	ative		00 111 1400	apa 21170, Millian	00700	APPLICATION ACCEPTE
APPLY ATTN:							YES
APPLY PHONE: 623	3-3920		F	FAX:	EMAIL:		
Unit Type	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio							
One Bdrm							
Two Bdrm	30	696	NO	705	2	5	YES
Three Bdrm	: 69	771	NO	843/882	3	7	YES
Four Bdrm	27	857	NO	1050	4	9	NO
:NT INFO: RENT IS no bdrm rent is \$592- ree bdrm rent is \$650 ur bdrm rent is \$729-	696 maximum. 6-771 maximum.	E: YES	UTILITIES INCLU Water	UDED:		MINIMUM W ESTIMATE MAXIMU	
E CRITERIA:					Т	O REMAIN ON W	į.
ead of household mus			WAITLIS ⁻	T FOR PARKING:		CALL EVERY	(Months):
story.	modi vermable rec	Sideritial	PARKING INFO:		PET INFO:		PETS OK: NO
	ASSET LIMITS:		Parking included stall @ \$30/mo.	d; waitlist for 2nd		ve animals with m	edical verification
AN OWN RESIDENT SET LIMIT INFO:	IAL PROPERTY:	YES			GENERAL II Application:		
operty is counted who	en determining inc	ome	LEASE: Month-to-month			n manager's office) .
gibility.					*Note, waitli every 6 mor	ist status inquiry n nths.	nust be in writing,
COME CRITERIA:						regular waitlist up contact info update	
ximum Annual Income: 2 persons: \$45,650;		5,650;	FURNISHED:	major	. `		
	persons: \$51,350; 4 persons: \$57,050; persons: \$61,600; 6 persons: \$66,200; persons: \$70,750; 8 persons: 75,300;		Partly furnishedmajor appliances only.		*Applicants must respond to any correspondence from management, in a timely manner.*		

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	Last Comp	lete Update:	1/24/2022			4054	McCully
DDO IECT NAME.	BAAIZIIA ALII (I	IDIIA ban)	NOT A	CCEDTING	ADDLIC	AREA:	
	MAKUA ALII (I	1PHA-non)	- NOT A	CCEPTING	APPLIC		
ADDRESS:	1541 Kalakaua Ave.					PHONE: 973-01	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 973-01	97
	,						
MANAGER	: Loane Ah Sam			APPLY	ADDRESS:		
					lorth School St.		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AF				ılu, HI 96817 CCEPTING APF	PLICATIONS	APPLICATION ACCEPTED:
ADDLY ATTN							NO
APPLY ATTN	I: Oahu applications offi NOT ACCEPTING AF						
APPLY PHONE	: 832-5961			FAX: 832-346		IL: hphaishereforyou.	org
Unit	Type: Number		Minimum		MINIMUI Numbei		CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of Peopl		Allowed:
S	tudio:						
One	Bdrm: 210	0		522	1	4	YES
Two	Bdrm:						YES
Three				_	-	-	
Four	Bdrm:						
DENT INEO: DE	NT IS 30% OF INCOME	VEC	LITHITICON	CLUDED.		TOT	AL LINITS: D44
) for Federal Low Incom		UTILITIES IN				AL UNITS: 211
*********CLOSED		-				MINIMUM W ESTIMATE	
CLOSED	6/2/2016						UM WAIT
			<u> </u>				STIMATE 60
AGE CRITERIA:						TO REMAIN ON V	
Head of househole	d or spouse must be 62	years or	WAITI	LIST FOR PARKI	NG:	CALL EVERY	(Months):
older, or disabled			PARKING IN	FO: YES	PET IN	FO:	PETS OK: YES
<u> </u>			Included		Small p	ets under 25 lbs. only	′
	ASSET LIMITS:	NONE					
AN OWN RESI	DENTIAL PROPERTY:	NO			GENER	AL INFO:	
ASSET LIMIT INF			LEASE:			RENCES: Domestic	
Cannot own a hou	ise on Oahu		1 year		displac	ess in transitional shelled.	ters; involuntary
					*Applic	ants must respond to	anv
J					corresp	ondence from HPHA	, in a timely
ncome Eligibility =			FURNISHED		applica	r. No waitlist updates ints must update any o	contact
Maximum Annual	Income: 1 person - \$53		Partly furnish			usehold composition i status via hpha.myho	
	00; 3 persons - \$68,500 00; 5 persons - \$82,200			nly, no carpet		sername/password to	
6 persons - \$88,30	00; 7 persons - \$94,350					dies, under age 62 sp	
8 persons - \$100,4	400				unit. Fu	unding: Fed Low Inc P	Pub Hsing 100%
J.			1		J		
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570				
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

		Last Compl	ete Update:	2/22/2022		AREA:	Liliha	
PROJECT NAME:	MAL	JLANI HA	LE				PROJECT TYPE:	Elderly
ADDRESS:	114 Nor	th Kuakini St.					PHONE: 524-273	31 537-1213
CITY:	Honolulu	J	STATE: HI	ZIP:	96817		FAX : 545-52	14
	x 10			Lee, COS 524-27		ania St. C101		OUT-OF-STATE APPLICATION
		Real Estate Co						ACCEPTED: YES
APPLY PHONE		g Management 31ext 3609	Бераппеп	F	FAX: 545-5214	EMAIL:	None	
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:							
One	Bdrm:	150	1410			1	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
Project has some wait, as of 2022). No wait for marke Market Rate - \$14	Section 8	3 units (60 units	s; 5 year	UTILITIES INCLU			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	, 33
Head of Househol				WAITLIS ⁻	T FOR PARKING:		CALL EVERY	
household must b			e	PARKING INFO:	1	PET INFO		PETS OK: YES
1	AS	SSET LIMITS:	NONE	Parking available year waiting list	e (45 stalls) 2 after move-in	Subject to	property manager's	s approval
AN OWN RESID		PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	·O:			LEASE:		If elderly t rent unit.	enant dies, under a	ge 62 spouse may
				1 year			ation to Shopping a Charities Hawaii	vailable through
INCOME CRITER Maximum annual Maximum annual (80% of AMI) = 1	income for income			FURNISHED: Partly furnished-appliances only,		SQFT of u	Section 8 60 units Market 89 units + 1 unit for resident n units not available fr	ngr om manager.
I 1-PERSON MAXIM	MUM MON	NTHLY INCOM	E:	5446		Į.		
2-PERSONS MAXI	IMUM MC	NTHLY INCO	ИЕ :	6221				

		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: 455-422	25	
CITY:	Pearl Ci	ity	STATE: HI	ZIP:	96782		FAX : 455-422	25	
MANAGER					APPLY AD	St.		OUT-OF-STATE APPLICATION	
APPLY TO): Location	ons LLC			. can enj,	00.0=		ACCEPTED:	
APPLY ATTN	l: Proper	ty Managemen	t Division						
APPLY PHONE	E: 455-42	225			FAX : 455-4232		L: Locationsrentals.com/affordable- rentals.aspx		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm:								
	Bdrm:	71	940	2.5x rent	746			YES	
Three									
Four	Bdrm:]	YES	
RENT INFO: RE Has Sliding Scale RAP (rent assista Section 8 certifica gross income requ	for Rent nce) = \$ ate holder	t: \$940 minus 725 minimum r s need not mee	\$215 max ent.	UTILITIES INCL			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT	
AGE CRITERIA:							TO REMAIN ON W	00	
Head of househol	d must be	e 18 years or o	lder	WAITLIS	ST FOR PARKING:		CALL EVERY		
				PARKING INFO		PET INFO	: F	PETS OK: NO	
	Λ.	SSET LIMITS:	NONE	Parking include	eu				
AN OWN RESI						" GENERAL	. INFO:		
ASSET LIMIT INF				LEASE:			firmation letter mailed after receiving cation. Common laundry area. Large		
				1 year		communit Visitor par	y area. On-site res king. Near Pearl Ci d Pearl Highlands.	ident manager.	
INCOME CRITER						2019 Upd	ate - Info from Web	site	
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	0 0 0 0 0	60% AMI:		FURNISHED: Partly Furnishe appliances, viny window curtains up.	yl tile floors,	. '	PONSE IN 2021.		
I-PERSON MAXIM	OM MUN	NTHLY INCOM	IE:	4085					
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	4665					

	Last Comple	te Update:	2/22/2022				AREA:	Manoa
PROJECT NAME:	MANOA GARDE	ENS ELDER	RLY HOU	JSIN	G		PROJECT TYPE:	Elderly
ADDRESS:	2790 Kahaloa Dr.						PHONE: 808-762	2-0101
0.1777		07475					FAX: 930-301	5
CITY:	Honolulu	STATE: HI	ZIP:		96822		,	
MANAGER	: Michelle Look, Property	Manager			APPLY ADDI			
APPLY TO): Locations LLC				Locations, Pro Division, P.O. Hi. 96823-242	Box 22420,		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-738-3147			FAX:	808-930-3015	EMAIL:	Michelle.Look@Lookhttps://www.location	cationsHawaii.com nsrentals.com/afford
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 48	950	2xrent		390	1	2	YES
One I	Bdrm: 31	1005	2xrent		448	2	3	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
Market rent for stu Market rent for 1b	INT IS 30% OF INCOME: udio: \$950 - \$1350 drom: \$1005 to \$1400 holders need not meet the uirement.	V	TILITIES INC Vater & Sewe		D:		MINIMUM W. ESTIMATE MAXIMU	(Months): 24
AGE CRITERIA:							TO REMAIN ON W	00
All applicants/residents	dents must be 62 or older	at time	WAITI	IST FO	R PARKING:		CALL EVERY	
''	oply without verifiable resid	dential P	ARKING INF		YES	PET INFO	: F	PETS OK: NO
history.	ASSET LIMITS:	F	51 stalls; \$20, parking also a					
AN OWN RESID	DENTIAL PROPERTY:	/ES				GENERAL	. INFO:	
ASSET LIMIT INF	O:		EASE:			Caregiver outside he	s are allowed with Mome.	1D letter; can work
		[6	months, the	n mont	h to month	Catholic C	992 ation to Shopping av Charities Hawaii n and Resident Sele	-
INCOME CRITER						Online wv	ww.eahhousing.org	
	/II \$50,640, 80%AMI \$67,5 .МI \$57,840, 80%AMI \$77	520 120	URNISHED: Partly furnisheappliances on			NO RESF	PONSE IN 2021. LA: OCCURRED IN 202	
- 1-PERSON MAXIM	MUM MONTHLY INCOME:	: 4	085			1		
2-PERSONS MAXI	IMUM MONTHLY INCOM	E: 4	665					

	Minimum INCOME Required: 2637.50 2825.00 3387.5	96817 APPLY AD 60 N. Nimit Honolulu, H AX: 524-0060 SQ FT: 430 655 729	DDRESS: tz Hwy HI 96817	PHONE: 528-446 FAX: 524-006 The state of th	OUT-OF-STATE APPLICATION ACCEPTED: YES CAREGIVER Allowed: YES YES YES YES
Properties Assistant RENT: 1100 1200 1330 ME: NO UT	Minimum INCOME Required: 2637.50 2825.00 3387.5	APPLY AD 60 N. Nimit Honolulu, F AX: 524-0060 SQ FT: 430 655	DDRESS: tz Hwy HI 96817 EMAIL: No MINIMUM Number of People 1	pot Accepted MAXIMUM Number of People:	OUT-OF-STATE APPLICATION ACCEPTED: YES CAREGIVER Allowed: YES YES YES YES
Properties Assistant RENT: 1100 1200 1330 ME: NO UT	Minimum INCOME Required: 2637.50 2825.00 3387.5	APPLY AD 60 N. Nimit Honolulu, F AX: 524-0060 SQ FT: 430 655	EMAIL: No MINIMUM Number of People	MAXIMUM Number of People:	OUT-OF-STATI APPLICATION ACCEPTED: YES CAREGIVER Allowed: YES YES YES YES
RENT: 1100 1200 1330 ME: NO UT	Minimum INCOME Required: 2637.50 2825.00 3387.5	60 N. Nimit Honolulu, F AX: 524-0060 SQ FT: 430 655	EMAIL: No MINIMUM Number of People	MAXIMUM Number of People:	APPLICATION ACCEPTED: YES CAREGIVER Allowed: YES YES YES YES
RENT: 1100 1200 1330 ME: NO UT	Minimum INCOME Required: 2637.50 2825.00 3387.5	SQ FT: 430 655	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed: YES YES YES
1100 1200 1330 ME: NO UT	Minimum INCOME Required: 2637.50 2825.00 3387.5	SQ FT: 430 655	MINIMUM Number of People	MAXIMUM Number of People:	Allowed: YES YES YES
1100 1200 1330 ME: NO UT	INCOME Required: 2637.50 2825.00 3387.5	430	Number of People	Number of People: 2 3	Allowed: YES YES YES
rolder	ater + Sewer			MINIMUM W. ESTIMATE MAXIML	(Months): 6 JM WAIT BTIMATE 60 VAITLIST
S: NONE 7: YES	ent does not inc	clude parking.	Service anim	nals only. NFO:	PETS OK: YES
1 y 4 5 40 \$81,600 Pa	LEASE: 1 year FURNISHED: Partly furnishedmajor		Most units had Application: Pick up from Email: marin	e: Section 8) ave a Lanai Resident Manag @hawaiiaffordab	ger's office ble.com or
	S: NONE 7: YES LE 1 1 40 \$81,600	PARKING INFO: Rent does not into S: NONE 7: YES LEASE: 1 year FURNISHED: Partly furnished-appliances only	WAITLIST FOR PARKING PARKING INFO: Rent does not include parking. LEASE: 1 year FURNISHED: Partly furnishedmajor appliances only	WAITLIST FOR PARKING: PARKING INFO: Rent does not include parking. Service anim GENERAL IN Accepts all f (for example Most units head) Application: Pick up from Email: maring laurak @ haw FURNISHED: Partly furnishedmajor appliances only	WAITLIST FOR PARKING: PARKING INFO: Rent does not include parking. LEASE: 1 year FURNISHED: Partly furnishedmajor appliances only CALL EVERY PET INFO: FE Service animals only. Service animals only. Most units have a Lanai Application: Pick up from Resident Manage Email: marin@hawaiiaffordable.com Partly furnishedmajor appliances only

	Last Compl	ete Update:	2/22/2022			AF	REA:	Chinatown
PROJECT NAME:	MAUNAKEA TO	OWER (CL	OSED for	apps in	2007)	PROJECT TY	YPE:	Family
ADDRESS:	1245 Maunakea St.					PHONE: 53	7-990	5
CITY:	Honolulu	STATE: HI	ZIP:	968	17	FAX : 54	5-166	3
		,	,					
MANAGER	: Debra Fong			APP	LY ADDRESS:			OUT-OF-STATE
APPLY TO) :							APPLICATION ACCEPTED:
APPLY ATTN	I: Maunakea Tower							
APPLY BUONE	- 527 0005			- - - - - - - - - -		AIL: sandalwoodm		
APPLY PHONE	:: 537-9905			FAX: 545-1	003	Mauriakealow	ei @S	andalwoodmgt.com
Unit	Type: Number		Minimum		MINIM Numb			CAREGIVER
	of UNITS:	RENT:	Required:	SQ F	T: of Peo			Allowed:
S	tudio:							
One I	Bdrm: 254	0	NO	560	1	2		YES
Two	Bdrm: 126	0	NO	742	2	4		YES
Three	Bdrm:							
Four	Bdrm:							NO
DENT INFO: DE	NT IS 30% OF INCOME	VEC	UTILITIES INC	CLUDED.		-	-OT 4	L LINITO: 1000
	Y ACCEPTING APPLICATION		Water	SLUDED:				L UNITS: 380
Applications given	n out 5/17 placed on wait	ing list				_		(Months): 60
								IM WAIT
AGE CRITERIA:		,						TIMATE 120
-	d must be 18 years or ole	der	\A/A ITI	ICT COD DAG	NZING.	TO REMAIN (CALL EV		
			WALL PARKING INF	IST FOR PAR O:	PET II	NFO:	Р	ETS OK: NO
			Parking include	ded	Assis	tive animals only		
	ASSET LIMITS:	NONE						
	DENTIAL PROPERTY:	YES			<u> </u>	RAL INFO:		
ASSET LIMIT INF	O:		LEASE:		Credi	ing: 379 units Low I it. Section 8 100%	ncom	ne Housing Tax
			1 year; then n	nonth-to-mont		rmation letter sent	upon	receipt of
						cation		·
INCOME CRITER					Appli	cants on wait list wi allv	II rece	eive a notice
	Income: 1 person - \$36,650; 3 persons - \$47,100		FURNISHED: Partly furnish			RESPONSE IN 202 ²	1 ΙΔ	ST COMPLETED
4 persons - \$52,30	00;		appliances or			ATE OCCURRED (
I 1-PERSON MAXIM	MUM MONTHLY INCOME	≣:	3054					
2-PERSONS MAXI	IMUM MONTHLY INCOM	⁄ Е:	3488					

	Last Comple	ete Update:	1/24/2022				AREA:	Palama
PROJECT NAME:	MAYOR WRIGH	IT HOMES	(HPHA-h	on) -	NOT A	CCEP	PROJECT TYPE:	
	521 North Kukui St.						PHONE: 832-315	53
OITY	J	OTATE III	7 71D F				FAX: 832-318	38
CITY:	Honolulu	STATE: HI	ZIP:		96817		-	
MANAGER	: Cynthia Yoshida - Man	ager			APPLY AL	DDRESS: h School St.		OUT-OF-STATE
APPLY TO	· HPHA				Honolulu,	HI 96817	10.4.7.0.1.0	APPLICATION
"""	NOT ACCEPTING APP	PLICATIONS			NOT ACC	EPTING APPLI	ICATIONS	ACCEPTED: NO
APPLY ATTN	I: Oahu applications offic NOT ACCEPTING APP							140
APPLY PHONE		Lio/trioito		EAY.	832-3461	EMAIL:	hphaishereforyou.o	rg
ATTETTTIONE	002 0001			1 77.	002 0401			
Unit	Type: Number		Minimum INCOME	Г		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:		SQ FT:	of People	People:	Allowed:
St	tudio:							
One E	Bdrm: 24	0			530	1	2	YES
Two E	Bdrm: 114	0		Ī	732	2	4	YES
Three E	Bdrm: 168	0			908	3	6	YES
Four E	Bdrm: 50	0			1203	4	8	YES
	NT IS 30% OF INCOME: of for Federal Low Income 8/2/2016******	projects	UTILITIES INC Water and gas electricity				MINIMUM W ESTIMATE	
		Į.					LIST ES	STIMATE 60
AGE CRITERIA:	d must be 18 years or old	lor					TO REMAIN ON W	
li lead of flousefloid	u must be to years or old				R PARKING	_		PETS OK: YES
			PARKING INF Included	<u> </u>	J	PET INFO multiple a	nimals ok, but only o	
	ASSET LIMITS:	NONE					ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:					GENERAL	_ INFO:	
ASSET LIMIT INFO			LEASE:				ENCES: Domestic V	
Cannot own a hou	ise on Oanu		1 year			displaced		ers, involuntary
INCOME CRITERI	IA:					correspor manner.	ts must respond to andence from HPHA, No waitlist updates resmust update any c	in a timely needed, however,
ncome Eligibility =	: 80% of AMI Income: 1 person - \$53,2)F().	FURNISHED:			info/house	ehold composition in	nfo, and check
2 persons - \$60,90	00; 3 persons - \$68,500; 00; 5 persons - \$82,200;		Partly furnishe appliances on				atus via hpha.myhou rname/password to	
6 persons - \$88,30	00; 7 persons - \$94,350;					Funding:	Fed Low Inc Pub Hs	sing 100%
8 persons - \$100,4	+50					All convic	tions must be 3 yrs	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	i:	4570			Į.	-	
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220					

	Last Comp	lete Update:	2/28/2022				AREA:	Mililani	
PROJECT NAME:	MEHEULA VIS	TA I					PROJECT TYPE:	Elderly	
ADDRESS:	95-1060A Lehiwa Drive	9					PHONE: 626-916	52	
CITY:	Mililani	STATE: HI	ZIP:		96789		FAX: 626-916	53	
MANAGER	: Resident Manager - L		ct AA - Tracy Ni	colas	APPLY ADD	DRESS:			
APPLY TO	and Cassidy Navares : Meheula Vista				95-1060A Le Mililani HI 9			OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	l: Management Office							YES	
APPLY PHONE	: 626-9162			FAX:	626-9163	EMAIL:	http://www.locationsble-rentals.aspx	srentals.com/afforda	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: 75	915	2 X rent		420				
Two I	Bdrm:								
Four I	Bdrm:							YES	
RENT INFO: RE	NT IS 30% OF INCOME	E: NO	UTILITIES INC			_		L UNITS: 75	
50% AMGI - \$915		cepted to	Licensity, was	o., oon	O.		MINIMUM W ESTIMATE	(Months): 6	
<u> </u>	come. No credit evaluati	ion required						JM WAIT STIMATE 12	
AGE CRITERIA: All residents must	be 55 or older.		\A/A T	OT FO			TO REMAIN ON W CALL EVERY		
Applicants can ap histories.	ply without verifiable res	sidential	PARKING INFO	0:	NO na first-	PET INFO	: F	PETS OK: NO	
	ASSET LIMITS:	NONE	come, first-ser Once all stalls	have b	een				
AN OWN RESIDE	DENTIAL PROPERTY:	YES	assigned, tena those without a			GENERAL		ar weitligt undetee	
	ssets is counted to dete	rmine	LEASE:			applicants well as re	th completing regula s must keep all cont spond to communic sent in a timely man	act info current, as ation from housing	
INCOME ODITED	14.					225 more	units planned.		
INCOME CRITERI 30% AMI - Max in \$30,240 two perso	come \$26,460 one pers	on,	FURNISHED: Range/oven, grefrigerator, fre	ezer, v	vinyl	landscape laundry,	ea, community room	coin-operated	
			flooring, windo ceiling fan.	W COVE	iiilyə,	purpose p	Onsite resident manager, visitor parking, multi- purpose pavillion.		
<u> </u>						Funding:	LIHTC, HHFDC, RH	ITF, and DURF	
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	3675						

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	Last Comple	ete Update:	2/28/2022				AREA:	Mililani
PROJECT NAME:	MEHEULA VIST	TA II					PROJECT TYPE:	Elderly
ADDRESS:	95-1060B Lehiwa Drive						PHONE: 626-916	62
CITY:	Mililani	STATE: Hi.	ZIP:		96789		FAX: 626-916	63
	: Resident Manager - Lu and Cassidy Navares : Meheula Vista	uana Holi; Projec	t AA - Tracy N	icolas	APPLY AD 95-1060A L Mililani, Hav	ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Management Office							YES
APPLY PHONE	: 626-9162			FAX:	626-9163	EMAIL:		locationshawaii.co
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 75	980			420			
Three I								YES
8 units @ 30% AN	NT IS 30% OF INCOME MGI=\$678; 60 units @ 50 its @ 60% AMGI = \$980)%	UTILITIES INC Water, sewer a			ed.	MINIMUM W ESTIMATE MAXIMU	(Months): 6 JM WAIT
AGE CRITERIA: All tenants must b submission.	e 55 at the time of applic	cation	WAITLI	IST FO	R PARKING:		TO REMAIN ON W	(Months): 6
	ply without verifiable resi		\$50 mo. Park once all stalls	ing is li	mited and sisgned,	PET INFO	: F	PETS OK: NO
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		occupancy is who do not ow			GENERAL	. INFO:	
ASSET LIMIT INF	O:		LEASE:			applicants well as re	th completing regula s must keep all cont spond to communic ent in a timely man	act info current, as ation from housing
year., 2 persons - 50% AMI - Maxim year.; 2 person - \$	um income, 1 person - \$ \$30,240 per year. um income, 1 person - \$ 550,400 per year um income 1 person \$5	44,100 per	FURNISHED: Major applicar disposal, vinyl fan, window co	flooring	g, ceiling	manager, locked en	free property. On-si Meeting & multi-pu try doors, common a, community room	rpose room, laundry area,
 1-PERSON MAXIM	IUM MONTHLY INCOME	 ≣:	3675]		

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		Last Compl	ete Update:	2/28/2022				AREA:	Mililani
PROJECT NAME:	MEH	EULA VIS	TA III					PROJECT TYPE:	Elderly
ADDRESS:	95-1060	C Lehiwa Drive	.					PHONE: 626-910	62
CITY:	Mililani		STATE: HI	ZIP:		96789		FAX : 626-910	63
	and Ca	ent Manager - Lo assidy Navares ement Office	uana Holi; Proje	ect AA - Tracy N	icolas	APPLY AD 95-1060A L Mililani, HI	ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Meheu	la Vista I - ATT	N: Resident Ma	nager					
APPLY PHONE	: 626-91	62			FAX:	626-9163	EMAIL:		locationshawaii.co
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	75	980	2x Rent	. 1				
	Bdrm:	75	980	2x Rent] [.] [
Three									
Four	Bdrm:								
RENT INFO: RE 30% AMI Units - \$ 50% AMI Units - \$ 60% AMI Units - \$	678/mon 915/mon	nth - 8 Units oth - 60 Units	NO NO	Water, Sewer,				MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:								TO REMAIN ON W	
Applicants must b submission. Applicants can ap history.		• • •		WAITL PARKING INF \$50/mo. Parki	O:	NO nited and	PET INFO		(Months): 6 PETS OK: NO
	AS	SSET LIMITS:	NONE	once all stalls occupancy is	are ass	signed, ed to those			
AN OWN RESID		PROPERTY:	YES	who do not ov	vn a ver	nicie.	GENERAL		
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 30% AMI - Maxim year., 2 persons - 50% AMI - Maxim year.; 2 person - \$ 60% AMI - Maxim year; 2 person \$60%	um incon \$30,240 um incon \$50,400 p um incon	per year. ne, 1 person - \$ per year ne 1 person \$5	544,100 per	FURNISHED: Major appliand disposal, vinyl fan, window of	l flooring	g, ceiling	manager, entry doo	free property. On-si meeting/multi-purp rs, common laundry nunity room.	ose room, locked
 1-PERSON MAXIN	1UM MOI	NTHLY INCOM	E:	3675]		

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		Last Comp	lete Update:	2/22/2022			AREA	.: Waipahu
PROJECT NAME:	MOK	UOLA VIS	STA				PROJECT TYPE	Family
ADDRESS:	94-333 [Mokuola St.					PHONE: 671-40	075
CITY:	Waipahi	u	STATE: HI	ZIP:	96797		FAX : 671-28	307
MANAGER APPLY TO					P.O. Bo Honolul	ADDRESS: ox 22420 lu, HI 96823 or Mokuola Street, V	Vaipahu	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Proper	ty Managemen	t Division					YES
APPLY PHONE	E: 671-40	75			FAX: 671-280		http://www.locatio ble-rentals.aspx	nsrentals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm:	69	1100	2475.00	641		5	
Three				2470.00	041			YES
Four	buriii.					,	,	155
RENT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES INC	CLUDED:		тот	AL UNITS: 69
4 units @ 30% AM 65 units @ 60% A Section 8 certifica gross income req 600+ credit score	AMGI for S ate holder uirement.	\$1100 s need not me	et the min	Water and sev	wer			VAIT LIST E (Months): 2
Packground choo				Į.			LIST E	STIMATE 3
AGE CRITERIA: Head of househol	d must be	e 18 vears or o	lder				TO REMAIN ON Y	
Trodu or riodocrior	a made b	0 10 90410 01 0	idoi	WAITLI PARKING INF	IST FOR PARKII O: NO	NG: PET INFO	١٠	PETS OK: NO
	AS	SSET LIMITS:	NONE		ee; 105 parking		nimal. Emotional n	- P
AN OWN RESI						GENERAL	L INFO:	
ASSET LIMIT INF	O:			LEASE:		Playgroui A/C, stac	nd, picnic area. Ea	ich unit will have
							ap units available o	n site
						Funding:		ar one
INCOME CRITER	IA:							AST COMPLETED
30% of AMI: 1 Pe 60% of AMI: 1 Pe				FURNISHED:			OCCURRED ON (
1-PERSON MAXIN	MUM MON	NTHLY INCOM	E:	4085				
2-PERSONS MAX	IMUM MC	ONTHLY INCO	ME:	4665				

		Last Compl	ete Update:	2/22/2022			AREA	Moiliili
PROJECT NAME:	NA P	OLEA					PROJECT TYPE	Transitional
ADDRESS:	1020 Is	enberg St.					PHONE: 946-80	63
CITY			CTATE:	710.	2222		FAX: 955-53	04
CITY:	Honolu	lu	STATE: HI	ZIP:	96826		-	
	Seren	Souza, Director a Kyi-Yim, Case	es Manager			DRESS: se manager/ -ro -No walk-ins	eferring	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		SING SOLUTION manager or refe						NO
APPLY PHONE	packe	t only for client	0 0 7	ı	es.net			
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	64			120	1	1	NO
One I	Bdrm:							
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE Must be homeless service plan. Sing male and female t	s willing gle occu	to follow an indiv pancy; shared b	/idualized	UTILITIES INCL Electricity and w			MINIMUM W ESTIMATE MAXIM	
AGE CRITERIA:						٦	TO REMAIN ON V	
one person per un	nit, must	be 18+		WAITLIS PARKING INFO	T FOR PARKING:	PET INFO:	CALL EVERY	(Months): 1 PETS OK: NO
AN OWN RESID	DENTIA	SSET LIMITS: L PROPERTY:		Q 40/monum		GENERAL I		
ASSET LIMIT INF	O:			LEASE:		Coordinate	d Entry System (0	CES) Referral Only
				120 days			ONSE IN 2021. LA OCCURRED ON 0	AST COMPLETED 5/14/2020.
INCOME CRITER	IA:							
				FURNISHED: No furniture. Bucloset space.	uilt-in desk and			

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	1/25/2022			AREA:	Kakaako
PROJECT NAME:	NA LE	EI HULU	KUPUNA				PROJECT TYPE:	Elderly
ADDRESS:	610 Cool	ke St.					PHONE: 593-100	09
CITY:	Honolulu		STATE: HI	ZIP:	96813		FAX:	
MANAGER	R: Angela	Hoan, Propert	y manager			DDRESS: e Street #114, F	lonolulu, HI	OUT-OF-STATE
APPLY TO): Na Lei I	Hulu Kupuna			96813	,	,	APPLICATION ACCEPTED:
APPLY ATTN	l :							YES
APPLY PHONE	: 593-100	09			FAX:	EMAIL:	www.mdihawaii.coi angela@mdihawaii	
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	75	916		350	1	2	YES
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE Mark Developmer 20 Units @ 40% A 53 Units @ 50% A 2 Units @ 60% A	nt is mana AMI - \$733 AMI - \$916	gement comp 3.00/ month 5.00/month		UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 3
*No waitlist undate	ne naadad	l· annlicante o	nly nood to	Į.				STIMATE 12
AGE CRITERIA: Applicants must b	ne 62 vrs o	ld at time of a	pplication				TO REMAIN ON W	
submission. Applicants can ap	•			WAITL PARKING INF	IST FOR PARKING O: NO	B: PET INFO		PETS OK: NO
history, with letter			Sideritial	No parking av	14	Accommo	dation considered f	
	AS	SET LIMITS:	NONE			service ar	nimals	
AN OWN RESI	DENTIAL I	PROPERTY:	YES			GENERAL	. INFO:	
ASSET LIMIT INF	·O:			LEASE:		Transport	ation to Shopping a Charities Hawaiʻi	vailable through
				1 year intial le month after th	ease, then month-to nat	Open in 1 Has socia coordinate	992; has Air Condit Il services on site, p or Katie Hoan p units w/ walk in sl	art-time,
INCOME CRITER						each floor	: LIHTC, RAP	
50% AMI	1 Person \$35,280/y \$44,100/y \$52,920/y	r \$40,320 r \$50,400	/yr /yr	table with cha	dmajor ed, dresser, coffee airs (which can be equested) and A/C.	Accepts S Can decli	Section 8 & Rent Su ne an offer of an ap that, will need to rea	artment 2-3 times
I 1-PERSON MAXIM	MUM MON	THLY INCOM	E:	4410		<u> </u>		
2-PERSONS MAXI	IMUM MO	NTHLY INCO	ME:	5040				

	Last Comp	lete Update:	2/22/2022			AREA:	Nanakuli
PROJECT NAME:	NANA'IKEOLA	SENIOR A	PARTMEN [®]	TS		PROJECT TYPE:	Elderly
ADDRESS:	87-122 Nanaikeola St.					PHONE: 668-470	02
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX:	
MANAGER	R: Mike Klein, Complian	ce Manager		APPLY ADD	DRESS:		OUT-OF-STATE
APPLY TO	D: Call for viewing and a	pplication.					APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE	<u>≡</u> : 668-4702		F	AX:	EMAIL:	halealiigroup@yah	oo.com
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm : 39			500	1	3	
Three	Bdrm:						
Four	Bdrm:						NO
	ENT IS 30% OF INCOME	oot to	\$75 monthly utility	d garbage included y allowance. No A is Subject to Chan	C.	MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
spouse/partner m	ld must be 62 years or o ust be 18 and older; all o	other family	_	FOR PARKING:		CALL EVERY	
members must be	e 62. Caregiver must be ASSET LIMITS:		PARKING INFO: Parking is include available, but is l total)		PET INFO:	e provisions of pet	PETS OK: YES policy.
	DENTIAL PROPERTY:		,		GENERAL	INFO:	
ASSET LIMIT INF	·O:	F	EASE: 1 year; co-signer credit score is lov		Senior Apa EAH Inc. TDD (877) HUD Sect	on 202 program, H	3/09, managed by
	RIA: % of Median (Very Low I 8,350 for 2; \$43,150 for 3	3.	FURNISHED: major applicance coverings	es, window	Associan, Resident r Trash chu 2 units are	ational Community Weinberg Foundat nanager on site. e on each floor. handicapped acce	essible ST COMPLETED
 1-PERSON MAXIN	MUM MONTHLY INCOM		2796]		
2-PERSONS MAX	IMUM MONTHLY INCO	ME:	3196				

	La	ıst Comple	ete Update:	1/24/2022			AREA:	Waianae
PROJECT NAME:	NANAKL	JLI HOI	MES (HPF	IA-lee) - N	NOT ACCE	PTING A	-	
	87-1606 to 87						PHONE: 697-71	<u> </u>
						_	FAX: 697-71	
CITY:	Nanakuli		STATE: HI	ZIP:	9679	2	1750 007 71	
MANAGER	: Mandy Miya	moto			1002	.Y ADDRESS: North School St	t.	OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCE		PLICATIONS			ACCEPTING AI	PPLICATIONS	ACCEPTED:
APPLY ATTN	I: Oahu applica NOT ACCEF		e PLICATIONS					
APPLY PHONE	: 832-5961				FAX : 832-34		AIL: hphaishereforyou.	org
Unit		mber JNITS:	RENT:	Minimum INCOME Required:	SQ FT	MINIM Numb of Peo	per Number of	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:							
Two I	Bdrm:							
Three I	Bdrm:	36	0		1024	3	8	YES
Four I	Bdrm:							
Minimum Rent: \$0) for Federal Lo			Water and all	owance for elec	tricity	MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:							TO REMAIN ON V	P .
Head of household	d must be 18 y	ears or old	ler	WAITL	LIST FOR PARK	(ING:	CALL EVERY	(Months):
				PARKING IN	FO:	PET II		PETS OK: YES
]	ASSET	LIMITS:	NONE	Has carport		the ca	ole animals ok, but only ategories listed below: loa (under 25 lbs) or ca	
AN OWN RESID		PERTY:	NO				ERAL INFO:	
ASSET LIMIT INF	<u>O:</u>			LEASE: 1 year			FERENCES: Domestic Veless in transitional shelt aced.	
INCOME CRITER ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,40	: 80% of AMI Income: 1 persons - 00; 3 persons - 00; 5 persons - 00; 7 persons -	- \$68,500; - \$82,200;	50;	FURNISHED: Partly furnish appliances or		corre manr applic info/h waitlis need	licants must respond to spondence from HPHA, ner. No waitlist updates cants must update any chousehold composition ist status via hpha.myho username/password to ling: Fed Low Inc Pub Heronvictions must be 3 yrs	in a timely needed, however, contact nfo, and check using.com (will do so).
1-PERSON MAXIM	IUM MONTHL	Y INCOME	:	4570				
2-PERSONS MAXI	MUM MONTH	ILY INCOM	E:	5220				

		Last Compl	lete Update:	2/22/2022			AREA:	Kakaako
PROJECT NAME:	NEXT	STEP SI	HELTER				PROJECT TYPE:	Emergency
ADDRESS:	200 Kea	awe Street					PHONE: 585-88	00
CITY:	Honolul	u	STATE: HI	ZIP:	96813		FAX:	
MANAGER APPLY TO	: Intake Admiss	7:00am - 10:00 sions: 1:00pm)pm			Street, Honoludress: P.O. Box		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE				ı	FAX:	EMAIL:		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	135						
One I	Bdrm:							
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE Rent ranges from Single: \$60 or \$90 Couple: \$120	\$60 - \$1		E: N/A	UTILITIES INCL	UDED:		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:							TO REMAIN ON V	
Adults Only 18 an No children under		s old		WAITLIS PARKING INFO Limited Parking		PET INFO	CALL EVERY	(Months): PETS OK: UNKNO
AN OWN RESID		SSET LIMITS: PROPERTY:		Limited Falking		GENERAL	. INFO:	
ASSET LIMIT INF	O:			LEASE:			cy Shelter for single s mailing address -	
				90 Days		Honolulu, Applicatio	96808	
INCOME CRITER	IA:						PONSE IN 2021. LA	
N/A				FURNISHED: Non furnished			OCCURRED ON 0	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	2/1/2022					AREA:	Kakaako
PROJECT NAME:	NOH	ONA HAL	E					PROJECT	TYPE:	Micro Units
ADDRESS:	630 Co	oke Street						PHONE:	(808) 6	50-3931
CITY:	Honolul	lu	STATE: HI	ZIP:		96813		FAX:	(808) 46	65-2217
MANAGER	R: Doren	e Young				APPLY Al	DDRESS: e St., Honolulu,	HI 96813		OUT-OF-STATI
APPLY TO		na Hale Housing					bsite: eahhousi			APPLICATION ACCEPTED:
APPLY ATTN	l: Leasir	ng Office								YES
APPLY PHONE	E: 808-65	50-3931			FAX:	(808) 465-2		Email: NH- Manageme		housing.org
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIN Numb Peop	er of	CAREGIVER Allowed:
s	tudio:	111	999	2x Rent		355	1	2		
One	Bdrm:		0							
Two	Bdrm:		0		I [
Three			0					<u> </u>		
Four	Bdrm:		0		J		J	J		YES
*11 Micro-units (3 AMI - \$556/montl *100 Micro-units (AMI - \$999/month	h * 355 sq. f			Water & Gas				EST	IMATE MAXIMU	AIT LIST (Months): 6
AGE CRITERIA:				įr.				TO REMAI		STIMATE 12
18+				WAITI	IST FO	R PARKING	.	-	-	(Months):
				PARKING INF			PET INFO):	F	PETS OK: NO
				No parking a	/ailable.		No pets a	Illowed.		
AN OWN RESI		SSET LIMITS:	VES				GENERAL	INEO:		
ASSET LIMIT INF	·O:			LEASE: 1-year lease t month-to-mor	for first y	year, then eafter.	**No wait applicants well as re	list updates i	contact mmunic	info updated, as ation from
60% AMI: 1 perso	n/\$26,46 ns/\$34,0	20 Max. 20 Max.		FURNISHED:		ied Sofa.	Bicycle/M Building e Commun Commun Commun Fitness ro Managem	ity Garden ity room kitcl ity room/lour	oard stor hen nge area	
I-PERSON MAXIN	иим мо	NTHLY INCOM	E:	0						
2-PERSONS MAXI	IMUM M	ONTHLY INCO	ME:	0						

	Last C	Complete Update	2/22/2022			AREA:	Nuuanu
PROJECT NAME:	NUUANU Y	MCA - Men	's			PROJECT TYPE:	Emergency/Transi
ADDRESS:	1441 Pali Hwy					PHONE : 536-35	56
CITY:	Honolulu	STATE:	HI ZIP:	96813		FAX : 521-11	81
	: Cheryl Young : Alina Piunno, Mo	embership Coordi	nator	APPLY AD 1441 Pali H Honolulu, H	Hwy.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 536-3556			FAX: N/A	EMAI	L: cyoung@ymcahon apiunno@ymcaho	
Unit	Type: Numbe of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Number of	CAREGIVER Allowed:
S	tudio: 50	45					
One I	Bdrm:				1	1	
Two I	Bdrm:						
Three I	Bdrm:						YES
monthly \$720		red bathroom.	UTILITIES INC			MINIMUM W ESTIMATE MAXIM LIST E	(Months): 0 UM WAIT STIMATE 0
AGE CRITERIA: Must be 18+. SR	<u> </u>					TO REMAIN ON V CALL EVERY	
			PARKING INF	IST FOR PARKING: O:	PET INF	FO:	PETS OK: NO
	ASSET LIM					AL INFO:	
ASSET LIMIT INF			LEASE:		.	rary Residence for sir	ngle men ONLY
			None		Sat 12p	In i 12pm - 8pm om-5pm pm-3pm	
INCOME CRITER	IA:		FURNISHED:		Check-	Out 12pm	
			Twin bed, dres	sser, closet, desk,	Last Up	odate in 2019 - Info fro	om Website
			& lamp.		NO RE	SPONSE IN 2021.	
1					1		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	ete Update:	2/22/2022			AREA:	Waipahu
PROJECT NAME:	OASIS AT WAI	PAHU AP	ARTMENT	S		PROJECT TYPE:	Family
ADDRESS:	94-207 Waipahu St.					PHONE: 671-28	00
CITY:) Waipahu	STATE: HI	ZIP:	96797		FAX : 676-69	45
MANAGER	t: Bethany Combs				Management		OUT-OF-STATE
APPLY TO	D: Site			94-207 Wai Waipahu, H	pahu Street II 96797		APPLICATION ACCEPTED: NO
APPLY ATTN				FAX: 676-6945	EMAIL:	website: oasis-tow	nhomes.com
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm:	1900	2.5xrent	882	1	5	
Three I	Bdrm:	2200	2.5xrent	998	1	7	YES
324 Units @ Mark 82 Units @ 80% A	AMGI to 60% of the total availa		None	CLUDED:		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:	18 yrs old at time of ap	plication				TO REMAIN ON V	VAITLIST
submission.	ply without verifiable res		PARKING INF	IST FOR PARKING: O: uded. \$100/month	PET INFO	2 pets allowed. \$50	PETS OK: YES
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:		for extra stall	acca. \$100/monut	month.		o pot rent per
ASSET LIMIT INF	O:		LEASE: 6 - 12 month l	ease agreements	*24 hr Fit internet a	nes - Waipahu St. & ness room, busines ccess, pool (8ft), was mmunity w/ courtes undry	s room w/ free ading pool (2ft)
INCOME CRITER 2.5 x rent	IA:		FURNISHED:			anagement lyments	
			Full range, ref ceiling fans, a disposal	rigerator, blinds, /c, garbage		PONSE IN 2021. LA OCCURRED ON 5	
1-PERSON MAXIM	IUM MONTHLY INCOM	E:					

	Last Com	plete Update:	2/22/2022			AREA:	Punaluu
PROJECT NAME:	OCEANSIDE I	HAWAII AS	SISTED LI	VING & MEM	ORY	PROJECT TYPE:	Retirement
ADDRESS:	53-594 Kamehameha	Hwy.				PHONE: 293-110	00
CITY:	Hauula	STATE: HI	ZIP:	96717		FAX : 450-227	76
MANAGER	: Walter Long, Execut	ive Director		APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO	:						APPLICATION ACCEPTED: YES
APPLY ATTN	: Chris Mausolf, Com	munity Relations	Director				123
APPLY PHONE	: 293-1100			FAX: 450-2276	EMAIL:	sales@oceansideh	awaii.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	Bdrm:	3995					
Two E	Bdrm:	5195					
Three E	3drm:						
Four E	Bdrm:						
Also available: Semi Private Apar Private Studio Apa Private Deluxe Apa	NT IS 30% OF INCOM- tment: \$2795/month artment: \$ 3595/month artment: \$ 3895/month oom Apt: \$4595/month	1	UTILITIES INC Electricity and TV and Wi-fi		9	MINIMUM W. ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
55+			WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
			PARKING INFO	O: NO	PET INFO		PETS OK: YES
	ASSET LIMITS:	NONE				time fee; must be u tions, flea tx, need a	
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO	O:		LEASE:	th	26 bed Al	ch facility, Assisted zheimers & dementi y be used extended	a unit, five of
					3 meals, o	once weekly housec	leaning and linen
INCOME CRITERI	IA:		FURNISHED: Kitchenette wit	th microwave and	system, tr managem	4hr care w/emergen ransportation, medic nent, movie theater n site hair salon, ser respite	ation with 73 inch
						oceansidehawaii.co	
						PONSE IN 2021. LA OCCURRED ON 11	

2-PERSONS MAXIMUM MONTHLY INCOME:

DJECT NAME: <mark>OHANA OLA O KAHUN</mark>	MANA			PROJECT TYPE:	Transitional
ADDRESS: 86-704 Lualualei Homestead Rd.				PHONE: 696-40	95
CITY: Waianae STATE:	II ZIP:	96792		FAX : 696-71	44
MANAGER: Summer Pakele, Manager		APPLY AI	DDRESS:		OUT-OF-ST
APPLY TO: Alternative Structures International					APPLICAT ACCEPTI
APPLY ATTN:					
APPLY PHONE: 696-4095	F	AX:	EMAIL: V	Vebsite: www.kah	umana.org
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: One Bdrm:				4	
Two Bdrm:				8	
Three Bdrm:				10	
Four Bdrm:]		
NT INFO: RENT IS 30% OF INCOME: YES	UTILITIES INCLU			ТОТА	AL UNITS: 48
	Electric and wate	er		MINIMUM W ESTIMATE	
					UM WAIT STIMATE
E CRITERIA:			Т	O REMAIN ON V CALL EVERY	
families with minor children; program requires erral from social service agency before family can up application.	WAITLIST PARKING INFO:	FOR PARKING	: PET INFO:		PETS OK:
	included, one sta				r
ASSET LIMITS: N OWN RESIDENTIAL PROPERTY:			GENERAL I	NFO:	
SET LIMIT INFO:	LEASE:		Referral to Coordinated	Ohana Ola is thro	ugh the CES)
			CURRENT	LY NO WAITLIS	Τ
OME CRITERIA:			need to upo	updates needed; late contact info,	
	FURNISHED:		manageme	respond to commont, in a timely manapplication.*	

		Last Comp	olete Update:	2/2	8/2022			ADEA.	Kakaako
PROJECT NAME:		KA'II IMA	ADTCDA	CE L	OFTS			AREA: PROJECT TYPE:	
		aimanu Street		OL L	OFIS],
ADDICESS.	1025 W	aimanu Sheet						PHONE: (808) 43	
CITY:	Honolul	u	STATE: H		ZIP:	96814		FAX : (808) 43	39-6402
1	Office Honoli EAH H	Address: 1025 ilii HI 96814 lousing-OLA K	5 Waimanu Stre	PACE LO	OFTS	and submit https://www s/artspace-	lications can be ted at: v.eahhousing.o	·	OUT-OF-STATE APPLICATION ACCEPTED: YES
		accepted.	271 1				EMAIL:	AI -	
APPLY PHONE	: (808) 4	139-6402				FAX: N/A		· ·=	AHHOUSING.ORG
Unit	Type:	Number of UNITS:	RENT:	IN.	inimum ICOME equired:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:		0						
One E	3drm:		615	2	.5x rent	680-721		3	
Two E	Bdrm:		1268	2	2.5x rent	851-1016		5	
Three E	3drm:		1452	2	2.5x rent	1265-1279		7	
Four E	Bdrm:		0						YES
RENT INFO: RE One Bedroom 30' AMI - 34 Units - \$ \$1293/mo Two Bedrooms 50' 60% AMI - 6 Units Three Bedrooms 6 AGE CRITERIA:	%AMI - 9 1067/mc 0% AMI - 5 - \$1539	9 Units - \$615/ p; 60% AMI - 7 - 23 Units - \$1 /mo	mo; 50% 'Units - 268/mo;	Wate	TIES INC r, Sewer, WAITLI	Trash ST FOR PARKING:	PET INFO	MINIMUM W. ESTIMATE MAXIMU LIST ES TO REMAIN ON W CALL EVERY	(Months): 24 JM WAIT STIMATE 60 VAITLIST
						ng garage.	Includes a	\$250 Pet Deposit.	,,,,,,
AN OWN RESID		SSET LIMITS:			•		GENERAL	·	
ASSET LIMIT INFO				, LEAS	SE:		*Along wit	h completing regula	r waitlist updates,
				1 Yea			well as res	must keep all conta spond to communica ent in a timely man	ation from housing
INCOME CRITERI 1 30%AMI \$25,400 50% AMI \$42,300	2) \$29,0) \$48,3	\$32,650 \$50 \$54,400	4 \$36,250 \$60,400	Majo	NISHED: r appliand erator).	ees only (stove and	e-lofts/		
60%AMI \$50,760	,	JZU \$65,280	\$72,480		,		*Commun *Courtyard gardens		
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	ΛE:	0					

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0

		<u> </u>	ete Update:	2/1/2022			AREA:	Mililani
PROJE	CT NAME: OLA	LOA RETII	REMENT (COMMUNIT	Υ	F	PROJECT TYPE:	Retirement
Α	ADDRESS: 95-105	0 Makaikai St.				F	PHONE: 626-232	3
	CITY: Mililani		STATE: HI	ZIP:	96789		FAX: 626-280	0
	MANAGER: Corne	lius Dobber			APPLY ADI Look in Sun realtor	DRESS: day paper or co	ntact a	OUT-OF-STATI APPLICATION ACCEPTED:
	PPLY ATTN:				FAX: 626-2800		aloa.info@hawaii. ww.olaloaretireme	
	Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:	45	900		380	1	2	YES
	One Bdrm:	103	1100		529	1	2	YES
	Two Bdrm:	212	1450		748	1	2	YES
	Three Bdrm:							
	Four Bdrm:							NO
Additio on size Landlo be purd	INFO: RENT IS 30 and maintenance fee of unit Rental price of to determine action chased or rented by a RITERIA:	e \$242 - \$527, c es based on ma ual rental price. owner.	depending irket value.	Water WAITLIS PARKING INFO	T FOR PARKING:	TO PET INFO:	MINIMUM WA ESTIMATE (MAXIMU LIST ES O REMAIN ON W CALL EVERY ((Months): IM WAIT TIMATE AITLIST
				Parking include			inches in height)	2.0 0.0 [1720
AN C	A DWN RESIDENTIAI	SSET LIMITS:					lp to landlord if all	owed.
	LIMIT INFO:			LEASE:		1) Units are Call a realto 2) Olaloa Do privately ow 3)There are	for sale/rent by in r or watch for ad. DES NOT handle	the rental of their services.
INCOM	IE CRITERIA:			•		emergency	push button transi	mitters staffed 24
Max in	come - NONE			FURNISHED: Partly furnished appliances only		4) Each unit	pond (no doctors has lanai (not inc ty does not keep ates necessary*	or nurses) Iluded in sq. ft.) a waitlist, thus, no

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	7/16/2020			AREA:	Downtown
PROJECT NAME:	OLD VINEYARI	D				PROJECT TYPE:	Family
	265 South Vineyard St.	STATE: HI	ZIP:	96813		PHONE: 524-273 FAX: 545-521	
	R: Myrna Chun, Resident D: Urban Real Estate Co.		e, COS 524-2731		tania St. C101		OUT-OF-STATE APPLICATION ACCEPTED: YES
	I: Housing Management E: 524-2731 x 3609	Department	F/	AX: 545-5214	EMAIL:	None	.25
S One I	Number of UNITS: Bdrm: 14 Bdrm: 13 Bdrm: 5	0 0 0	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed: YES YES YES
AGE CRITERIA:	ENT IS 30% OF INCOME		UTILITIES INCLU Water	DED:		MINIMUM WARE MAXIMU	(Months): 60 JM WAIT STIMATE 84 VAITLIST
	ASSET LIMITS:		WAITLIST PARKING INFO: Parking included	FOR PARKING:	PET INFO	: P	PETS OK: NO
AN OWN RESIDE	DENTIAL PROPERTY:	YES	LEASE: 1 year		Applicatio	Section 8 100%	sed stamped
INCOME CRITER	IA:		FURNISHED: Partly furnished appliances only. I			PONSE IN 2020. LA: 03/19/2019	ST COMPLETED
	MUM MONTHLY INCOME		2042		1		

RO IECT NAME:						AREA	: Honolulu
ROOLOT HAME.	One Kalakaua					PROJECT TYPE	
ADDRESS:	(information pending)					PHONE:	r
CITY:		STATE:	ZIP:	0		FAX:	
MANAGER	t:			APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO) :						APPLICATION ACCEPTED
APPLY ATTN	l:						
APPLY PHONE	<u>:</u>			FAX:	EMAIL:		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	0	<u> </u>				
	Bdrm:	0					
Three I	Bdrm:	0					
Four I	Bdrm:	0					
RENT INFO: RE	NT IS 30% OF INCOME:	U	TILITIES INC	LUDED:		ТОТ	AL UNITS:
						MINIMUM V	VAIT LIST
							UM WAIT
AGE CRITERIA:		Į.				LIST E	STIMATE (
AGE CITTERIA.			WAITI IS	ST FOR PARKING:		CALL EVERY	
		P	ARKING INFO		PET INFO	:	PETS OK:
	_						
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF		LE	EASE:			0.	
		Г					
NCOME CRITER	IA:		IDNIICHED.				
			JRNISHED:				
-PERSON MAXIM	IUM MONTHLY INCOME:		0		J		
	IMUM MONTHLY INCOME		0				

NELAU'ENA - Belleau Woods St.	Hope for a	New Be	ginning		PROJECT TYPE:	Emergency/Transi
Belleau Woods St.	<u> </u>		0			Line gency/ mansi
apolei					PHONE: 782-434	12
apolei					FAX: 682-542	
	STATE: HI	ZIP:	96707		,	
anya Tehotu, Executi	ve Director		APPLY AD	DRESS:		
,						OUT-OF-STATE
(ealahou West Oʻahu			Waianae, F	11 96792		APPLICATION ACCEPTED:
lo action required unle	ess updating con	act info				
82-4342			FAX : 682-5428	EMAIL:	t.tehotu@kwohawa	ii.org
pe: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
lio:						
m:						
m:						
m:						
·m:						NO
t) dorm; Female (sing dio (1-3 ppl); ADA stud 1-3ppl); Family unit (1 ppl)	lle dio (1- -4ppl)		CLUDED:		MINIMUM W ESTIMATE MAXIMU	(Months):
	Į.					
nust be 18 at time of a	pplication				-	
ted upon eligibility of	placement.			PET INFO:	F	PETS OK: UNKNO
2ppl) \$150/mo						i oranic
ASSET LIMITS:						
NTIAL PROPERTY:				GENERAL	INFO:	
		.EASE:		Need to g	o through Kealahou	West Oʻahu
		URNISHED:		adult child and single Application Pick up fro	ren (18+), couples v s n: om Kealahou West	with no children,
	lealahou West Oʻahu lo action required unle 82-4342 Pe: Number of UNITS: io: IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	dealahou West Oʻahu lo action required unless updating cont 82-4342 Pe: Number of UNITS: RENT: io: IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	dealahou West O'ahu lo action required unless updating contact info 82-4342 Pe: Number of UNITS: RENT: Minimum INCOME Required: io: UTILITIES INCOME: NO	Realahou West O'ahu So action required unless updating contact info Realahou West O'ahu FAX: 682-5428 FAX: 682-5428 RENT: RENT: RENT: Required: SQ FT: Req	tealahou West O'ahu 87-132 Farrington Hwy Waianae, HI 96792 82-4342 FAX: 682-5428 EMAIL: FAX: 682-5428 SQ FT: Minimum INCOME Required: SQ FT: of People of UNITS: of People of UNITS: of People of People of UNITS: of People of UNITS: of People of People of People of UNITS: of People of People of People of People of UNITS: of People of Peopl	ealahou West O'ahu 87-132 Farrington Hwy Walanae, HI 96792 EMAIL: t.tehotu@kwohawa 82-4342 FAX: 682-5428 EMAIL: t.tehotu@kwohawa FAX: 682-5428 EMAIL: t.tehotu@kwohawa FAX: 682-5428 FAX: 682-5428 EMAIL: t.tehotu@kwohawa FAX: 682-5428 F

1-PERSON MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	12/14/2021			AREA:	Kalaeloa
PROJECT NAME:	ONEMA	ALU - Tr	ansitiona	l shelter			PROJECT TYPE:	Transitional
ADDRESS:	48 Belleau	Woods St.					PHONE: 682-586	88
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX : 682-542	28
			1					
MANAGER	: Tanya Tel	notu			APPLY ADD	RESS:		
APPLY TO):				P.O. Box 75 Kapolei, HI			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							NO
APPLY PHONE	: 682-5868				FAX: 682-5428	EMAIL:	:	
Unit		lumber UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	11			267	2	4	
One I	Bdrm:	5			329	3	5	
Two I	Bdrm:	26			535	4	8	
Three I	Bdrm:							
Four I	Bdrm:							
RENT INFO: RE Unit size determin Must be family wit age. *All units rent base Market rate: \$750 ALL DECERDATE	ed by family th at least or ed on 30% o month	v size. No Sine child 0 to	ingles. 17 years of	UTILITIES INC Water and elec			MINIMUM WARE MAXIMU	(Months):
AGE CRITERIA:							TO REMAIN ON W	
Head of household of application sub		8 years or ol	der at time	WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
Application is prov		d of househo	old upon	PARKING INFO		PET INFO): P	PETS OK: NO
<u></u>		ET LIMITS:	NONE		urrent reg, safety ce, and driver's			
AN OWN RESIDE		ROPERTY:				GENERAL		e 1 e 1 e
None	<u> </u>			LEASE:		verified	B clearance, inc veri	
				4-month progra may be renewe		Commun unit. Exp	s must participate in al kitchen, but micro bress bus from Kapol takes app. 30 min F	+ minifridge in ei transit center to
INCOME CRITER Must provide verif		onthly incom	e that	FURNISHED:		1 '		O bedues = (4)
confirms the appli program fee while family. No max in	cant's ability meeting ba	to afford the sic needs of	e monthly	Yes. Beds allo inspection. No furniture.		A homele	o Units - studio (1) + 3 ess verification letter if referral accepts pla	needs to be
						ľ	PONSE IN 2022	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	11/24/2021			AREA:	Waianae
PROJECT NAME:	PAI'OLU KAIA	ULU (Waiar	nae Civic	Center)		PROJECT TYPE:	Emergency/Trans
ADDRESS:	85-638 Farrington Hwy	/.				PHONE: 664-140	00 696-6775
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 696-671	1
MANAGEF	R: Operations Manager: Program Director: Ta			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO	O: Need to be assessed Info below) if homele		ers (see Gener	al			APPLICATION ACCEPTED:
APPLY ATTN	N:						NO
APPLY PHONE	E: 664-1400			FAX : 696-6711	EMAIL:		
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
8	Studio:						
One	Bdrm:						
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						
Small (45) - 8 ftx1 Medium (20) - 10i Large (32) - 12ftx	ENT IS 30% OF INCOM 10 ft (80 sq ft) \$120 - 1 p ftx12ft (120 sq ft) \$150 12ft (144 sq ft) \$150 - 3 Inits. Emergency Shelte	person I - 2 persons persons	JTILITIES INCI Electricity, wate Public telephon	er, and sewer.		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	Į.
	e accompanied by legal	guardians	۱۸/۵۱۲۱۱۹	ST FOR PARKING:		CALL EVERY	
		F	PARKING INFO		PET INFO	: F	PETS OK: NO
]	ASSET LIMITS:		Parking for veh safety check, re insurance.				
	DENTIAL PROPERTY:				GENERAL		
None	-0:		LEASE: None		(p) 696-15	roviders: Coast Comprehensi 559; 696-1586 Community Outread	
INCOME CRITER	SIA.				Waikiki H	ealth Center - Care-	A-Van
None			FURNISHED: 1 bed, addition Shelving/drawe provided. No po operated W/D of	er may be ower outlets. Coin		ered by US Veterans ke units. Communit ty Meals	

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	7/16/2020			AREA:	Kapolei
ROJECT NAME: PAL	EHUA TER	RACE PH	. 1		P	ROJECT TYPE:	Family
ADDRESS: 92-10	74 Palahia St.				F	PHONE: 672-560	02
CITY: Kapole	ei	STATE: HI	ZIP:	96707		FAX : 672-5646	
MANAGER: Ann	Suan			APPLY AD 1330 S. Be	DDRESS: eretania St. #200 l	Hon. HI	OUT-OF-STATE
APPLY TO: Mana	agement Specialis	sts Co.		96814			APPLICATION ACCEPTED:
APPLY ATTN: Affor	dable Housing De	ept.					YES
APPLY PHONE: 949-7	7611 x131		FA	X : 946-0572	EMAIL: m	schousing@hawa	aii.rr.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:							
Two Bdrm:	76	1050	2363	819			YES
Three Bdrm:	7	1200	2700	1037			YES
Four Bdrm:							
AGE CRITERIA: Head of household must	he 18 years or old	dor	Water		т		(Months): 12 JM WAIT STIMATE 12 VAITLIST
riead of flousefloid filust	be to years of on	uei	WAITLIST PARKING INFO:	FOR PARKING	: PET INFO:		PETS OK: NO
			Parking included		TET INTO:	<u>'</u>	LTO OIL INO
,	ASSET LIMITS:	NONE					
AN OWN RESIDENTIA					GENERAL IN	NFO:	
ASSET LIMIT INFO:			LEASE:		Funding: RI Accepts Sec	HTF	
			1 year			s through Equifa	x
						NSE IN 2021	
INCOME CRITERIA:					THE RESIDENCE	1102 111 2021	
60% of AMI: 1 person \$4	0,260; 2 persons	\$46,020	FURNISHED: Partly furnishedrappliances only	major			
-PERSON MAXIMUM MO	ONTHLY INCOME	≣:	3355]		
2-PERSONS MAXIMUM N	MONTHLY INCOM	ΛE:	3835				

	Last Compl	ete Update:	7/16/2020			AREA	: Kapolei	
PROJECT NAME: PAL	EHUA TER	RACE PH.	2			PROJECT TYPE	Family	
ADDRESS: 92-107	74 Palahia St.					PHONE: 672-56	602	
CITY: Kapole	ei	STATE: HI	ZIP:	96707		FAX : 672-5602		
MANAGER: Ann S	Suan				ADDRESS: Beretania St. #2	200 Hon. HI	OUT-OF-STATE	
APPLY TO: Mana	gement Specialis	sts Co.		96814			APPLICATION ACCEPTED:	
APPLY ATTN: Afford	dable Housing De	ept.					YES	
APPLY PHONE: 949-7	'611 x131			FAX : 946-0572		_: mschousing@haw	/aii.rr.com	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:	
One Bdrm:								
Two Bdrm:	57	1030	2.25xRent	778				
Three Bdrm:	7	1150	2.25xRent	948				
Four Bdrm:				J				
RENT INFO: RENT IS 3 7 units at 30% AMI; 57 ur			UTILITIES INC Water			MINIMUM W ESTIMATE MAXIM		
AGE CRITERIA: Head of household must	he 18 vears or ol	der				TO REMAIN ON V		
Trodu of modocriola mast	de la yeura or or		WAITLIS PARKING INFO	ST FOR PARKIN	NG: PET INF		PETS OK: NO	
			Parking include			<u> </u>	i i i	
A	ASSET LIMITS:	NONE						
AN OWN RESIDENTIA	L PROPERTY:	NO				AL INFO:		
ASSET LIMIT INFO:			LEASE:		_	nity Room, Picnic Ar	rea	
			1 year		Credit c	have 2 bathrooms heck through Equifax Section 8	«	
INCOME CRITERIA:					Funding	: RHTF		
60% of AMI: 1 person \$40	0,260; 2 persons	\$46,020	FURNISHED: Partly furnishe appliances only		NO RES	SPONSE IN 2021		
I-PERSON MAXIMUM MO	ONTHLY INCOMI	E:	3355					
2-PERSONS MAXIMUM M	MONTHLY INCOM	ΛE:	3835					

	Last Comp	lete Update:	11/24/2021			AREA:	Palolo
PROJECT NAME:	PALOLO CHIN	IESE HON	ΛE			PROJECT TYPE:	Retirement
ADDRESS:	2459 10th Ave.					PHONE: 737-255	55
CITY:	Honolulu	STATE: HI	ZIP:	96816		FAX : 748-491	16
)						
	: Darlene Nakayama Hansel Purugganan & Coordinators			APPLY ADI	DRESS:		OUT-OF-STATE APPLICATION
	 Call 748-4911 during for tour of facility. Additional phone lines 	·	·	m)			ACCEPTED:
APPLY PHONE		5. 304-3227, 30		FAX:	EMAIL:	http://palolohome.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	3drm:						
	Bdrm:						
Three I	Bdrm:						NO
Adult Residential of plus Registration Intermediate Care Overnight Respite Adult Day Care: \$: \$412 - \$500/day	8822/month	UTILITIES INCL	UDED:		MINIMUM W. ESTIMATE MAXIMU	_
AGE CRITERIA:	- Tarillana haithan an					TO REMAIN ON W	
minimums or limit	rail edlers, but has no a s. Admission is based and nursing care need nce required.	on	WAITLIS PARKING INFO	T FOR PARKING:	PET INFO		PETS OK: UNKNO
AN OWN RESIDE ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:		LEASE:		Res.	- Intermediate/Skillet residential care hor	
INCOME CRITER	IA:		FURNISHED:				
1-PERSON MAXIM	IUM MONTHLY INCOM	IE:					

		=					
,	Last Comple	ete Update:	12/15/2021			AREA:	Palolo
PROJECT NAME:	PALOLO VALL	EY HOME	S (HPHA-	<mark>hon) - NOT A</mark> (CCE P	ROJECT TYPE:	Family
ADDRESS:	2107 Ahe St.				F	PHONE: 733-911	3
CITY:	Honolulu	STATE: HI	ZIP:	96816		FAX:	
	Tionolaid	1		00010			
MANAGER APPLY TO	: Kelsie Tilton			APPLY ADD 1002 North S Honolulu, HI	School St. 96817		OUT-OF-STATE APPLICATION
	NOT ACCEPTING AP			NOT ACCE	PTING APPLICA	ATIONS	ACCEPTED: NO
AFFEI AITN	NOT ACCEPTING AP				EMAII : br	haishereforyou.or	a
APPLY PHONE	: 832-5961			FAX: 832-3461	LINIAL. 11p	maishereroryou.or	9
Unit	Type: Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
Si	tudio:						
One E	Bdrm: 8	0		513	1	4	YES
Two E	Bdrm: 34	0		676	2	6	YES
Three E	3drm: 40	0		1045	3	8	YES
Four E	Bdrm: 32	0		1147	4	10	YES
5 Bedroom Units a) for Federal Low Income		Water and alloand gas	CLUDED: owance for electricity		MINIMUM WA ESTIMATE (MAXIMU	Months): 36
AGE CRITERIA:			ļ.		т.	LIST ES O REMAIN ON W	
-	d must be 18 years or old	der	\\/ \ I.T.	IST FOR PARKING:	I	CALL EVERY (
			PARKING INF		PET INFO:	Р	ETS OK: YES
]			Included		With Permit		
	ASSET LIMITS:	NONE					
	DENTIAL PROPERTY:	NO			GENERAL IN		
Cannot own a hou			LEASE:		homeless in	CES: Domestic Vi transitional shelte	
			1 year		displaced.		
					Funding: Fe	d Low Inc Pub Hsi	ng 100%
INCOME CRITERI						ns must be 3 yrs a amphetamine or s	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250;	FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛΕ:	5220				

		Last Comp	lete Update:	11/24/2021			AREA	Palolo
PROJECT NAME:	PALC	DLO VALL	EY HOME	S I			PROJECT TYPE	Family
ADDRESS:	2170 Al	ne St.					PHONE: 733-86	650
CITY:	Honolul	u	STATE: HI	ZIP:	96816		FAX: 735-52	211
				i dba Palolo Valley	APPLY AD 2170 Ahe S Honolulu, F	St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	: 733-86	550		F	AX: 735-5211	EMAIL:		
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:		500		405			YES
	Bdrm:	9	721		604	2	6	YES
Three		9	907		860	3	8	YES
	Bdrm:		907					NO
Palolo Homes doe renters names are AGE CRITERIA: Head of househol applying.	e taken fr	om Section 8 w	vaitlist	WAITLIST	FOR PARKING:		MAXIM	(Months): 36 IUM WAIT STIMATE 72 WAITLIST
Applicants must h	ave verif	iable residentia	l history.	PARKING INFO:		PET INFO		PETS OK: NO
AN OWN RESIDE ASSET LIMIT INF	DENTIAL O:		NO	Every unit given	Í	GENERAI Funding: Funding:	LIHTC	Note Required
applicable income limit for continued	for adm occupar	ission or three t acy.	times that	1 year; then mon	th-to-month	Application Available	ons: through Section 8	office
INCOME CRITER Maximum Annual		1 nerson - \$25	380.	FURNISHED:				
2 persons - \$29,0 4 persons - \$36,2 6 persons - \$42,0 8 persons - \$47,8	10; 3 per 40; 5 per 60; 7 per	sons - \$32,640 sons - \$39,150 sons - \$44,940		Partly furnished- appliances only	major			
I 1-PERSON MAXIN	IUM MOI	NTHLY INCOM	E:	2115		J		

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		Last Compl	ete Update:	11/24/2021			AREA:	Palolo
PROJECT NAME:	PAL	OLO VALL	EY HOME	ES II			PROJECT TYPE:	Family
ADDRESS:	2170 A	he St.					PHONE: 733-865	
CITY:	Honolul	u	STATE: HI	ZIP:	96816		FAX : 735-52	11
MANAGER		a Samson, Prop	perty Mgr.		APPLY AD 2170 Ahe S			OUT-OF-STATE
APPLY TO	: Mutua Home		ciation of Hawa	ii dba Palolo Valley	Honolulu, F	II 96816		APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	: 733-86	650		F	AX: 735-5211	EMAIL:		
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	5Bdrm 8	1284		1345	5	12	
One I	Bdrm:	16	568		478	1	4	YES
Two I	Bdrm:	64	721		647	2	6	YES
Three I	Bdrm:	76	907		880	3	8	YES
Four I	Bdrm:	60	1093		1100	4	10	NO
RENT INFO: RE Palolo Homes doe pulled from Sectio 16 full handicappe available	es not ha	ve a waitlist; na	mes are	Water	DED.		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	
Head of household applying. Applicants must h		•		WAITLIST FOR PARKING: PARKING INFO: Every unit given only 1 stall Service			CALL EVERY : F nimal ONLY - MD n	PETS OK: NO
•	А	SSET LIMITS:	YES		,			'
AN OWN RESID						GENERAI	_ INFO:	
ASSET LIMIT INF Cannot own a hou applicable income limit for continued	se. Asse	ission or three ti		LEASE: 1 year; then mont	th-to-month	Funding: Funding: Application		n Section 8
INCOME CRITER Maximum Annual 2 persons - \$29,0' 4 persons - \$36,2' 6 persons - \$42,0' 8 persons - \$47,8'	Income: 10; 3 per 40; 5 per 60; 7 per	rsons - \$32,640; rsons - \$39,150; rsons - \$44,940;		FURNISHED: Partly furnished appliances only	major	NO RESI	PONSE 2021	
 1-PERSON MAXIN	IUM MO	NTHLY INCOME	= :	2115				

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Last Complete Update: 12/15/2021	AREA: McCully
PROJECT NAME: PAOAKALANI (HPHA-hon) - NOT ACCEPTING APPLI	PROJECT TYPE: Elderly
ADDRESS: 1583 Kalakaua Ave.	PHONE: 973-0193
OTATE THE TIPE	FAX: 973-0197
CITY: Honolulu STATE: HI ZIP: 96826	,
MANAGER: Ioane Ah Sam APPLY ADDRESS: 1002 North School St.	OUT-OF-STATE
Honolulu, HI 96817	APPLICATION
NOT ACCEPTING APPLICATIONS NOT ACCEPTING APPLICATIONS	PLICATIONS ACCEPTED:
APPLY ATTN: Oahu applications office NOT ACCCEPTING APPLICATIONS	NO
	: hphaishereforyou.org
AFFEI PHONE, 002 0001	
Unit Type: Number Salar Minimum INCOME Number	Number of CAREGIVER
of UNITS: RENT: Required: SQ FT: of People	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Studio: 90 0 315 1	2 YES
One Bdrm: 60 0 465 1	4 YES
Two Bdrm:	
Three Bdrm: 1	
Four Bdrm:	
RENT INFO: RENT IS 30% OF INCOME: YES Minimum Rent: \$0 for Federal Low Income projects ***********************************	TOTAL UNITS: 151 MINIMUM WAIT LIST ESTIMATE (Months): 24 MAXIMUM WAIT LIST ESTIMATE 60
AGE CRITERIA:	TO REMAIN ON WAITLIST
Head of household or spouse must be 62 years or WAITLIST FOR PARKING:	CALL EVERY (Months): 12
older, or disabled PARKING INFO: NO PET INF	,
Included Small po	ets under 25 lbs. only
ASSET LIMITS: NONE	
	AL INFO: RENCES: Domestic Violence victims;
	ss in transitional shelters; involuntary
	dies, under age 62 spouse may rent
	nding: Fed Low Inc Pub Hsing 100%
	ictions must be 3 yrs ago, unless it's
Maximum Annual Income: 1 person - \$53,250; Partly furnishedmajor	nethamphetamine or sex offender
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	

Last Complete Update:	7/16/2020	PPO	AREA: JECT TYPE:	
OJECT NAME: PAUAHI HALE				Family
ADDRESS: 126 North Pauahi St.			NE: 524-723	33
CITY: Honolulu STATE: H	ZIP : 96	317	- X.	
MANAGER: Bill Hanrahan, Manager		PLY ADDRESS: 1 Kapiolani Blvd., Suite 345		OUT-OF-STA
APPLY TO: Mental Health Kokua	122	T Napiolani Biva., Suite 343		APPLICATIO ACCEPTEI
APPLY ATTN: Melby Albano				
APPLY PHONE : 737-2523	FAX:	EMAIL: malba	no@mhkhaw	aii.org
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	Number	MAXIMUM lumber of People:	CAREGIVER Allowed:
Studio: 38 760	12	1	1	YES
One Bdrm:				
Three Bdrm:				
Four Bdrm:				
ENT INFO: RENT IS 30% OF INCOME: YES dinimum rent \$300. Maximum rent \$760 founits 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		MINIMUM W. ESTIMATE MAXIMU	
GE CRITERIA: INGLE ROOM OCCUPANCY (SRO)			EMAIN ON W ALL EVERY	
ust be over the age of 18	WAITLIST FOR PA PARKING INFO: Not included. Available ne	RKING: PET INFO:		PETS OK: NO
ASSET LIMITS: NONE	door for \$40/month.	XI		
AN OWN RESIDENTIAL PROPERTY: YES		GENERAL INFO:		
SSET LIMIT INFO:	LEASE:	4 story walk-up. Shared men's an kitchen on each	nd women's b	occupancy. eathrooms and
		Funding: Unknow	wn	
COME CRITERIA:		Application: Pick up from Mai	nager's Office	2
aximum Annual Income: 1 person - \$40,260 (below 9% area AMI)	FURNISHED: Unfurnished.	NO RESPONSE	_	.
PERSON MAXIMUM MONTHLY INCOME:	3355			

	Las	t Complete	Update:	11/24/2021				AREA:	Makiki
PROJECT NAME:	PIIKOI VI	STA						PROJECT TYPE:	
	1326 Piikoi St.							PHONE: 521-71	11
CITY:	Honolulu	s	TATE: HI	ZIP:		96814		FAX : 521-68	97
	R: Peggy Zayası D: Locations	u, Resident M	Manager			APPLY AD P.O. Box 22 Honolulu, H	2420		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Property Man	agement Div	rision						YES
APPLY PHONE	E: 738-3100				FAX:	735-1978		http://www.location ble-rentals.aspx	srentals.com/afforda
	Type: Num of UN		RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 4	7	1058	2xrent		420			
Two	Bdrm:								
Four	Bdrm:								YES
RENT INFO: RE Food stamps can Section 8 certifica gross income requ	be used to mee ate holders need	t min. incom	e.	UTILITIES INC				MINIMUM W ESTIMATE MAXIMI	(Months): 3
AGE CRITERIA:				Į.				LIST ES	STIMATE 36 VAITLIST
All residents must Does not require		ntial history		PARKING INF	O:	R PARKING:	PET INFO	CALL EVERY	(Months): PETS OK: NO
]	ASSET L	IMITS: NO	NE	\$40 fee for par	rking				
AN OWN RESII ASSET LIMIT INF	DENTIAL PROP O:	PERTY: YE	S	LEASE:			GENERAL Opened 2		
eligibility.							Communi	LIHTC ry garden, Locked e ty room for activities undry room on 8th t	s, Social Worker
INCOME CRITER 50% AMI: 1 perso		rsons \$48,3	50	FURNISHED: Partly furnishe appliances onl		or	Applicatio Download Ask mana Send requences	•	ssed stamped
1-PERSON MAXIN	IUM MONTHLY	INCOME:		3525			P		
2-PERSONS MAX	IMUM MONTHL	Y INCOME:		4029					

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	11/24/2021			AREA:	Makiki
PROJECT NAME:	PLAZ	ZA AT PUI	NCHBOWL	-Ret./Ass	isted Living		PROJECT TYPE:	Retirement
ADDRESS:	918 Lur	alilo St.					PHONE: 792-880	00
CITY:	Honolul	U	STATE: HI	ZIP:	96822		FAX : 538-961	6
MANAGER		Andrade: Adm			APPLY ADD	DRESS:		
			siness Office Ma	anager				OUT-OF-STATE APPLICATION
APPLY TO	: www.p	lazaassistedlivi	ing.com					ACCEPTED:
APPLY ATTN	l: Linda l	Barnoski: Sales	Manager					YES
APPLY PHONE	: 792-88	300			FAX: 538-9616		ashley@plazaassis uilani@plazaassiste	
Unit	Type:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	, i	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:	38	5075		277	1	2	
One I	Bdrm:	27	6400		415	1	2	
Two I	Bdrm:	3	9825		833	1	2	
Three I	Bdrm:							
Four I	Bdrm:							
RENT INFO: RE 68 Independent ur \$5125+. 20 Assis private; \$6975+ pr \$5890+ semi-priva montly rate/30 + 1	nits: STU ted living rivate. 20 ate; \$755	JDIO: \$3990+; g units: \$5250+ D Memory Care 60+ private. Re	1 BD: - semi - units:	UTILITIES INC Water, trash a standard cable	and sewer, electricity,		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	Į.
No minimum age a			Orv	WAITL	IST FOR PARKING:		CALL EVERY	(Months):
Docs not require v	Cillabic	Tesideritiai riist	Oly	PARKING INF	1.74	PET INFO:	F	PETS OK: YES
]				Free parking f	for independent			
AN OWN RESID		SSET LIMITS:	NO			 GENERAL	INICO	
ASSET LIMIT INF		. PROPERIT.	INO	LEASE:		3 meals/da	ay, weekly house cl	
				Month-to-mon	nth rental with		ice, activities. Rout or medical appts, sh	
				written 30 day	termination notice	Nurses are	Flexible assisted live staffed 24hr/day. I	
INCOME CRITER	IA:						rcom system	
None				w/freezer, car	irse call systems,		ct for more details	
J]		

		Last Comp	lete Update:	7/16/2020			AREA:	Kaneohe
PROJECT NAME:	POH	<mark>AI NANI G</mark>	OOD SAN	IARITAN			PROJECT TYPE:	Retirement
ADDRESS:	45-090	Namoku St.					PHONE: 247-621	1 or
CITY:	Kaneol	ne	STATE: HI	ZIP:	96744		FAX : 236-200)1
	,							
MANAGER		a Camero, Exe	cutive Director		APPLY ADI	DRESS:		
		oohainani.org			On-Site			OUT-OF-STATE APPLICATION
APPLY TO	7835 (Gruhler, Sales N direct	/lanager	236	-			ACCEPTED: YES
APPLY ATTN	l:							
APPLY PHONE	: 808-2	36-7835		F	AX : 236-7828	EMAIL:	jgruhler@good-sam	n.com
Unit	Туре:	Number	$\overline{}$	Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:	139	3185		305	1	2	
One I	Bdrm:	35	4463		490	1	2	
Two	Bdrm:	10	6924		866	1	2	
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE Unit size range fro Home - \$7,373 Apartments/Cotta, reservation fee \$2 of \$500; waitlist fe	om 305-8 ges have 2,300 + r	366 sft, 1 or 2 pp e non-refundable efundable secui	ol. Care	UTILITIES INCLU	JDED:		MINIMUM W. ESTIMATE MAXIMU	(Months): 2
AGE CRITERIA:				Įt.				STIMATE 8
All residents must	be 55 o	r older		WALTE ICT	TOD DADKING.		TO REMAIN ON W CALL EVERY	
				PARKING INFO:	FOR PARKING:	PET INFO	: F	PETS OK: YES
				\$25/month		Small dog	allowed in Cottages	s only
	А	SSET LIMITS:	NONE					
AN OWN RESID		PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	O:			LEASE:		programs		
				Month-to-month			ee includes three me ping, weekly linen e	
							PONSE IN 2021	•
INCOME CRITER								
Since private pay income and asset			cient	FURNISHED:				
]				<u> </u>]		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	olete Update:	11/24/2021			AREA	Kakaako
PROJECT NAME:	POHULANI EL	.DERLY				PROJECT TYPE	Elderly
ADDRESS:	626 Coral St.					PHONE: 744-60	63
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 744-65	82
	t: DeAnn Auwae, Mana			APPLY ADI			OUT-OF-STATE
APPLY TO	: Hawaii Affordable Pro	operties Inc.					ACCEPTED: NO
APPLY PHONE				FAX : 744-6582	EMAIL:	http://hawaiiafforda properties/	able.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: 128	1350	2,288	425	1	2	YES
One	Bdrm: 135	1450	2,525	454	1	2	YES
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						YES
Deposit=same as No action required	NT IS 30% OF INCOM rent; accepts section 8 d unless updating conta esponse to inquiry by P	ct	UTILITIES INC			MINIMUM W ESTIMATE MAXIM LIST E	(Months): 0 UM WAIT STIMATE 0
	mbers must be 62 at tin	ne of				TO REMAIN ON V	
	iver allowed over age 1 verifiable residential his		WAITLI PARKING INF	IST FOR PARKING: O: YES	PET INFO):	PETS OK: NO
	ASSET LIMITS: DENTIAL PROPERTY:	NONE	month; parking	n-site parking; \$42 g at Kauhale 50/mo (call District	GENERAL	_ INFO:	·
ASSET LIMIT INF	O:		LEASE:				n studio and1 bdrm
	jority interest in residen asehold, usuitable for a ne county.		1 year		Emerg. C elevators Services:	etter; cannot work of call system; Studio I meal site cation to Shopping a	nas lanai; 3
INCOME CRITER					Catholic (Charities Hawaii State Rental Assist	•
Maximum Annual 1 person - \$67,52			FURNISHED: Partly furnished	-dmaior	opened 1		
2 persons - \$77,12		c the	appliances on			tipurpose room	ng pan, galuch
 1-PERSON MAXIN	IUM MONTHLY INCOM	1E:	5626		J		

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6426

	Last Complete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HOMES I (HP	HA) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
	1638 - 1699 Ahiahi Pl.				PHONE: 832-333	36
					FAX: 832-338	
CITY:	Honolulu STATE: HI	ZIP:	96817		,	
MANAGER	: Julie Wiggett		APPLY ADD			
APPLY TO	: NOT ACCEPTING APPLICATIONS		1002 North S Honolulu, HI NOT ACC		PLICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: NOT ACCEPTING APPLICATIONS (Oahu applications office)					NO
APPLY PHONE	: 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:					
One E						
Three E						
Four E	3drm: 14 0		1116	4	10	YES
14 five bdrm units. Minimum Rent: Or	ne Bdrm - \$108; Two Bdrm - \$128; 2; Four Bdrm - \$180	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM WA ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:	10ED 0/2/2016************************************				TO REMAIN ON W	į oo
Head of household	d must be 18 years or older	WAITLI	IST FOR PARKING:		CALL EVERY	
		PARKING INF	O:	PET INFO	: P	PETS OK: NO
,	ASSET LIMITS: YES	Included				
	DENTIAL PROPERTY: NO			GENERAL	. INFO:	
ASSET LIMIT INFO	O: se on Oahu. Assets limited to two	LEASE:			OUSING PREFERE derly 2.) The Displace	
times the applicab	le income for admission or three continued occupancy.	1 year		Veterans Families of was deter	w/ service connecte of deceased veteran mined to be service erans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI	A:				al Shelters 7.) All ot	
50% AMI: 1 person persons \$42,800;	n \$33,300; 2 persons \$38,050; 3 4 person \$47,550.	FURNISHED: Partly furnishe appliances on		Funding:	State Pub Hsing 100 tions must be 3 yrs	
	UM MONTHLY INCOME:	3450]		

	Last Comple	ete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA HON	MES II (HP	HA) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:						PHONE: 832-333	36
O.T.		07475				FAX: 322-063	
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
	: Julie Wiggett	PLICATIONS		APPLY AD NOT ACCE 1002 North Honolulu, H	EPTING APPLI	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: NOT ACCEPTING AP (Oahu applications offi				EMAIL:	hphaishereforyou.o	NO
APPLY PHONE	: 832-5961			FAX: 832-3461		, , ,	5
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	3drm: 12 3drm: 8	0		676	2 3	6 8	YES
Minimum Rent: Or Three Bdrm - \$152 funding source: sta	NT IS 30% OF INCOME ne Bdrm - \$108; Two Bdi 2; Four Bdrm - \$180 ate CLOSED 8/2/2016******	rm - \$128;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA: Head of household	d must be 18 years or old	der	WAITLI	ST FOR PARKING:		TO REMAIN ON W	/AITLIST
			PARKING INF		PET INFO:	: F	PETS OK: NO
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INFO: OUSING PREFERE	TNOTO:
Cannot own a hou times the applicab	se on Oahu. Assets limi le income for admission continued occupancy.		1 year		1.)The Eld Veterans v Families d was deter	derly 2.) The Displace w/ service connected for deceased veterand mined to be service erans 6.) Families reconstructions.	ced 3.) Disabled and disabilities 4.) as whose death connected. 5.)
INCOME CRITERI 50% AMI: 1 perso persons \$42,800;	n \$33,300; 2 persons \$3	8,050; 3	FURNISHED: Partly furnishe appliances on		Transition Wait Funding: \$	al Shelters 7.) All of	thers - Indefinate
	IUM MONTHLY INCOME		3450		Į		

	Last C	Complete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA	HOMES III (F	IPHA) NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahiahi Pl.	•	<u>*</u>			PHONE: 832-333	36
CITY	I I a a a la la la	STATE: H	ZIP:	00047		FAX: 832-338	35
GITT.	Honolulu	STATE. H	ZIF.	96817			
MANAGER	: Julie Wiggett			APPLY ADI	DRESS: PTING APPL	ICATIONS	OUT-OF-STATE
APPLY TO	: NOT ACCEPTIN	NG APPLICATIONS		1002 North Honolulu, H	School St.	ICATIONS	APPLICATION ACCEPTED:
APPLY ATTN	: NOT ACCEPTING Oahu application	NG APPLICATIONS ns office				hahaishaa faasaa	NO
APPLY PHONE	: 832-5961			FAX: 832-3461	EMAIL:	: hphaishereforyou.o	rg
Unit	Type: Numbe of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:						
One E	3 drm : 10	0		504	1	4	YES
Two E	3drm: 14	0		676	2	6	YES
Three E	3 drm : 16	0		940	3	8	YES
Four E	Bdrm:						
RENT INFO: REI Minimum Rent: Or Three Bdrm - \$152 funding source sta	ne Bdrm - \$108; T 2; Four Bdrm - \$18 te	wo Bdrm - \$128; 30	UTILITIES IN Water and all and gas	CLUDED: lowance for electricity		MINIMUM WARE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be 18 year	s or older	WAITL	LIST FOR PARKING:		CALL EVERY	
			PARKING INI	FO:	PET INFO): P	PETS OK: NO
1	ASSET LIM	IITS: YES	Included				
AN OWN RESID	ENTIAL PROPER				GENERAL	L INFO:	
ASSET LIMIT INFO		and Problem I to the	LEASE:			OUSING PREFERE	
Cannot own a hour times the applicab times that limit for	le income for adm	ission or three	1 year		Veterans Families was dete	w/ service connecte of deceased veteran rmined to be service terans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI						nal Shelters 7.) All ot	
50% AMI: 1 person persons \$42,800;	n \$33,300; 2 perso 4 person \$47,550.	ons \$38,050; 3	FURNISHED: Partly furnish appliances or	edmajor	Funding:	State Pub Hsing 100 ctions must be 3 yrs	
1-PERSON MAXIM	UM MONTHLY IN	ICOME:	3450		<u> </u>		

		Last Compl	ete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAH	HALA HON	MES IV (HE	PHA) - NO	T ACCEPTING	3 AP	PROJECT TYPE:	
		St. and Lanakila	•				PHONE: 832-333	36
CITY	<u> </u>		CTATE:	71D.			FAX: 322-063	
CITY:	Honoluli	u	STATE: HI	ZIP:	96817		r	
MANAGER	: Julie W	/iggett			APPLY ADD NOT ACCE	PRESS: PTING APPLIC	CATIONS	OUT-OF-STATE
APPLY TO	: NOT A HPHA	CCEPTING AP	PLICATIONS		1002 North S Honolulu, Hl			APPLICATION ACCEPTED: NO
APPLY ATTN	_	CCEPTING AP						NO
APPLY PHONE		• •	C		FAX : 832-3461	EMAIL: I	nphaishereforyou.o	rg
AFFET FHONE	. 002 00	01			FAX. 032 3401			
Unit	Туре:	Number	25115	Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio:							
One I	3drm:	4	0		519	1	4	YES
Two	Bdrm:	32	0		662	2	6	YES
Three I	3drm:	4	0		808	3	8	YES
Four I	Bdrm:				J			
RENT INFO: RE Minimum Rent: Or Three Bdrm - \$152	ne Bdrm 2	- \$108; Two Bd	rm - \$128;	Water and allo and gas	CLUDED: wance for electricity		MINIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:							TO REMAIN ON W	
Head of household	d must be	e 18 years or old	der	\Λ/ΔΙΤΙ Ι	ST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO:	Р	ETS OK: NO
				Included				
	AS	SSET LIMITS:	YES					
AN OWN RESIDE		PROPERTY:	NO			GENERAL	INFO: DUSING PREFERE	NOTO
Cannot own a hou	se on Oa			LEASE:		1.)The Elde	erly 2.) The Displac	ed 3.) Disabled
times the applicab times that limit for			or three	1 year		Families of was detern	// service connected deceased veterand nined to be service rans 6.) Families re	s whose death connected. 5.)
INCOME CRITER							l Shelters 7.) All ot	
50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550.				FURNISHED: Partly furnishe appliances onl		Funding: S	tate Pub Hsing 100 ons must be 3 yrs o	
1-PERSON MAXIM				3450		J.		

	Last Compl	ete Update:	11/24/2021			AREA:	Palama
PROJECT NAME:	PUALANI MAN	OR				PROJECT TYPE:	Family
ADDRESS:	1216 Pua Lane					PHONE: 841-56	57
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER APPLY TO	:			APPLY ADD Get applicat	DRESS: ion onsite; brii	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
Two I	Bdrm:						
Four I	Bdrm:						NO
	NT IS 30% OF INCOME		UTILITIES INCLU Water	IDED:		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA: Head of household	d must be 18 years or ol	der	_	FOR PARKING:		TO REMAIN ON V CALL EVERY	(Months): 6
			PARKING INFO: Parking included	NO	PET INFO:	· ·	PETS OK: NO
	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INF	O:		LEASE: 1 year		Funding:	Section 8 100%.	
INCOME CRITERI	IA:		,				
	Income: 50% AMI. to new HUD guidelines		FURNISHED: Partly furnished-appliances only.	major			

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	12/15/2021			ADEA.	Makiki
PROJECT NAME	PUMEHANA (H	PHA-hon)	- NOT AC	CEPTING A	PPLIC	AREA: PROJECT TYPE:	
	1212 Kinau St.	PHA-HOH)	- NOT AC	CEPTING F	APPLIC		
ADDICESS.	1212 Killau St.					PHONE: 586-972 FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96814		1 AX. 973-018	51
MANAGER	t: Sol Sentous			1002 Nor	ADDRESS: th School St.		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AP	PLICATIONS			, HI 96817 CEPTING APPL	ICATIONS	APPLICATION ACCEPTED: NO
APPLY ATTN	I: Oahu applications office NOT ACCEPTING AP						
APPLY PHONE	: 832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 98	0		454	1	2	YES
One	Bdrm: 40	0		553	1	4	YES
Two	Bdrm: 1	0					
Three I	Bdrm:						
Four	Bdrm:						
	NT IS 30% OF INCOME of for Federal Low Income 8/2/2016*****		UTILITIES INC	CLUDED: owance for utilities		MINIMUM W. ESTIMATE MAXIMU	
AGE CRITERIA:	d must be 62 years or ole	der. or				TO REMAIN ON W	/AITLIST
disabled			WAITL PARKING INF	IST FOR PARKING	G: PET INFO): F	PETS OK: YES
]			Included	,	_	s under 25 lbs. only	,c
ANI OWNI DEGI	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	INEO:	
ASSET LIMIT INF		140	LEASE:		PREFER	ENCES: Domestic V	
Cannot own a hou	ise on Oahu		1 year		homeless	s in transitional shelte l.	ers; involuntary
						es, under age 62 sp ding: Fed Low Inc Pu	
ncome Eligibility =			FURNISHED:			etions must be 3 yrs a	
Maximum Annual 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;		Partly furnishe appliances on		Crystal III	ethamphetamine of	sex unender
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:	4570		Į.		
2-PERSONS MAY		ΛE·	5220				

		Last Comp	lete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUNC	HBOWL	HOMES (HPHA-hon) - NOT ACCE	EPTIN	PROJECT TYPE:	Elderly
ADDRESS:	730 Capt	tain Cook Ave	·.				PHONE: 586-972	24
CITY	J		STATE: HI		20012		FAX: 586-972	28
CITT	Honolulu		STATE: HI	ZIP:	96813			
MANAGER	· Sol San	itous			APPLY ADI	DRESS:		
MANAGEN	. 001 0011	itous			1002 North	School St.		OUT-OF-STATE
APPLY TO					Honolulu, H NOT ACCE	II 96817 EPTING APPLIC	CATIONS	APPLICATION ACCEPTED:
40011/4			PPLICATIONS					NO
APPLY ATTN			ICE PPLICATIONS			====		
APPLY PHONE	: 832-596	S1			FAX: 832-3461	EMAIL:	hphaishereforyou.o	org
Unit	Type:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	турс.	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:							
One I	Bdrm:	97	0		548	1	4	YES
Two I	Bdrm:	58	0		711	2	6	YES
Three I	Bdrm:	1	0					
Four I	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 ********CLOSED	for Fede	ral Low Incom		UTILITIES INC	CLUDED: owance for utilities		MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:							TO REMAIN ON W	00
Head of household	d or spous	se must be 62	years or	WAITI	IST FOR PARKING:		CALL EVERY	
older, or disabled				PARKING INF		PET INFO:	F	PETS OK: YES
				Included		Small pets	under 25 lbs. only	
	AS	SET LIMITS:	NONE			J		
AN OWN RESID		PROPERTY:	NO			GENERAL		
Cannot own a hou		hu		LEASE:		homeless	NCES: Domestic \ in transitional shelt	
				1 year		displaced.		
]							es, under age 62 sp ing: Fed Low Inc Pu	
INCOME CRITER						All convict	ions must be 3 yrs	ago, unless it's
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 00; 3 pers 00; 5 pers 00; 7 pers	person - \$53 ons - \$68,500 ons - \$82,200););	FURNISHED: Partly furnishe appliances on		crystal me	thamphetamine or ation to Shopping a harities Hawaii	sex offender
1-PERSON MAXIM	IUM MON	THLY INCOM	1E:	4570		Į.		
2-PERSONS MAXI	MIIM MO	NTHI Y INCO	ME	5220				

	Last Com	plete Update:	12/15/2021			AREA:	Aiea
PROJECT NAME:	PUUWAI MON	/II (HPHA-h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	
	99-132 Kohomua St.	(PHONE: 483-255	50
						FAX: 483-255	
CITY:	Aiea	STATE: HI	ZIP:	96701		,	
MANAGER	: Marcus Asami			APPLY ADD			OUT-OF-STATE
APPLY TO	· HPHA			Honolulu, HI	96817	0.4.7.0.1.0	APPLICATION
"""	NOT ACCEPTING A	PPLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED: NO
APPLY ATTN	I: Oahu applications of NOT ACCEPTING A						140
APPLY PHONE		a r ziorarono		FAX: 832-3461	EMAIL:	hphaishereforyou.o	org
ATTENTIONE	002 0001			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: 48	0		550	1	4	YES
Two I	Bdrm: 86	0		724	2	6	YES
Three I	Bdrm: 88	0		1080	3	8	YES
Four I	Bdrm: 38	0		1158	4	10	YES
	NT IS 30% OF INCOM 0 for Federal Low Incor 8/2/2016******		UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:			is.			TO REMAIN ON W	
	d must be 18 years or	older	\^/^ T	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	: F	PETS OK: YES
	ASSET LIMITS	NONE	Included		the catego	nimals ok, but only ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			ENCES: Domestic \ in transitional shelt	
Carmot own a noa	oo on oana		1 year		displaced.		,
					Funding:	Fed Low Inc Pub H	sing 100%
INCOME CRITER	IA:					ions must be 3 yrs	
ncome Eligibility =	: 80% of AMI Income: 1 person - \$5	3 250.	FURNISHED:		crystal me	thamphetamine or	sex offender
2 persons - \$60,90 4 persons - \$76,10	00; 3 persons - \$68,50 00; 5 persons - \$82,20 00; 7 persons - \$94,35	0; 0;	Partly furnishe appliances on				
1-PERSON MAXIM	IUM MONTHLY INCOI	ME:	4570				
2-PERSONS MAXI	MUM MONTHLY INCO	OME:	5220				

	Last Comp	lete Update:	9/30/2021			AREA:	Downtown
ROJECT NAME:	QUEEN EMMA	APARTM	ENTS			PROJECT TYPE:	Family
ADDRESS:	1270 QUEEN EMMA S	STREET				PHONE: 900-71	49
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX:	
MANAGER:				APPLY AD	DRESS:		OUT-OF-STATI
APPLY TO:	Cambridge Managem	ent, Inc.					APPLICATION ACCEPTED:
APPLY ATTN:							
APPLY PHONE:	900-7149		F	FAX:		Vebsite: ww.queenemmaa	
Unit ⁻	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Sto	udio:	0					
One B		0					
Two B		0					
Three B		0					
Four B	drm:	0]]	
RENT INFO: REN LIHTC; Income res Section 8 vouchers			UTILITIES INCLU	JDED:		TOTA MINIMUM W ESTIMATE	
							JM WAIT STIMATE 0
AGE CRITERIA:			WAITI IC	T FOR PARKING:	٦	O REMAIN ON W	
			PARKING INFO:		PET INFO:	F	PETS OK: NO
	ASSET LIMITS:		Limited, on-site pavailable, however parking is unkno	er, a waitlist for	Pets not all	owed.	
	ENTIAL PROPERTY:				GENERAL I		
ASSET LIMIT INFO):		LEASE:		ceiling wind	ocial spaces, new lows, 9 ft. ceilings flooring, some uni	
NCOME CRITERIA	A :						
			FURNISHED:				
-PERSON MAXIMU	JM MONTHLY INCOM	E:	0]		

	Last Comple	to Undate:	11/24/2021					
	-						AREA:	Chinatown
	RHF PAUAHI K	UPUNA HA	LE				PROJECT TYPE:	Elderly
ADDRESS:	167 North Pauahi St.						PHONE: 524-584	4
CITY:	Honolulu	STATE: HI	ZIP:		96817		FAX : 949-255	4
		,	,					
MANAGER	t: Sue Stacey				APPLY AD	DRESS:		
1						debaker Rd. h, CA. 90815-49	200	OUT-OF-STATE
APPLY TO	: Retirement Housing Fo	undation			(562) 257-5		900	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
1						EMAIL:	www.rhf.org	
APPLY PHONE	E: 524-5844			FAX:			_	
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: 12	0			539	1	1	YES
One I	Bdrm: 36	0			579	1	2	YES
Two I	Bdrm:							
Three I	Bdrm:			†				
	Bdrm:			ī				YES
1 0 0 1	Sum.		,					123
RENT INFO: RE	NT IS 30% OF INCOME:	YES	JTILITIES INC	CLUDED) :		TOTA	L UNITS: 48
2021 Update: No a	action required unless upo	dating	Nater, sewer	& trash			MINIMUM WA	_
	· 1						ESTIMATE ((Months): 72
		Į.					MAXIMU LIST ES	M WAIT TIMATE 96
AGE CRITERIA:							TO REMAIN ON W	į.
	d must be 62 years or old	er, or	WAITI	IST FO	R PARKING:		CALL EVERY	
disabled (mobility	impaired)	<u>F</u>	PARKING INF	O:		PET INFO:	Р	ETS OK: YES
			Parking not a	vailable				
	ASSET LIMITS:	NONE						
	DENTIAL PROPERTY:	NO				GENERAL		151
ASSET LIMIT INF	0.		EASE:			outside ho	are allowed with M me. If elderly tenar	
			1 year				may rent the unit.	
<u> </u>						Services:	meal site next door	
INCOME CRITER						Funding: S	Section 202	
Maximum Annual persons - \$39,700	Income: 1 person - \$34,7		FURNISHED: Partly furnishe	admaic)r	Project wil waitlist.	I call applicant to ke	ep application on
			appliances on			Application	· ·	
						Ask mana	gement to mail it	
						envelope	est with self-addres	seu stamped
1-PERSON MAXIM	IUM MONTHLY INCOME	: :	2895			P		
2-PERSONS MAXI	IMUM MONTHLY INCOM	L : (3308					

	Last Comple	ete Update:	11/24/2021				AREA:	McCully
PROJECT NAME:	RHF PHILIP ST	DEET AD	<u>ADTMENI</u>	TC			PROJECT TYPE:	Elderly
	1605 Philip St.	NLL I AF	ANTIVILIN	13				<u> </u>
ADDITEOU.	1003 Fillip 3t.						PHONE: 949-255 FAX: 949-255	
CITY:	Honolulu	STATE: HI	ZIP:	90	6826		1 AX. 949-233	
MANAGER	: Sue Stacey, Manager	- Suite 200			PPLY ADDRE			
APPLY TO	: Retirement Housing Fo	oundation		Lo	1 N. Studeba ong Beach, C. 62) 257-5100	A. 90815-49	00	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 949-2555			FAX: 949	9-2554	EMAIL: w	ww.rhf.org	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ	ЕТ.	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 10	0	NO	5	50	1	1	YES
One I	Bdrm: 24	0	NO	5	75	1	2	YES
Two I	Bdrm:		<u> </u>					
Three I	3drm:							
Four I	Bdrm:							NO
2021 Update: No a	NT IS 30% OF INCOME action required unless up n or in response to comn	odating	UTILITIES IN				MINIMUM WA ESTIMATE (MAXIMU	Months): 96 M WAIT
AGE CRITERIA:						Т	LIST ES O REMAIN ON W	120
	e household must be age		WAITL	JIST FOR PA	ARKING:		CALL EVERY (
household may be	ust be 18+. Other member 18+.	ers of the	PARKING INF	=O: [YES	PET INFO:	Р	ETS OK: YES
]			Available			One small p	et only	
AN OWN DECI	ASSET LIMITS:					 GENERAL II	NEO.	
ASSET LIMIT INF	DENTIAL PROPERTY: O:	INO	LEASE.				are allowed with M	D letter; can work
			LEASE: 1 year, then r	month to mo	nth		ne. If elderly tenar may rent unit.	t dies, under age
						Opened 199	93	
INCOME CRITER						Funding: Se	ection 202 100%	
Maximum Annual 2 persons - \$38,38	Income: 1 person - \$33,5	550;	FURNISHED: Partly furnish appliances or	edmajor		Send reque envelope	ement to mail it st with self-addres n manager's office	·
	IUM MONTHLY INCOME		3404			,		

	Last Comple	ete Update:	11/24/2021			AREA:	Chinatown
PROJECT NAME:	RIVER PAUAHI	(Not takin	g applicati	ions)		PROJECT TYPE:	Family
ADDRESS:	1155 River St.					PHONE: 538-162	21
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: None	
	t: Luis; Ste. 111	Inited Horizon Re	aalty II C	APPLY ADI	DRESS: y taking applic	ations	OUT-OF-STATE APPLICATION
	l: Certified Occupancy S						ACCEPTED: YES
APPLY PHONE		(FAX: 892-1801	EMAIL:		
Si One I Two I	Type: Number of UNITS: tudio: Bdrm: 7 Bdrm: 7 Bdrm: Bdrm: Bdrm: Bdrm: 7	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed: YES YES
RENT INFO: RE	NT IS 30% OF INCOME		UTILITIES INCLU			MINIMUM WARE MAXIMU	(Months): 60 JM WAIT STIMATE 60
Head of household	d must be 18 years or old	F	ARKING INFO:	FOR PARKING:	PET INFO	CALL EVERY	(Months): 6 PETS OK: NO
AN OWN RESIC ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:	NONE NO	EASE:			INFO: Section 8 100% p units 2 - 1 bdrm &	1 - 2 bdrms
2 persons - \$38,00	IA: Income: 1 person - \$33,2 00; 3 persons - \$42,750; 00; 5 persons - \$51,300.	[i	CURNISHED: Partly furnished- appliances only.				
	MUM MONTHLY INCOME		2771]		

		Last Compl	ete Update:	11/24/2021				AREA:	Makiki
PROJECT NAME:	ROYA	L KINAU	APARTM	ENTS			ı	PROJECT TYPE:	Elderly
ADDRESS:	728 Kinau	u St.						PHONE: 521-367	78
CITY:	Honolulu		STATE: HI	ZIP:	9	96813		FAX : 521-293	31
MANAGER	: Natasha	James, Com	munity Manage	r			DDRESS: Street, Honolulu,	HI 96813	OUT-OF-STATE
APPLY TO	: Royal Ki	inau Apartmer	its				,		APPLICATION ACCEPTED:
APPLY ATTN	l:								YES
APPLY PHONE	:: 521-367	8			FAX : 52	1-2931	EMAIL: ro		@royalkinauapts.co
		Number of UNITS:	RENT:	Minimum INCOME Required:	so	Q FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	60	1032	1.5 x rent		541	1	2	YES
Two I	Bdrm:	24	1468	1.5 x rent	7	741	1	4	YES
Three I	Bdrm:								
Four I	Bdrm:								NO
RENT INFO: RE	ed unless	updating cont	act	UTILITIES INC		er	_	TOTA	L UNITS: 83
information. Long	er wait for	two-bedrooon	n units.					ESTIMATE	
Section 8 certifica		need not mee	t the min						JM WAIT STIMATE 24
AGE CRITERIA: All residents must		older					т	O REMAIN ON W	AITLIST
				WAITL PARKING INF	.IST FOR P FO:	YES	PET INFO:	F	PETS OK: NO
				Parking includes		ices			
		SET LIMITS:							
AN OWN RESIDERS ASSET LIMIT INF		PROPERTY:	YES	LEASE:			GENERAL II		
				1 year; then n	nonth-to-mo	onth	units have l Funding: Lll Funding: R	HTC, Section 8	
							8 handicapp	ped access	
INCOME CRITER 50% AMI: 1 perso persons \$54,250:	n \$45,250;		2,250; 3	FURNISHED: Partly furnished appliances or	edmajor		envelope Pick up fron Email reque	st with self addres	•
 1-PERSON MAXIN	IUM MONT	THLY INCOMI	≣:	3771]		

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	Last Comple	te Update:	11/24/2021			AREA:	Downtown
PROJECT NAME:	SAFE HAVEN/N	IENTAL H	IEALTH KO	KUA		PROJECT TYPE:	Emergency/Transi
ADDRESS:	126 N. Pauahi St.					PHONE: 524-723	33
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 524-035	53
om. J	Horiolala	OTATE: I		90017			
MANAGER:	Bill Hanrahan			APPLY AD			
APPLY TO:	Mental Health Kokua Intake Monday - Friday	from 1pm 4p	m	126 N Pau; Honolulu, F			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:		nom ipm - 4p	111				NO
APPLY PHONE:	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:
Sto	udio: 25			80	1	1	
One B							
Two B							
Four B							
			·			·	
Rooms with shared	NT IS 30% OF INCOME: I bath and communal din		All utilities	.UDED:		TOTA MINIMUM W.	L UNITS: 25
	ill. (bi-polar, Schizophre	nia,				ESTIMATE	
depression). 18 yrs	or older.					***************************************	JM WAIT STIMATE
AGE CRITERIA:						TO REMAIN ON W	
Head of household	must be 18 years or old	er	WAITLIS PARKING INFO	T FOR PARKING:	PET INFO	CALL EVERY	PETS OK: NO
			No parking	.	TETTING	', '	LTO OK. INO
	ASSET LIMITS:						
AN OWN RESID	ENTIAL PROPERTY:	NO			GENERAL		d annamah.
ASSET LIMIT INFO	<i>)</i> .		LEASE:		_ mentally		
			INIONIII-IO-MONII	l	AUW, C	HUD Continuum of (& C Esg; State HPH, residential, Case M;	A; other services
INCOME ODITED!	۸.				Plcmt Se		
Max income limits -			FURNISHED:		rehab,	med/psych svcs, ch dency treatment, co	nemical
			Bed, dresser		integratio	n	
						F 1 - 4pm	
					NO RESI	PONSE IN 2021	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	lete Update:	12/15/2021				
					1000	ARE	
	SALT LAKE (H	PHA-hon)	- NOT AC	CEPTING	APPS	PROJECT TYP	PE: Family
ADDRESS:	2907 Ala Ilima St.					PHONE: 483-	
CITY:	Honolulu	STATE: HI	ZIP:	96818	5	FAX : 483-	-2552
	,	,	,				
MANAGER	: Marcus Asami			APPLY	Y ADDRESS:		
					North School St. ulu. HI 96817		OUT-OF-STATE APPLICATION
APPLY TO): HPHA NOT ACCEPTING AP	PLICATIONS			CCEPTING AP	PLICATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications offic	ce					NO
	NOT ACCEPTING AP				EMA	AIL: hphaishereforyo	ou.org
APPLY PHONE	:: 832-5961			FAX: 832-346		,	J
Llait	Timos		Minimum		MINIMU	JM MAXIMUM	
Onit	Type: Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of Peop		CAREGIVER Allowed:
	tudio:		rtoquirea.		JOI T COP	т сорю.	
				040			YES
		0		642	1	4	
	Bdrm:			_		_	
Three						_	
Four	Bdrm:					<u> </u>	
DENIT INIEO: DE	NT IS 30% OF INCOME	. VEQ	UTILITIES IN	CLUDED:		T	OTAL UNITS: 28
) for Federal Low Income			owance for elect	ricity		
******** CLOSED	8/2/2016*****					_	TE (Months): 36
						MAX	IMUM WAIT
<u> </u>						LIST	ESTIMATE 60
AGE CRITERIA:	d must be 18 years or ol	dor				TO REMAIN OF	N WAITLIST RY (Months): 12
Head of nousenor	d must be 16 years of or	dei		IST FOR PARK			
			PARKING INF	-0:	PET IN		PETS OK: YES
,	ACCET LIMITO	NONE	Iniciaaca		the cat	tegories listed below oa (under 25 lbs) or	r.
AN OWN PESI	ASSET LIMITS: DENTIAL PROPERTY:				,	RAL INFO:	cat
ASSET LIMIT INF		NO	 			ERENCES: Domest	ic Violence victims;
Cannot own a hou	ise on Oahu		LEASE: 1 year		homel	ess in transitional sl ced.	nelters; involuntary
			 			ng: Fed Low Inc Pub	Heing 100%
J			l				-
INCOME CRITER			FURNISHED:			nvictions must be 3 y I methamphetamine	
Maximum Annual	Income: 1 person - \$53,		Partly furnish		-		
4 persons - \$76,10	00; 3 persons - \$68,500; 00; 5 persons - \$82,200;		appliances or	nly some carpets			
6 persons - \$88,36 8 persons - \$100,4	00; 7 persons - \$94,350; 450						
1-PERSON MAXIM	MUM MONTHLY INCOM	E:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	ME:	5220				

		Last Comp	lete Update:	3/17/2020			ADEA	Waianae
PROJECT NAME:	SEA	WINDS A	PARTMEN	NTS. H & J	Weinberg		AREA PROJECT TYPE	
		Kauiokalani Pl.		,			PHONE : 696-00	61
CITY	Jaz :		STATE: III		00700	<u></u>	FAX:	
CITT	Waiana	ie	STATE: Hi	ZIP:	96792	2		
MANAGER	: Jesse	Smith, General	Manager		APPLY	Y ADDRESS:		
						al Manager, Sea nents, 85-295 Ka		OUT-OF-STATE APPLICATION
APPLY TO				0a.m. to 2pm, m vailable by email	10st #151 1	Waianae, Hawaii		ACCEPTED:
APPLY ATTN	l: Jesse	Smith						NO
APPLY PHONE	: 696-00	061			FAX:	EMAI	L: jesse@hsiservices	s.net
Unit	Type:	Number		Minimum		MINIMUN		CAREGIVER
	rype.	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People		Allowed:
S	tudio:	20	975	1600	400	1	4	
One I	Bdrm:							
Two I	Bdrm:	30**	1295	2000	770	4	7	
Three I							-	
Four I	Bdrm:							NO
RENT INFO: RE	NT IS 30	0% OF INCOME	E: NO	UTILITIES INC	CLUDED:		TOT	AL UNITS: 50
20 Transtional stustay. Rents range			maximum	Water, sewer,	trash		MINIMUM V	(14 (1)
**30 permanent 2			s on site				ESTIMATE	, ,
have sliding scale	rents of	\$850 - \$1295						UM WAIT STIMATE 30
AGE CRITERIA:							TO REMAIN ON \	
18 and older					IST FOR PARK	ING:	CALL EVERY	
				PARKING INF	O: NO	PET INF	FO: typical household pet	PETS OK: YES
1	۸۰	SSET LIMITS:		Ψ23 month			See pet agreement	
AN OWN RESID						GENER	AL INFO:	
ASSET LIMIT INF	O:			LEASE:			am of Housing Soluti	
HUD Urban Honol	ulu Low	Income Limit		1 year		in a hor	nce is given if applica meless shelter.	
						handica	(includes 1 studio) ar apped; 2 units (included for booking	es 1 studio)
INCOME CRITER	IA:			•			d for hearing disabled	•
\$2000 minimum g food stamps) for 2			ot including minimum	FURNISHED:			from manager's offic	
gross monthly inco			Tillinin Gill		floors and major efrigerator and		equest to Jesse@hsi	services.net
1-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	3665				

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Last Complete Update:	11/24/2021			AREA:	
ROJECT NAME: SECTION 8 (CITY) - CL	OSED			PROJECT TYPE:	N/A
ADDRESS: 842 Bethel St., First Floor				PHONE: 768-709	96
CITY: Honolulu STATE: H	II ZIP:	96813		FAX: 768-703	39
MANAGER:		APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO:					APPLICATION ACCEPTED:
APPLY ATTN:					
APPLY PHONE : 768-7096	F	AX : 768-7039	EMAIL:	www.honolulu.gov/	dcs/housing.htm
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:					
One Bdrm:					
Two Bdrm:					
Three Bdrm:					
Four Bdrm:					
Provides Section 8 Vouchers (for private landlord rentals); participant family must minimally pay 30% of adjusted income or \$50, whichever is greater. WAITLIST CLOSED 6/18/21, after 2000 pre-applicants were randomly selected and placed convenient.	UTILITIES INCLU	DED:		MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): JM WAIT STIMATE
AGE CRITERIA:	WAITLICT	FOR DARKING		TO REMAIN ON W CALL EVERY	
	PARKING INFO:	FOR PARKING:	PET INFO): F	PETS OK: UNKNO
ASSET LIMITS:					
AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:			GENERAI	_ INFO:	
NOSE I ELIMIN II II G.	LEASE:				
INCOME CRITERIA:					
	FURNISHED:				
-PERSON MAXIMUM MONTHLY INCOME:					

	Last Compl	lete Update:	11/24/2021			AREA	: Hawaii
PROJECT NAME:	SECTION 8 (S	ΓΑΤΕ) - CL	OSED			PROJECT TYPE	: N/A
ADDRESS:	1002 N. School St. P.	O. Box 17907				PHONE: 832-60	40
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 832-34	61
MANAGER:	<u> </u>			APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO:	:						APPLICATION ACCEPTED:
APPLY ATTN:	:						
APPLY PHONE:	: 832-6040			FAX: 832-3461	EMAIL: h	nphas8office@hav	vaii.gov
Unit ¹	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:	1386					
One B	Bdrm:	1511					
Two B	Bdrm:	1991					
Three B	Bdrm:	2934					
Four B	Bdrm:	3367					
Provides Section 8 rentals); tenant pay 40% at entry.) LON	NT IS 30% OF INCOME Vouchers (for private lays 30% of income (up to NG wailists spond to communication	andlord o a max of	UTILITIES INC	CLUDED: e on per case basis		MINIMUM W ESTIMATE MAXIM	(Months):
			Įt.				STIMATE
AGE CRITERIA: 18 and older			10/01=			TO REMAIN ON V CALL EVERY	
*Max allowable ren	nt for 5bdrm: \$3872; 6bd	drm:\$4453	PARKING INF	O: PARKING:	PET INFO:		PETS OK:
	ASSET LIMITS:						
	ENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INFO	J:		LEASE: 1 year initially		8/16/16 and homeless, violence. E households	cher choice applod closed 8/18/16 will displaced or victing Elderly and disable paying more that ard rent are also to	with preference for n of domestic ed persons or n 50% of their
INCOME CRITERIA					program. F	Rents listed are thowed for that apar	e maximum
	is based on 30%AMI ar for Honolulu county is I		FURNISHED:				
I 1-PERSON MAXIMI	UM MONTHLY INCOM	E:	2116]		
2-PERSONS MAXIN	MUM MONTHLY INCOI	ME:	2416				

	Last Comple	ete Update:	11/24/2021			AREA:	Iwilei
PROJECT NAME:	SENIOR RESID	ENCE AT	IWILEI		-	PROJECT TYPE:	Elderly
ADDRESS:	888 Iwilei Road					PHONE: 888-087	76
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX : 521-119	92
MANAGER	t: Locations			APPLY ADI			OUT-OF-STATE
APPLY TO	: Senior Residence at Iv	vilei			oad, Honolulu, F	Hi 96817	APPLICATION ACCEPTED:
APPLY ATTN	I: Manager's Office						
APPLY PHONE	E: 738-3100		ı	FAX:	EMAIL:		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm: 146	1200	2.5rent				
	Bdrm: 13	1300	2.5 rent				
Three							
Four	Bdrm:						
RENT INFO: RE 1 bdrm (50% AMI) 1 bdrm (60% AMI) 2 bdrm (60% AMI)) - \$1004 - \$1054		UTILITIES INCL Water and sewe			MINIMUM W ESTIMATE	
			ļ				STIMATE 6
AGE CRITERIA:					Т	O REMAIN ON W	
62+				T FOR PARKING:		CALL EVERY	
			PARKING INFO	: NO	PET INFO:	H	PETS OK: NO
,	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INF	'O:		LEASE:		Application:		
2021 UPDATE: N	o changes to contact info	ormation	One-year			ement to mail it n manager's office ite office	e
INCOME CRITER	IA:						
3 ppl	1 person; \$50,400 2 ppl 1 person; \$60,480 2 ppl		FURNISHED: Partly furnished appliances only				
 1-PERSON MAXIM	MUM MONTHLY INCOME	≣:	4410]		
2-PERSONS MAXI	IMUM MONTHLY INCOM	ΛΕ:	5040				

Last Complete Update:	7/16/2020			AREA:	
ROJECT NAME: SENIOR RESIDENCE A	T KANEOH	E		PROJECT TYPE:	Elderly
ADDRESS: 45-705 Kamehameha Hwy.				PHONE: 235-28	
CITY: Kaneohe STATE: H	I ZIP:	96744		FAX : 235-08	97
MANAGER:		APPLY AD			OUT-OF-STAT
APPLY TO: Locations Property Management					APPLICATION ACCEPTED: YES
APPLY ATTN:					1123
APPLY PHONE: 235-2898		FAX: 235-0897	EMAIL:		
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 74 1125	2 x rent	428			YES
Two Bdrm:					
Three Bdrm:					
Four Bdrm:					NO
RENT INFO: RENT IS 30% OF INCOME: YES *44 (HUD) Rents are 30% of income; waitlist 1-3 yrs *30 (LIHTC) units are \$1125; waitlist 1-3 yrs. Deposit same as rent. Must be below 60% MI Section 8 certificate holders need not meet the min gross income requirement	UTILITIES INC			MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:				TO REMAIN ON V	VAITLIST
All residents must be 62 or older		IST FOR PARKING	=	CALL EVERY	
	parking	DO NOT include 48	PET INFO	IO PETS	PETS OK:
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: YES	stalls Come First Se	First erved	GENERAL	INIEO:	
ASSET LIMIT INFO:	LEASE:		Commun	ty center, laundry re	oom.
	6 months		floor near Units hav	age compartments laundry room	available on first
NCOME CRITERIA:	•		Funding:	LIHTC (30 units), S	
HUD Units 50% AMI: 1 person \$44,100; 2 persons \$50,400; 3 persons \$56,700 LIHTC units: (60% AMI) 1 person - \$52,920 2 persons - \$60,480; 3 persons - \$68,040	FURNISHED: Partly furnishe appliances on	•	(24 units) Transport Catholic (RHTF, Section 202 ation to Shopping a Charities Hawai'I PONSE IN 2021	
-PERSON MAXIMUM MONTHLY INCOME:	52920				

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		Last Comp	lete Update:	12/3/2021			AREA:	Kapolei
PROJECT NAME:	SENI	OR RESI	DENCE AT	KAPOLE	11 & 2		PROJECT TYPE:	Elderly
ADDRESS:	91-1034	Namahoe St.					PHONE: 674-293	37
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX : 674-293	38
]							
		an, Resident M	lanager		APPLY AD 1055 Kalo 96826	DDRESS: Place Ste 103 H	lonolulu, HI	OUT-OF-STATE APPLICATION
APPLY TO		naka Inc.						ACCEPTED: YES
APPLY ATTN	I: Ext 24					EMAIL:		
APPLY PHONE	: 949-41	11			FAX: 949-7211	EWAIL.		
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:	79	0		463-500	1	3	
	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE				UTILITIES INC		_	TOTA	L UNITS: 79
60 unit @ 30% AM Namahoe St. 20 91-1098 Namahoe	units @ 5 e St.	0% AMGI at K	apolei 2 -		: \$78/ utility allowan		MINIMUM W ESTIMATE	
Gross maximum r income (if qualified	d) Month	nly amount is S	Subject to					JM WAIT STIMATE
AGE CRITERIA:							TO REMAIN ON W	
All residents 62+.	Caregive	er allowed with	MD letter.	WAITL	IST FOR PARKING:	<u>.</u>	CALL EVERY	
				PARKING INF	1	PET INFO:	F	PETS OK: YES
J.	AS	SSET LIMITS:	NONE	Parking includ	iea			
AN OWN RESI						GENERAL	INFO:	
ASSET LIMIT INF				LEASE:		Opened 6/	2009 C 202 RHTF	
Must not wholly over real estate.	wn a majo	ority interest in	residentiai	One-year		1 1	s include: screen o	loore coured
						property, o	n bus route, laundi	ry room, ceiling
INCOME CRITER	IA:			•			ss to the recreatione; about a 10 minut	
30% of AMI: 1 per 50% of AMI: 1 per				FURNISHED:		Any crimin	al conviction = inel	igible
1-PERSON MAXIN	MUM MON	THLY INCOM	E:	3525		1		
2-PERSONS MAXI	IMUM MC	NTHLY INCO	ME:	4029				

	Last Comp	lete Update:	3/5/2020			AREA:	Wahiawa
PROJECT NAME:	SILVERCREST	Γ				PROJECT TYPE:	Elderly
ADDRESS:	520 Pine St.					PHONE: 622-278	35
CITY:	 Wahiawa	STATE: HI	ZIP:	96786		FAX: 621-778	31
	Jivamama	ļ		007.00			
APPLY TO		Property Admini	strator	APPLY ADD On-Site #11			OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN				FAX: 621-7781	EMAIL	:	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 78	0	NO	500		3	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						NO
30% of Adjusted In After application is sent.	s received, a confirmation	on letter is	UTILITIES INCL Water, Sewer, utility allowance	Trash Removal, \$56		MINIMUM W. ESTIMATE MAXIMU	(Months): 12
AGE CRITERIA:						TO REMAIN ON W	
(companion) 18+,	d must be 62+. Spouse minor children allowed i ult children not allowed.	if HOH has	WAITLIS	ST FOR PARKING: YES	PET INFO	CALL EVERY D: F	(Months): 6 PETS OK: YES
over 18 allowed.			Parking include	ed if available	1 animal		·
	ASSET LIMITS:	NONE			allillal		
	DENTIAL PROPERTY:	YES			GENERA		
ASSET LIMIT INF	<u>O:</u>		LEASE:		denial (a	viction in the last 7 ye pplicant or caregiver)	
			1 year		automati	drug, and sex offense c denial - regardless accept any evictions/ ons.	of time.
INCOME CRITER	IA:				Opened		
Maximum Ānnual	Income: changes per H	UD	FURNISHED: Refrigerator, st	ove, carpet, blinds	Library, of Laundry Application Ask man Send requested	community room, Lar Facilities on: agement to mail it quest with self addres	sed stamped

2-PERSONS MAXIMUM MONTHLY INCOME:

_	Last Comp	lete Update:	11/24/2021			AREA:	Chinatown
PROJECT NAME: S	MITH BERET	ANIA				PROJECT TYPE:	Family
ADDRESS: 11	70 Nuuanu Ave.					PHONE: 521-648	36
CITY: H	onolulu	STATE: HI	ZIP:	96817		FAX : 531-660	05
MANAGER: P	Ko Norasing-Yun			APPLY AD On-Site Ste			OUT-OF-STATE
APPLY TO: S	Showe Management						APPLICATION ACCEPTED:
APPLY ATTN:	***WAITLIST	CLOSED SINCE	2018***				
APPLY PHONE: 5	521-6486		F	AX: 531-6605	EMAIL:		
Unit Ty	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bd		0	NO	548	1	2	YES
Two Bd	rm: 82	0	NO	719	2	4	YES
Three Bd							NO
Four Bu				1			INO
RENT INFO: RENT		E: YES	UTILITIES INCLU	DED:	_	TOTA	L UNITS: 164
2021 Update: No cha Temtative New Owne	anges er by 2022		Water			MINIMUM W ESTIMATE	
No action required untimely response to co							JM WAIT
AGE CRITERIA:		Idea				TO REMAIN ON W	
Head of household m	lust be 18 years or o	ider.		FOR PARKING:	DET INCO		
			PARKING INFO: Parking included		PET INFO:	<u> </u>	PETS OK: NO
	ASSET LIMITS:	NONE					
AN OWN RESIDE	NTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO:			LEASE:			ew applicants only s	
			1 year			uted and accepted	
					A lottery is the waitlis	s performed to select.	ct applicant's # for
INCOME CRITERIA:					Funding: S	Section 8 100%	
Maximum Annual Inc 2 persons - \$41,850; 4 persons - \$52,300; 6 persons - \$60,700; 8 persons - \$69,050	3 persons - \$47,100 5 persons - \$56,500		Partly furnished appliances only, o				
I-PERSON MAXIMUN	M MONTHLY INCOM	IE:	3517]		

		Last Compl	ete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	SPEN	ICER HOI	ISF (HPH	A-hon) - N	IOT ACCEPTI	NG A	PROJECT TYPE:	
ADDRESS:				A HOII) I	IOT ACCEL TO		PHONE: 586-972	1 ,
							FAX: 586-972	
CITY:	Honolulu	I	STATE: HI	ZIP:	96822		1000 012	
MANAGER	: Sol Ser	ntous			APPLY ADI	DRESS:		
APPLY TO		CCEPTING AF	PLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN		pplications offi						NO
APPLY PHONE	_		LICATIONS		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: Bdrm:	1	0					YES
Three E	Bdrm:	16	0		798	3	8	YES
Four E	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 ***********************************) for Fede	ral Low Income		UTILITIES INC Water and gaselectricity	CLUDED: s + allowance for		TOTA MINIMUM WA ESTIMATE (MAXIMU	(Months): 36
AGE CRITERIA:								TIMATE 60
Head of household	d must be	18 years or ol	der	WAITL	IST FOR PARKING:		TO REMAIN ON W CALL EVERY	
				PARKING INF	O: NO	PET INFO	: P	ETS OK: YES
1	AS	SET LIMITS:	NONE			the catego	ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERAL	. INFO:	
Cannot own a hou		hu		LEASE: 1 year		homeless displaced	ENCES: Domestic V in transitional shelte Fed Low Inc Pub Hs	ers; involuntary
INCOME CRITERI	IA:						tions must be 3 yrs a	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	80% of A Income: 7 00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$53, sons - \$68,500; sons - \$82,200;		FURNISHED: Partly furnishe appliances on	edmajor	crystal me	ethamphetamine or s	sex offender
1-PERSON MAXIM	IUM MON	ITHLY INCOM	E:	4570		1		

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		Last Comp	lete Update:	3/4/2020			AREA	: Mililani
PROJECT NAME:	THE	COURTY	ARDS AT I	MILILANI N	MAUKA		PROJECT TYPE	: Family
ADDRESS:	95-1015	5 Koolani Dr.					PHONE: 626-94	155
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX : 626-94	156
				,				
MANAGER	R: David	Smith			APPLY AD	DRESS: agement Office	05 1015	OUT-OF-STATE
APPLY TO): The C	ourtyards at Mil	iani Mauka			, Mililani, Hi. 96		APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 626-94	1 55			FAX: 626-9456		nttp://www.location le-rentals.aspx	nsrentals.com/afforda
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
	Bdrm:	12	975	2.25xRent				
Three		12	1319	2.25xRent				
	Bdrm:	12	1010					YES
RENT INFO: RE	NT IS 30	0% OF INCOME	E: NO	Water	CLUDED:		MINIMUM V ESTIMATE MAXIM	
AGE CRITERIA:						-	TO REMAIN ON V	
Head of househole	d must b	e 18 years or o	lder		IST FOR PARKING:	DET INCO	CALL EVERY	
		0057 114170	NONE		d; Max 2 stalls, but d to have 2nd stall	PET INFO:		PETS OK: NO
AN OWN RESI		SSET LIMITS: PROPERTY:				JENERAL I	NFO:	
ASSET LIMIT INF				LEASE:		LIHTC		
				1 year		Accepts Se	ection 8 & Rent S	upplement
INCOME CRITER	IA:						: rom website m manager's offic	ce
60% of AMI: 1 per		,640; 2 persons	\$\$57,840	FURNISHED: Partly furnishe appliances on		NO RESPO	DNSE IN 2021	
1-PERSON MAXIN	им мо	NTHLY INCOM	IE:	4220]		
2-PERSONS MAXI	ІМИМ М	ONTHLY INCO	MF:	4820				

		Last Comp	lete Update:	3/3/2020			AREA:	Kalihi
PROJECT NAME:	THE	TOWERS	AT KUHI	O PARK			PROJECT TYPE:	Family
ADDRESS:	1475 Lir	napuni St.					PHONE : 888-28	16
CITY:	Honolul	u	STATE: HI	ZIP:	96819		FAX : 888-060	31
	Tyrone	Colding, Man	ager -Tower B-	A- PH: 888-3382 PH: 983-1631	APPLY A	ADDRESS:		OUT-OF-STATE APPLICATION
		ichaels Organi	zation					ACCEPTED: YES
APPLY ATTN	:					EMAIL:	towers@tmo.com	
APPLY PHONE	: 888-28	316			FAX: 888-0631			
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I			1356	3280	579			
Two I	3drm:		1627	3937	792			
Three I	3drm:		1880	4268	944			
Four I	3drm:							
RENT INFO: RE Rent listed is for T The Towers at Kul Subsidized units - Authority	ax Credi	t units. Apply for market unit	directly to	Water, electric			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA: Head of household	1 must h	e 18 vears or o	lder				TO REMAIN ON W	
Ticad of flouscrion	a must b	c to years or c	idei	WAITLI PARKING INF	ST FOR PARKING O: NO	G: PET INFO		PETS OK: NO
]	AS	SSET LIMITS:		Parking includ	ed. Each unit has stalls. Parking is			Įo
AN OWN RESID	DENTIAL	. PROPERTY:	UNKNOW			GENERAL	INFO:	
If asset generates income		then it is coun	ted toward	LEASE: One-year			enter rvices program for a unty Section 8 okay	
INCOME CRITERI	IA:			,		24-hour m	aintenance and sec	curity
2x rent				FURNISHED:		NO RESP	ONSE IN 2021	
1-PERSON MAXIM 2-PERSONS MAXI				4220 4820				

_		lete Update:	12/16/2021			AREA	
JECT NAME: THO		DING				PROJECT TYPE	Family
ADDRESS: Unkno	own					PHONE:	
CITY: Honol	ulu	STATE: HI	ZIP:	0		FAX:	
MANAGER:				APPLY AD	DRESS:		OUT-OF-ST
APPLY TO: Hous	sing Solutions, Ind	C.					APPLICAT ACCEPTE
APPLY ATTN: BUIL	DING IS NOT OF	PEN OR IN OPI	ERATION				
PPLY PHONE:			F	FAX:		Website: https://w Email: Unknown	ww.hsiservices.n
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:		0					
One Bdrm:		0					
Two Bdrm:		0					
Three Bdrm:		0					
Four Bdrm:		0					
CRITERIA:						MAXIM	(Months):
				FOR PARKING:			PETS OK:
			PARKING INFO:	<u> </u>	PET INFO:		PETS OK.
	ASSET LIMITS:						
I OWN RESIDENTIA	L PROPERTY:				GENERAL	INFO:	
ET LIMIT INFO:			LEASE:		Honolulu.	y, century-old stru Residential floors throoms, opening	of 25 units with
OME CRITERIA:							
			FURNISHED:				
RSON MAXIMUM M	ONTHLY INCOM	E:	0		<u> </u>		
RSONS MAXIMUM N	MONTHLY INCO	ME:	0				

APPLY PHONE: 947-7181 Unit Type: Number of UNITS: RENT: RENT: SQ FT: MINIMUM Number of People	L: jen@hsiservices.n MAXIMUM Number of	OUT-OF-STATE APPLICATION ACCEPTED: NO
MANAGER: Jen Yu APPLY ADDRESS: Referred by outreach ag homeless shelter APPLY ATTN: APPLY ATTN: APPLY PHONE: 947-7181 FAX: 944-3976 Minimum INCOME Required: SQ FT: MINIMUM Number of People	gency or L: jen@hsiservices.n MAXIMUM Number of	OUT-OF-STATE APPLICATION ACCEPTED: NO
MANAGER: Jen Yu APPLY ADDRESS: Referred by outreach ag homeless shelter APPLY ATTN: APPLY ATTN: APPLY PHONE: 947-7181 FAX: 944-3976 Minimum INCOME Required: SQ FT: Minimum of People	gency or L: jen@hsiservices.n M MAXIMUM Number of	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY PHONE: 947-7181 Unit Type: Number of UNITS: RENT: RENT: REQuired: SQ FT: MINIMUM Number of People	L: jen@hsiservices.n MAXIMUM Number of	APPLICATION ACCEPTED: NO net
APPLY PHONE: 947-7181 FAX: 944-3976 Unit Type: Number of UNITS: RENT: RENT: SQ FT: MINIMUM Number of People of Peo	MAXIMUM Number of	CAREGIVER
Onit Type: Number of UNITS: RENT: INCOME Required: SQ FT: Number of People	Number of	
Studio: 965 460 2		
	4	
Two Bdrm: 8 1150 580 5	7	
Three Bdrm:		NO
RENT INFO: RENT IS 30% OF INCOME: NO \$965 for 1-bdrm; \$1150 for 2-bdrm Electricity, water, sewer, and refuse disposal AGE CRITERIA: Adult 18+ with at least 1 minor child (18 and under) AGE CRITERIA: WAITLIST FOR PARKING:	MINIMUM W ESTIMATE MAXIM	UM WAIT STIMATE VAITLIST
or at least 6 months pregnant PARKING INFO: YES Approx 6-12	FO:	PETS OK: NO
ASSET LIMITS:	AL INEO:	
ASSET LIMIT INFO: LEASE: Homele Homele under 1:	AL INFO: ess or at risk ess families with at lea 8 years. f Household must be	
INCOME CRITERIA:	ss = currently unshelte	ered or in an
Less than 50% AMI FURNISHED: emerge	ency shelter or at risk ional Housing for Emp	of being homeless

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	11/24/2021			4054	Ewa Beach
PROJECT NAME:	VII I /	ACES OF	MONE KI	I DUACE	<u> </u>		AREA: PROJECT TYPE:	
			MOA E NO	- PHASE	: I]
ADDRESS:	91-1655	Panika St.					PHONE: 681-300	
CITY:	Ewa Bea	ach	STATE: HI	ZIP:	96706	6	FAX : 681-300	J4
						V 455550		
MANAGER		vasaki, Mgr; Ja do, Admin Asst	inna Kekoa, Leas	sing Agent; Be	91-16	Y ADDRESS: 55 Pahika St. Beach HI 96706		OUT-OF-STATE APPLICATION
APPLY TO): EAH - \	Villages of Moa	a'e Ku		Lwa L	seach in 90700		ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	:: 681-30	00			FAX: 681-30		L: www.eahhousing.o	rg
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
	tudio:							
	Bdrm:	6	1279	2.5x rent	674	1	3	
	Bdrm:	32	1524	2.5x rent	797	3	7	
Three		25	1750	2.5% Territ	1119		,	
Four	Bdrm:			ļ.	J	J		
RENT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES IN	CLUDED:		TOTA	L UNITS: 64
Based on 2019 M to Change AMI % - 30/50/60	TSP/VLI	Income Limits	Subject	Water/sewer/	trash		MINIMUM W ESTIMATE	
7.1111 70 00700700								JM WAIT STIMATE
AGE CRITERIA:							TO REMAIN ON W	
18+ Multi-Family F	Property			WAITL	IST FOR PARK	(ING:	CALL EVERY	(Months):
				PARKING INF		PET INF		PETS OK: NO
]				basis. Currer	an "As needed" nt drivers license	Notify m Assistar	anagement if have a nce animal	Service or
AN OWN RESI		PROPERTY:	YES	insurance, sa registration re		GENERA	AL INFO:	
ASSET LIMIT INF	O:			LEASE:			noking property - smo	
Depends on input	ed incom	е		1 year			re on the property, inc	
						Laundry	und/Totlot, Communit Room, Picnic Area, eed internet	
INCOME CRITER	IA:					"	: RHTF, LIHTC, CDE	RG NSP HOME
Maximum monthly annually	/ income	limits subject t	o change	Refrigerator, blinds	stove, rangehoo	d, HMMF	SPONSE IN 2021	ou, ivoi , flowie,
I 1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4220				
2-PERSONS MAXI	MUM MC	ONTHLY INCO	ME:	4820				

	Last Comp	lete Update:	11/24/2021			AREA:	Ewa Beach
PRO IECT NAME:	VILLAGES OF	MOVE KIT	DUACE	11		PROJECT TYPE:	
	91-1655 Pahika St.	INIOA E RU	PHASE				J,
ADDICESS.	91-1000 Fallika St.					PHONE: 681-300 FAX: 681-300	
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		FAX. 001-300	4
MANAGER	: Gary Iwasaki, Mgr; Ja Mercado, Admin Asst		ng Agent; Bet	•			0117 05 07475
APPLY TO	: EAH - Villages of Moa			91-1655 Pa Ewa Beach	anika St. n HI 96706		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						YES
APPLY PHONE	: 681-3000			FAX : 681-3004	EMAIL:	www.eahhousing.or	g
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:						
One E	Bdrm: 9	1222	2.5xrent		1	3	
Two E	Bdrm: 37	1457	2.5xrent		2	5	
Three E	3drm: 29	1671	2.5xrent		3	7	
Four B	Bdrm:]	YES
RENT INFO: RE	NT IS 30% OF INCOMI	≣: NO L	ITILITIES INC	CLUDED:		TOTA	L UNITS: 75
Max rent is around AMI % - 30/50/55			Vater/sewer/t			MINIMUM W	Į.
	TSP/VLI income limits					ESTIMATE ((Months): 12
	tlist is purged annually					MAXIMU LIST ES	
AGE CRITERIA:						TO REMAIN ON W	
18+		_	WAITL	IST FOR PARKING:	: PET INFO:		ETS OK: NO
		7	Assigned on a	an "As needed"	PET INFO.	· '	LTO OK. INO
	ASSET LIMITS:	li li	nsurance, saf				
AN OWN RESID	DENTIAL PROPERTY:		egistration re	quired	GENERAL	INFO:	
ASSET LIMIT INFO			EASE:		Playgroun Laundry R	d/Totlot, Community	Meeting Room,
Depends on input	ed income		l year		high spee		
					No Smoki	ng on Property	
INCOME CRITERI					Funding:	RHTF, LIHTC, CDB	G, HOME, HMMF
Maximum monthly annually	r income limits subject t	F	URNISHED: Refrigerator, s blinds	stove, rangehood,			
	IUM MONTHLY INCOM		620				

	Last	Comple	te Update:	3/5/2020			4554	. Ewa Beach
DDO IECT NAME.	VILLACES	OF	MONE KI		= 111		AREA PROJECT TYPE	
PROJECT NAME:	·		WOA'E KU	- PHASE	: 111			1
ADDRESS:	91-1655 Pahika	Street					PHONE: 681-30	000
CITY:	Ewa Beach		STATE: HI	ZIP:	9670	06	FAX:	
			·	,				
MANAGER	: Gary Iwasaki, I Mercado, Adm			sing Agent; Be	-	LY ADDRESS:		
APPLY TO	: EAH - Villages					655 Pahika Stre Beach, HI 9670		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:							YES
APPLY PHONE	: 681-3000				FAX: 681-3		IAIL: www.eahhousing.	org
				Minimum		MINIM	IUM MAXIMUM	
Unit	Type: Numb of UNI		RENT:	INCOME Required:	SQ F	Numh	per Number of	CAREGIVER Allowed:
S	tudio:		0					
One I	Bdrm: 4		1279	2.5x rent	674	1	3	
Two	Bdrm: 28		1524	2.5x rent		2	5	
Three I	3drm: 20		1750	2.5x rent	1119	3	7	
Four I	Bdrm:		0	<u> </u>				YES
RENT INFO: RE Based on 2019 M change AMI % - 30/50/60				UTILITIES IN Water/Sewer,			MINIMUM V ESTIMATE MAXIN	
AGE CRITERIA:							TO REMAIN ON	
18+ Multi-Family F	Property			WAITL	JST FOR PAR	KING:	CALL EVERY	(Months): 0
				PARKING IN		PETI		PETS OK: NO
]	ASSET LI	мітя: Г			an "As needed it drivers licens ifety check,	" Notify e, Assis	y management if have a stance animal	a Service or
AN OWN RESID				registered red	quired	GENE	ERAL INFO:	
ASSET LIMIT INF				LEASE:			Smoking property - smowhere on the property, in	
Depends on input	ed income					Play Laun	ground/Tot lot, Commundry Room, Picnic Area, speed internet	nity Meeting Room,
INCOME CRITER	IA:					Fund	' ding:RHTF, LIHTC, CDE	RG HOME HMME
Maximum monthly annually	r income limits su	ibject to	change	Refrigerator, blinds	stove, rangeho	od, Appli Dowi	ication: nload from website RESPONSE IN 2021	SS, TIONE, TINIVI
1-PERSON MAXIM				4220 4820				

		Last Comp	olete Update:	3/2/2020			AREA:	Kapolei
PROJECT NAME:	VILL	AS AT A'I	ELOA				PROJECT TYPE:	Family
ADDRESS:	91-1118	Namahoe St.	(Mailing addre	ss: 91-1130 Nam	nahoe St.)		PHONE: 674-42	45
CITY:	Kapolei		STATE: H	ZIP:	96707		FAX : 674-42	46
			ļ.	,				
MANAGER	t: Amano	da Mercado			APPLY AD 91-1130 Na Kapolei, HI	amahoe St.		OUT-OF-STATI APPLICATION
APPLY TO): Location	ons LLC						ACCEPTED:
APPLY ATTN	I: Afforda	able Housing [Dept.					
APPLY PHONE	: 674-42	245			FAX : 674-4246	EMAIL:	locationsrentals.co	m/affordable-
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	40	000		607			
	Bdrm:	19	929	-	637			
Three		32	1100		1068			
		20	1376		1.000			\
Four	Bdrm:						J.	YES
RENT INFO: RE Section 8 applicat income requireme Must be below 50' Minimum Income 1 bdrm: \$2182.50 2 bdrm: \$2567.50 AGE CRITERIA:	ions are ent. % & 60% Requirer -\$2322.5	exempt from the second	he minimum	UTILITIES IN Water and Se			MINIMUM W ESTIMATE MAXIMI LIST E: TO REMAIN ON V	(Months): 12 UM WAIT STIMATE VAITLIST
Head of househole	d must b	e 18 years or o	older	WAITL	LIST FOR PARKING:	_	CALL EVERY	
				PARKING INI	,	PET INFO	: '	PETS OK: NO
J		SSET LIMITS:		1 assigned pa	arking stall included			
AN OWN RESIDE		. PROPERTY:	NO	<u> </u>		GENERAL LIHTC Fu		
				LEASE:	month to month	Accepts S	•	
				year, men	nontri to montri	71 units fo	or 60%AMI	
INCOME CRITER	ΙΔ.					9 units fo	r 50% AMI	
60% AMI:1 persor	n \$50,640			FURNISHED:	:	Maximum AMI	Monthly Income be	elow based on 60%
\$65,100; 4ppl \$72 7ppl \$89,700; 8pp \$42,200; 2ppl \$48 5ppl \$65,100; 6pp \$79,550	ol \$95,460 3,200; 3pp	0 50% AMI:1 p pl \$54,250; 4 p	erson opl \$60,250;	Partly furnish appliances or			n: id from website om manager's offic	e
						NO RESP	PONSE IN 2021	
1-PERSON MAXIM	IOM MOI	NTHLY INCOM	ΛE:	4220				
2-PERSONS MAXI	INALINA NAC		ME.	4820				

Last Comple	te Update:	7/16/2020			AREA:	Kapolei
PROJECT NAME: VILLAS AT MAL	_U'OHAI			PI	ROJECT TYPE:	Family
ADDRESS: 91-1025 Kaiau Ave.				P	HONE: 674-060)1
CITY: Kapolei	STATE: HI	ZIP:	96707		FAX : 674-060	05
MANAGER: Ella Duarte			APPLY ADD	DRESS: etania St. #200, I	Honolulu.	OUT-OF-STATE
APPLY TO: Management Specialist	ts Co.		Hawaii 9681	·		APPLICATION ACCEPTED:
APPLY ATTN:						YES
APPLY PHONE : 943-9314		F	FAX: 946-0572	EMAIL: ms	schousing@hawa	aii.rr.com
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm: 55	960	2.25xrent	713			
Three Bdrm: 16	1200	2.25xrent	940			
Four Bdrm:						NO
RENT INFO: RENT IS 30% OF INCOME:	NO	UTILITIES INCLI	JDED:		TOTA	L UNITS: 71
Minimum income requirements waived with voucher. Applications available outside of t building		water, sewer			MINIMUM W ESTIMATE	(Months): 12
	Į.					JM WAIT STIMATE
AGE CRITERIA: Head of Household 18+				TC	REMAIN ON W	
riead of Household To-		WAITLIST :PARKING INFO	T FOR PARKING:	PET INFO:		PETS OK: NO
	and the second	Parking included		TET INTO.	<u> </u>	210 OK. NO
ASSET LIMITS:	NONE					
AN OWN RESIDENTIAL PROPERTY:	NO			GENERAL IN		
ASSET LIMIT INFO:		LEASE:			m, air conditionir hools and recrea	
		1 year		Application: Pick up outsi	de of building ne	ar entry door.
INCOME CRITERIA.				NO RESPON	ISE IN 2021	·
INCOME CRITERIA: 50% of AMI: 1 person \$33,550; 2 persons \$ persons \$43,150 Must be below 60% AMI 1 person: \$40,260; 2 persons: \$46,020 3 persons: \$51,780; 4 persons: \$57,480 5 persons: \$66,780; 6 persons: \$71,700 7 persons: \$76,680; 8 persons: \$81,600		FURNISHED: Partly furnished- appliances only	major			
1-PERSON MAXIMUM MONTHLY INCOME	:	3355				

		Last Comp	lete Update:	7/16/2020			AREA:	Liliha
ROJECT NAME:	WAE	NA APAR	TMENTS				PROJECT TYPE:	Family
ADDRESS:	1320 A	ala St.					PHONE: 550-04	40
CITY:	Honolu	lu	STATE: HI	ZIP:	96817		FAX : 525-68	11
MANAGER	R: Shery	l Oschin, on-site	e manager		APPLY AD			OUT-OF-STAT
APPLY TO) :				Honolulu, H			APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	: 550-0 ₋	440			FAX: 525-6811	EMAIL:		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:							
One I	Bdrm:	60	1680	2.5x rent	543			
Two I	Bdrm:	196	1840	2.5x rent	745			
Three I	Bdrm:	157	2040	2.5x rent	823			
Four I	Bdrm:	55	2320	2.5x rent	1046			
RENT INFO: RE Rent subject to ch market value. The 2/13/15	nange on	a daily basis d	ue to	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMI	(Months): 0
AGE CRITERIA:				Įt.				STIMATE 0
Head of Househol	ld 18+			\A/A IT!			TO REMAIN ON V CALL EVERY	
				PARKING INFO		PET INFO	: I	PETS OK: NO
	А	SSET LIMITS:						
AN OWN RESID						GENERAL	_INFO:	
ASSET LIMIT INF	O:			LEASE:		NO RESF	PONSE IN 2021	
				6 or 12 month	lease			
NCOME CRITER	IA:							
Max income limits	i - 140%	AMI		FURNISHED:				
-PERSON MAXIN	им мо	NTHLY INCOM	IE:	7828]		
-PERSONS MAXI	IMUM M	ONTHLY INCO	ME:	8948				

		Last Comp	olete Update:	12/15/2021			AREA:	Wahiawa
PROJECT NAME:	WAH	IAWA TE	RRACE (H	IPHA-cen)	- NOT ACCEP	TIN	PROJECT TYPE:	Family
ADDRESS:							PHONE: 622-636	60
OITY	<u> </u>						FAX: 622-636	
CITY:	Wahiaw	a	STATE: HI	ZIP:	96786		•	
MANAGER	: Jimary	Quinones			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	: HPHA				Honolulu, HI		CATIONS	APPLICATION ACCEPTED:
			PPLICATIONS		NOT ACCE	TINO ALL LI	CATIONS	NO
APPLY ATTN			fice PPLICATIONS					
APPLY PHONE	: 832-59	61			FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
					-			
Unit	Type:	Number	DENT	Minimum INCOME	CO FT.	MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
St	tudio:							
One E	Bdrm:	12	0		547	1	4	YES
Two E	Bdrm:	16	0		691	2	6	YES
Three E	Bdrm:	24	0		936	3	8	YES
Four E	Bdrm:	8	0		1200	4	10	YES
RENT INFO: RE Minimum Rent: \$0	for Fede	eral Low Incom		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W. ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:							TO REMAIN ON W	00
Head of household	d must be	e 18 years or o	older	WAITL	IST FOR PARKING:		CALL EVERY	(Months): 12
				PARKING INF	O:	PET INFO:		ETS OK: YES
]	AS	SSET LIMITS:	NONE			the catego	nimals ok, but only or ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INFO		hu		LEASE:			NCES: Domestic V	
Carmot own a nou	30 011 00	iiiu		1 year		displaced.		,
						Funding: F	Fed Low Inc Pub Hs	ing 100%
INCOME CRITERI	IA:						ions must be 3 yrs	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$53 sons - \$68,500 sons - \$82,200	D; D;	FURNISHED: Partly furnishe appliances on		crystal me	thamphetamine or	sex offender
1-PERSON MAXIM				4570		er.		

	Last Comple	ete Update:	12/15/2021			AREA:	Waianae
PROJECT NAME:	WAIMAHA/SUN	FLOWER	(HPHA-le	e) - CLOSED	-	PROJECT TYPE:	Family
	85-186 McArthur St.					PHONE: 697-717	1
						FAX : 697-717	
CITY:	Waianae	STATE: HI	ZIP:	96792			
MANAGER	: Mandy Miyamoto			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	: HPHA			Honolulu, HI		ATIONS	APPLICATION
				NOT ACCEP	TING APPLICA	ATIONS	ACCEPTED: NO
APPLY ATTN	: Oahu applications office	е					
APPLY PHONE	: 832-5961			FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:						
One I	Bdrm: 52	0		513	1	4	YES
Two I	Bdrm: 46	0		650	2	6	YES
Three I	Bdrm: 32	0		991	3	8	YES
Four I	Bdrm:						
Minimum Rent: \$5 Security Deposit is	NT IS 30% OF INCOME: 50 for Federal Low Income s equal to rent amount ED 8/2/2016*****	e projects	UTILITIES INC Water and allo	CLUDED: wance for electricity		MINIMUM WA ESTIMATE (MAXIMU	(Months): 36
AGE CRITERIA:					Т	O REMAIN ON W	
Head of househole	d must be 18 years or old			ST FOR PARKING:		CALL EVERY	,
		İ	PARKING INF Included	0:	PET INFO:		ETS OK: YES
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				" GENERAL II	NFO:	
ASSET LIMIT INF	O: "		LEASE:			ICES: Domestic V	
			1 year		displaced.	i transitional shelle	ers, involuntary
					Funding: Fe	ed Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:	,				ns must be 3 yrs a	
ncome Eligibility =			FURNISHED:		crystal meth	namphetamine or s	sex offender
2 persons - \$60,90 4 persons - \$76,10	00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	.50,	Partly furnishe appliances on				
1-PERSON MAXIN	IUM MONTHLY INCOME	:	4570		-		
2-PERSONS MAXI	MUM MONTHLY INCOM	F:	5220				

		Last Comp	lete Update:	7/16/2020				ARE	:A: Waimanalo	
PROJECT NAME:	WAII	MANALO A	APARTME	NTS				PROJECT TYP	E: Family	
ADDRESS:	41-545	Hihimanu St.						PHONE: 259-	5649	
CITY:	Waimai	nalo	STATE: HI	ZIP:	96	795		FAX : 259-	9705	
		Vasham, Resid analo Apartmer	o o		41	PLY ADDR 545 Hihima waii 96795	ESS: nu Street, V	Vaimanalo,	OUT-OF-S	ΓΙΟΝ
APPLY ATTN		a.i.a.o 7 iparii.i.o.							ACCEPT YES	
APPLY PHONE		649			FAX : 259	9705		waimanalo2@ha waimanaloaparti		
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ	_{ET} .	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	₹
	tudio: Bdrm:	37	1177	2.5xrent	57	6		3	YES	_
Two	Bdrm:	28	1413	2.5xrent	72	0		5	YES	Ī
Three	Bdrm:	8	1632	2.5xrent	86	4		7	YES	
Four	Bdrm:	2	1821	2.5x rent	11	34		9	YES	
RENT INFO: RE	:NT IS 30	0% OF INCOM	E: NO	UTILITIES IN	CLUDED:			TC	TAL UNITS: 80	_
Rent range - 1 bdrm - \$1093 - \$ 2 bdrm - \$1312 - \$				Electricity and	d water			_	WAIT LIST ΓΕ (Months):	
3 bdrm - \$1516 - \$ 4 bdrm - \$1691 - \$									MUM WAIT ESTIMATE	
AGE CRITERIA:		10						TO REMAIN ON	N WAITLIST RY (Months):	
Head of househol	d must b	e 18 years or o	lder		IST FOR PA	RKING:				
				PARKING INF			PET INFO:		PETS OK: NO	_
Į.	A	SSET LIMITS:	NONE							
AN OWN RESI	DENTIAL	PROPERTY:	YES				GENERAL	INFO:		
ASSET LIMIT INF	O:			LEASE:			are filled o	n a first-come, f		es:
				6 months				area, on bus line waimanaloapar		
INCOME CRITER	10.			<u> </u>			'	nt by Cambridge		
Maximum Annual 2 persons - \$55,9 4 persons - \$69,9 persons - \$81,180 persons - \$92,400	Income: 80; 3 per 60; 5 per 0; 7 perso	sons - \$63,000 son - \$75,600;	,	FURNISHED: Partly furnish appliances or	edmajor		Application Ask mana Send requ envelope Pick up fro	n: gement to mail i est with self-ado om manager's of	t Iressed stamped	
I 1-PERSON MAXIN	иим мо	NTHLY INCOM	IE:	4085			Į.			
2-PERSONS MAX	IMUM M	ONTHLY INCO	ME:	4665						

	Last Comp	lete Update:	11/24/2021			AREA:	Waimanalo
ROJECT NAME:	Waimanalo En	nergency	Shelter; pre	viously We	inber	PROJECT TYPE:	Emergency
ADDRESS:	41-490 Saddle City Rd					PHONE: 204-098	32
CITY:	 Waimanalo	STATE: HI	ZIP:	96795		FAX : 744-06	6
MANAGER	t: Zabrina Spencer: Site	Manager		APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO) :						APPLICATION ACCEPTED: NO
APPLY ATTN	l:				EMAIL:	www.kahumana.org	
APPLY PHONE	: : 204-0982		F	FAX: 744-0616	LWAIL.	www.kariamana.org	3
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio: 8			180	2	4	
One	Bdrm: 8			420	3	4	
Two	Bdrm: 7			550	3	6	
Three I	Bdrm: 7			950	5	10	
Four	Bdrm:						NO
RENT INFO: RE Emergency Shelte	ENT IS 30% OF INCOME	E: YES	All utilities	JDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
			WAITLIST PARKING INFO:	FOR PARKING:	PET INFO		PETS OK: NO
AN OWN RESI	ASSET LIMITS:	NO			GENERAL	_ INFO:	
ASSET LIMIT INF			LEASE:		Must part	icipate in programs	as determined by
			90 Days		Must follo	er. nd on site. ow Program Rules. villing to work if not o	disabled.
NCOME CRITER	IA:		FURNISHED:				
			Stove, refrigerate inflatable mattres				
-PERSON MAYIN	IUM MONTHLY INCOM	F·					

	Last Comple	te 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: 233-376	66
						FAX: 233-376	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		1200	
MANAGER	: Roberta Kahele			APPLY AD	DDRESS:		OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING APF	PLICATIONS		Honolulu, I NOT ACCI	HI 96817 EPTING APPLIC	CATIONS	APPLICATION ACCEPTED: NO
APPLY ATTN	: Oahu applications office NOT ACCEPTING APP				EMAIL:	nphaishereforyou.o	
APPLY PHONE	: 832-5961			FAX : 832-3461			.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	Bdrm: 19	0		877	2	6	YES
Three E	Bdrm: 18	0		1017	3	8	YES
Four E	Bdrm: 4	0		1171	4	10	YES
	NT IS 30% OF INCOME: 0 for Federal Low Income 8/2/2016*****		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity	/	MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:						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
	ASSET LIMITS:	NONE			the categor	imals ok, but only or ries listed below: nder 25 lbs) or _cat	
	DENTIAL PROPERTY:	VO			GENERAL		
Cannot own a hou			LEASE:		victims; ho Displaced.	NCES:(A) domest meless in transitior (B) substandard h (C) others = indefi	nal shelter; invol. nsing; rent >50%
INCOME CRITERI	IA·				Funding: F	ed Low Inc Pub Hs	sing 100%
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 person - \$53,2 20; 3 persons - \$68,500; 20; 5 persons - \$82,200; 20; 7 persons - \$94,350;	50;	FURNISHED: Partly furnishe appliances on		All convicti	gibility=80% of AM ons must be 3 yrs thamphetamine or	ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		Į.		
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5220				

	Last Comp	lete Update:	1/5/2022			AREA:	Waipahu
ROJECT NAME:	WAIPAHU HAL	L ELDERL	Y		P	ROJECT TYPE:	Elderly
ADDRESS:	94-1060 Waipahu St.				P	HONE: 671-38	01
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX : 680-04	56
	R: Collette Sanchez, Ser Kelsey Chalmers, Ass D: Cambridge Managem	sistant Community		APPLY AD Waipahu H 94-1060 W Waipahu, F	all aipahu St., Office		OUT-OF-STATI APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE			F	FAX: 680-0456	EMAIL: wa	aipahu@cmiweb	.net
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 72	0		636	1	3	YES
	Bdrm:						NO
RENT INFO: RE Max rent is \$1465 AGE CRITERIA:	ENT IS 30% OF INCOME		JTILITIES INCLU		To	MINIMUM W ESTIMATE MAXIM	(Months): 18 UM WAIT STIMATE 24
Head of househol disabled. Other n	ld must be 62 years or of nembers of the househo ildren, siblings, or friends	old may be s 18 years F	WAITLIST PARKING INFO: Parking included		PET INFO:	CALL EVERY	
AN OWN DESI	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL IN	IFO:	
ASSET LIMIT INF			EASE: 1 year, then mor	nth-to-month	Pavilion cent Bbq Area & I Recreation ro A gated com On-site mana Guest interco	er & social activush landscapingoom with tv munity on busliragement om system	1
	RIA: income: 1 person - \$40, 120; 3 persons - \$51,780		FURNISHED: Partly furnished- appliances only, floor		Catholic Cha Application: Request by 6 Ask Manage	on to Shopping a crities Hawai'l email waipahu@ ment to mail it Manager's offic	

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	La	st Comple	ete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIPAH	U I (HF	PHA-lee) -	NOT ACC	EPTING APP	S	PROJECT TYPE:	Family
	94-111 Pupuc						PHONE: 483-255	50
							FAX: 483-255	52
CITY:	Waipahu		STATE: HI	ZIP:	96797		,	
MANAGER	: Marcus Asar	mi			APPLY ADI			
APPLY TO		TING AP	PLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN			e PLICATIONS					NO
APPLY PHONE	: 832-5961				FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:							
	3drm:	12			050			YES
Three E		6	0		650 817	3	8	YES
Four E								
RENT INFO: RE Minimum Rent: \$0 ***********************************	for Federal Lo			UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:							TO REMAIN ON W	/AITLIST
Head of household	d must be 18 y	ears or old	der		IST FOR PARKING:		CALL EVERY	
]	ASSET	LIMITS:	NONE	PARKING INF	O:	the catego	imals ok, but only or ries listed below: nder 25 lbs) or cat	
AN OWN RESID	ENTIAL PRO	PERTY:	NO			GENERAL	INFO:	
Cannot own a hou				LEASE:			NCES: Domestic Vintering in transitional shelter	
						'	ed Low Inc Pub Hs	sing 100%
INCOME CRITERI	A:			,			ions must be 3 yrs	
ncome Eligibility = Maximum Annual 2 persons - \$60,904 persons - \$76,106 persons - \$88,308 persons - \$100,4	Income: 1 pers 00; 3 persons - 00; 5 persons - 00; 7 persons -	\$68,500; \$82,200;	250;	FURNISHED: Partly furnishe appliances on		crystal me	thamphetamine or	sex offender
1-PERSON MAXIM				4570		1		

		Last Comp	olete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIP	AHU II (I	HPHA-lee)	- NOT ACC	EPTING APP	S	PROJECT TYPE:	Family
ADDRESS:	,						PHONE: 483-255	50
OITY	<u> </u>		T OTATE TO				FAX: 483-255	52
CITY:	Waipahı	u	STATE: HI	ZIP:	96797		,	
MANAGER	: Marcus	s Asami			APPLY ADD			OUT-OF-STATE
APPLY TO	• НРНА				Honolulu, HI	96817	A.T.O.LO	APPLICATION
/ / / / / /		CCEPTING A	PPLICATIONS		NOT ACCE	PTING APPLIC	CATIONS	ACCEPTED: NO
APPLY ATTN			fice PPLICATIONS					140
APPLY PHONE	_		. I LIO/THOTO		FAX: 832-3461	EMAIL:	nphaishereforyou.o	rg
AFFET FRONE	. 002 00	01			FAX. 032 3401			
Unit	Type:	Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
St	tudio:							
One E	3drm:							
Two E	Bdrm:	16	0		635	2	6	YES
Three E	3drm:	4	0		822	3	8	YES
Four E	Bdrm:							
RENT INFO: RE Minimum Rent: \$0 ***********************************	for Fede	eral Low Incon		UTILITIES INC			MINIMUM WA ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:							TO REMAIN ON W	į 00
Head of household	d must be	e 18 years or o	older	WAITI	IST FOR PARKING:		CALL EVERY	
				PARKING INF		PET INFO:	P	ETS OK: YES
]	AS	SSET LIMITS:	NONE	Included		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 INFO		hu		LEASE:			NCES: Domestic Vin transitional shelte	
Carriot own a nou	ise on Oa	ariu		1 year		displaced.		,,
						Funding: F	ed Low Inc Pub Hs	ing 100%
INCOME CRITERI	IA:			•			ons must be 3 yrs	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$53 sons - \$68,500 sons - \$82,200	O; O;	FURNISHED: Partly furnishe appliances on		crystal met	thamphetamine or s	sex offender
1-PERSON MAXIM				4570		P		

	Last Comp	lete Update:	7/16/2020			AREA	.: Waipahu
PROJECT NAME: WAIF	PAHU TOV	WERS				PROJECT TYPE	Family
ADDRESS : 94-337	Pupumomi St.					PHONE: 753-94	140
CITY: Waipah	iu	STATE: HI	ZIP:	96797		FAX:	
MANAGER: Sonja				APPLY AD	DRESS: lae Avenue, Suit	en 200	OUT-OF-STATE
APPLY TO: Mark [Development, Ir	nc.		Honolulu, I		.e 200	APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 735-90	099			FAX: (781)295-34		nttps://www.mdiha	awaii.com/waipahutov
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	2	0		482	1	4	
Two Bdrm:	62	0	-	684	2	5	YES
Three Bdrm:	, v=			30.			
Four Bdrm:							YES
section 8 bldg			Electricity and	water		MAXIM	(Months): 12
AGE CRITERIA:		Į					STIMATE 36
Head of household must b	e 18 years or o	lder	WAITLI	ST FOR PARKING:		O REMAIN ON CALL EVER	
			PARKING INFO	O:	PET INFO:		PETS OK: NO
A	SSET LIMITS:		Parking includ There is a cha stalls.	ed rge for additional			
AN OWN RESIDENTIAL ASSET LIMIT INFO:	PROPERTY:	NO			GENERAL I		
ASSET LIMIT INFO.			LEASE: 1 year		Laundry Ro	Recreation Area, oom	, Playground,
			i yeai		Funding: P	roject based Sec	8
INCOME CRITERIA:					Credit & Cr	iminal checks	
Maximum Annual Income: 2 persons - \$41,200; 3 per 4 persons - \$51,500; 5 per	sons - \$46,350	; ;	FURNISHED: Partly furnishe appliances onl		Application Download f affordableh applications	updates via webs .mdihawaii.com/ : rom website ousingonline.con s/waipahu-tower. m manager's office	waipahutower n/ pdf
-PERSON MAXIMUM MO	NTHLY INCOM	E:	3004		P		
2-PERSONS MAXIMUM M	ONTHLY INCO	ME:	3433				

ADDRESS: 2734 S. King Street CITY: Honolulu					ROJECT TYPI	E: Singles or Coupl
CITY: Honolulu						
,	STATE: HI				PHONE: 946-6	
MANACED: Morette Ferririt.		ZIP:	96826		FAX : 973-0	000
MANAGER: Maretta Espiritu			APPLY AD	DRESS: m case manager		OUT-OF-STA
APPLY TO: Housing Solutions,	Inc.		rtelena ne	m oase manager		APPLICATIO ACCEPTED
APPLY ATTN: Maretta Espiritu						NO
APPLY PHONE : 946-6953		F/	AX: 973-0605	EMAIL: m	aretta@hsiserv	ices.net
Unit Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 60	1095		266	1	2	
One Bdrm:						
Two Bdrm:						
Three Bdrm:						
Four Bdrm:						
ecurity Deposit \$1095 ection 8 accepted helter + Care program other housing vouchers		All utilities include	ed		MINIMUM ESTIMAT MAXIN	E (Months):
GE CRITERIA:		į.		т	O REMAIN ON	ESTIMATE WAITLIST
ead of household must be 18 years o	r older	WAITHIST	FOR PARKING:	1,	CALL EVER	
		PARKING INFO:	YES	PET INFO:		PETS OK: YES
		\$40/month		Under 25 po	unds; limit 1 pe	r unit
ASSET LIMIT						
AN OWN RESIDENTIAL PROPERTY SSET LIMIT INFO:	Y: NO			GENERAL IN Funding:	NFO:	
		LEASE: Month to month				Section 8 100%
				Application:		
ICOME CRITERIA:					ement to mail it st with self-addr	essed stamped
OOME ORTERIA.		FURNISHED:		envelope Pick up from	n manager's offi	ice
		No carpet, full siz microwave, and c cabinet, kitchenet	counter top	Email reque	st to maretta@	hsiservices.net
PERSON MAXIMUM MONTHLY INCO	DME:	4230]		

	Last Comp	lete Update:	7/16/2020			AREA:	Lanakila
PROJECT NAME:	WEINBERG SI	ENIOR RE	SIDENCE	AT MALUHIA		PROJECT TYPE:	Elderly
ADDRESS:	1111 Hala Dr.					PHONE: 842-108	32
CITY	Honolulu	STATE: HI	ZIP:	96817		FAX: 843-015	57
OII I.	Honolulu	STATE: HI	2	90017			
MANAGER	R: Canary McClinton, re-	sident manager			Place, Suite 10	3, Honolulu,	OUT-OF-STATE
APPLY TO	D: Bob Tanaka, Inc.			Hawaii 9682	20		APPLICATION ACCEPTED: YES
APPLY ATTN	l :						120
APPLY PHONE	E: 949-4111			FAX: 949-7211	EMAIL:		
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:						YES
	Bdrm : 39	0		400+	1	3	TES
	Bdrm:						
Three							
Four	Bdrm:		<u> </u>				
RENT INFO: RE	ENT IS 30% OF INCOME	: YFS	UTILITIES INC	CLUDED:		TOTA	L UNITS: 39
Preference is no le	onger given to applicant	s who are	Water, \$81 ut			MINIMUM W	
living eg: eating, d	with at least 3 activities dressing, shopping, etc.)	Minimum				ESTIMATE	
rent is \$25. Depo (whichever is high	esit equal to 1 months re ner)	nt or \$50					JM WAIT STIMATE 36
AGE CRITERIA:						TO REMAIN ON W	
	d and co-tenants must be application. Caregiver r			IST FOR PARKING:		CALL EVERY	
			PARKING INF	ded but limited	PET INFO:	F	PETS OK: NO
1	ASSET LIMITS:	NONE	arking includ	ded but limited			
AN OWN RESI	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF	O: wn a majority interest in	recidential	LEASE:			ower and closet, w	
real estate.	wir a majority interest in	residential	1 year		shoot and lanai areas allowed wi	laundry room on ea s, storage lockers. (th MD letter; can we there's other care	ach floor. Covered Caregivers are ork outside home
INCOME CRITER					site manag	ger, interior landsca	aped courtyard.
(Project follows H	THAN 50% AMI to new HUD guidelines UD income limits.) vided are based on 2021	HUD			Funding: Fun	HUD PRAC 202 tition to Shopping a harities Hawaii ONSE IN 2021	
1-PERSON MAXIM	NUM MONTHLY INCOM	E:	3525		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	4029				

		Last Comp	lete Update:	11/24/2021			AREA:	Ewa
PROJECT NAME:	WES	T LOCH F	LDERLY	VILLAGE			PROJECT TYPE:	Elderly
ADDRESS:				VILL/ (OL			PHONE: 681-056	<u> </u>
1		Tromon ru.					FAX: 681-414	•
CITY:	Ewa Bea	ach	STATE: H	ZIP:	96706		17511 001 411	
MANAGER APPLY TO	Sharon : Locatio	Reynon-Myer	ident Manager s - Project Adn		APPLY AD 91-1472 Re Ewa Beach			OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE		-	оранитотк		FAX: 681-4140	EMAIL:	locationsrentals.cor rentals.aspx (click o	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Si	tudio:	90	865	2x rent	556	1	2	YES
One E	Bdrm:	60	940	2x rent	686	1	3	YES
Two E	Bdrm:							
Three E	Bdrm:							
Four E	Bdrm:							YES
RENT INFO: RE Studio: \$865 (full r Limited number of check with manag Deposit=\$865 stud Weitlist purged ov	rent). On subsidie ement co dio / \$940	e Bdrm: \$940 s available (ma impany.) One bdrm	ax of \$170)	UTILITIES INC Gas (for stove water	CLUDED: and water heater) a	nd	MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	
All residents must be 55+. Handicap age requirement.	be 62 ye or disab	ars or older, s _i led persons ne	pouse must eed to meet	WAITL	IST FOR PARKING: O: YES	PET INFO	CALL EVERY	(Months): 4 PETS OK: YES
	۸۵	SSET LIMITS:	VEC		There parking stalls.		ls, fish, or 1 dog und ngmt & vets "clean b	
AN OWN RESID				first serve and		GENERAL	INFO:	
ASSET LIMIT INFO				LEASE:		Caregiver	s are allowed with M	
only if income fron income. Rental unit must b		• • •	over	1 year		Funding: Asst Prgn Recreatio	earate bedroom, with Participating in the 0 n and Sec. 8 and Re n hall with tv, 24/7 S Coordinator; Transp	City Housing Rntl ent Supplmnt Prgm Security; Resident
INCOME CRITERI							available through C pened 1993; no elev	
Maximum Annual 1 person - \$50,640 2 persons - \$57,84 *60% AMI	0;			Partly furnishe appliances on stove, 1 bdrm fan		walk-up, l		
1-PERSON MAXIM	IUM MON	ITHLY INCOM	IE:	4220				

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	Last Compl	ete Update:	7/16/2020			AREA:	Salt Lake
PROJECT NAME:	WESTLAKE AF	PARTMEN	ΓS			PROJECT TYPE:	Family
	3139 Ala Ilima St. Honolulu	STATE: HI	ZIP:	96818		PHONE: 839-202 FAX: 834-710	
	: Dana Montero, Reside : Hawaiian Properties L	-		APPLY ADD 1165 Bethel Honolulu, HI	St., 2nd Fl.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE				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:						
Two	Bdrm: 96	0		872	3	6	
	Bdrm:						
RENT INFO: RE section 8 (project	NT IS 30% OF INCOME based)	YES	UTILITIES INCL	.UDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA: Head of househole	d must be 18 years or ol		PARKING INFO		PET INFO	TO REMAIN ON W	/AITLIST
AN OWN RESIDE	ASSET LIMITS: DENTIAL PROPERTY: O:		\$40 per stall; m	ax 2 stalls	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 - \$67,69	00		FURNISHED:				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	7/16/2020					Wahiawa
DDO IECT NAME.		·		<u>-c</u>			AREA: PROJECT TYPE:	
	WHITMORE CI	RCLE APAR	CIMENI	5				
ADDRESS:	111 N Circle Makai St						PHONE: 753-847	` '
CITY:	Wahiawa	STATE: HI	ZIP:		96786		FAX: eFax: 32	23-648-8212
MANAGER	: Laura Lynn Daniels - I	Property Manager			APPLY ADD	RESS: e Ave. #200, I	donolulu	OUT-OF-STATE
APPLY TO	: Mark Development, In	C.,			Hawaii 96816		ionoidia,	APPLICATION ACCEPTED:
APPLY ATTN	: Mark Development - 7	35-9099						YES
APPLY PHONE	: 753-8474			FAX:	(781)295-3427		nttp://www.mdihawa aurad.mdihawaiic	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 40	0			516	1	2	YES
	Bdrm: 4	0			645	1	3	YES
Three I					040			
Four I	Bdrm:							YES
, ,								,
RENT INFO: RE	NT IS 30% OF INCOME		TILITIES INC ater and ga			_	TOTA	L UNITS: 43
\$1,155 - 1 bedroom					sible for electri	С	MINIMUM WARE	-
ψ1,333 - 2 beαιοοί							MAXIMU	P.
		Į.						STIMATE 24
AGE CRITERIA: Head of household	d must be 62 years or ol	der, or					TO REMAIN ON W CALL EVERY	
disabled. Other m	nembers of the househo I children if head of hous	ld can be	WAITL ARKING INF		R PARKING:	PET INFO:	Р	ETS OK: YES
legal guardian.			arking includ		1.07.	Pets are al	lowed with restriction	
	ASSET LIMITS:							
	DENTIAL PROPERTY:	YES				GENERAL		
ASSET LIMIT INF	O:		EASE:			outside ho	are allowed with Mme. Caregiver inco	
		1	year			eligibility. 3 handicap	ped accessable un	its. Built in 1990
<u> </u>						Pictures av	/ailable on shiconsulting.com/v	whitmore.html
INCOME CRITER						Smoke Fre	ee; Coin Operated al Room equipped	laundry facility
50% of Honolulu N	Median Income	F	JRNISHED: Partly furnishing ppliances or	edmajo	or	television a Educationa Open gaze Application Download	and computers with al and social activiti bo and outside lou	printer es nge area n
1-PERSON MAXIM	IUM MONTHLY INCOM	E: 3	004			p.		
2-PERSONS MAXI	MUM MONTHLY INCOI	ME: 3	433					

		Last Compl	ete Update:	11/24/2021			AREA	Makiki
PROJECT NAME:	WILE	DER VISTA	1				PROJECT TYPE	: Family
ADDRESS:	1618 P	unahou Street					PHONE: 947-48	346
CITY:	Honolu	lu	STATE: HI	ZIP:	96822		FAX : 956-14	146
MANAGER	R: Mark `	Yacubovich, Res	sident Manager		APPLY AI			OUT-OF-STATE
APPLY TO	: Locati	ons			Honolulu,	HI 96823		APPLICATION ACCEPTED:
APPLY ATTN	l : Prope	rty Management	Division					YES
APPLY PHONE	≣: 738-3′	100			FAX: 735-1978	EMAIL:	http://www.location ble-rentals.aspx	nsrentals.com/afforda
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:		0.15					
	Bdrm:	48	1190	2.5x rent	525			
Three		40	1190	2.5x rent	600			
	Bdrm:							YES
RENT INFO: RE LIHTC property Section 8 certifica gross income requ	ate holde	rs need not mee	-	Water & Sewe			MINIMUM V ESTIMATE MAXIM	UM WAIT
				Į.				STIMATE 60
AGE CRITERIA: Head of househol	d must b	e 18 years or ol	der	\A/A T			TO REMAIN ON V	
		·		PARKING INF	IST FOR PARKING O: NO	: PET INFO) <u>:</u>	PETS OK: NO
				61 parking sta				
	Α	SSET LIMITS:	NONE			J		
AN OWN RESII		PROPERTY:	YES			GENERAL	INFO:	
All income from a eligibility.		verified to deterr	nine	LEASE: 6 months; the	n month-to-month	bathroom units	has linen closet ar	
I INCOME CRITER	IA:			,				
Food stamps according and according and according and according and according accordin	rson \$26	5,460, 2 persons	\$30,240	FURNISHED: Partly furnishe appliances on				
 1-PERSON MAXIN	иим мо	NTHLY INCOM	E:	3517				
2-PERSONS MAX	IMUM M	ONTHLY INCOM	ИЕ :	4017				

	Last Comp	lete Update:	7/16/2020			AREA:	Wahiawa		
PROJECT NAME:	WILIKINA PAR	K				PROJECT TYPE:	Elderly		
ADDRESS:	298 Wilikina Dr.					PHONE: 622-612	25		
CITY:) Wahiawa	STATE: HI	ZIP:	96786		FAX : 622-612	27		
MANAGER	t: Debra Fong			APPLY ADI	DRESS:		OUT-OF-STATE		
APPLY TO	: Wilikina Park Apartme	ents					APPLICATION ACCEPTED:		
APPLY ATTN	l:						YES		
APPLY PHONE	i: 622-6125			FAX: 622-6127	EMAIL:	wilikinapark@sand	alwoodmgt.com		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:		
	tudio: 45	800	2xrent	479	1	2			
	Bdrm: 19	875	2xrent	627	1	2	YES		
	Bdrm:								
Three I									
Four I	Bdrm:			J	J		NO		
Market Rents: stud Longer waits for of At move in: must p	NT IS 30% OF INCOME dio - \$800, one bdrm - \$ ne bedroom. pay ONE full month's re t . Not prorate 1st mont	875.	UTILITIES INCI Water, trash an			MINIMUM W ESTIMATE MAXIMU			
AGE CRITERIA:						TO REMAIN ON W			
18+, roommate ca	at be 55 or disabled; spo an be 55 or disabled. Ca	aregiver		ST FOR PARKING:					
allowed over 18yrs	s old. Children under 18	3 allowed.					PET INFO: PETS OK: YES w/ Birds, fish, and small dogs OK with doctor's		
	ASSET LIMITS:	NONE	is included		note.	,			
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:			
ASSET LIMIT INF			LEASE:		Opened 1		DDO		
			1 year		clubhouse maintenar	CCH shopping van e, trash chute on evo nce person lives on pped units (3 for mo	ery floor, site.		
INCOME CRITER	IA:				Funding: L	_ow Income Housin	g Tax Credit &		
MAXIMUM income: 1 person - \$43,980 2 people - \$50,220		FURNISHED: Partly furnished appliances only Bathtubs in all on ground floor	y. Carpet. units. No units		Rental Assistance Program NO RESPONSE IN 2021				
1-PERSON MAXIM	MUM MONTHLY INCOM	E:	3665						

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		Last Comp	lete Update:	11/24/2021			AREA:	Chinatown
ROJECT NAME:	WINS	STON HAL	.E				PROJECT TYPE:	Family
ADDRESS:	1055 Ri	iver St.					PHONE: 744-130	07
CITY:	Honolul	lu	STATE: HI	ZIP:	96817		FAX: 744-130	08
MANAGER	: Justin	Gonsalves, Site	e Manager		APPLY ADD 1055 River S			OUT-OF-STA
APPLY TO	: Hawai	i Affordable Pro	perties Ltd.		Honolulu, HI	96817		APPLICATIO ACCEPTEI
APPLY ATTN	: Manag	ger						
APPLY PHONE	: 744-13	307			FAX : 744-1308	EMAIL:	None	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:	97	850	2x Rent	310	1	2	YES
	3drm:							
	3drm:							
Three E								
Four B	sarm:						J	NO
RENT INFO: RE Timely reponses to required				JTILITIES INC Gas, electricit			MINIMUM W ESTIMATE MAXIMU	(Months):
AGE CRITERIA:			Į,				TO REMAIN ON W	AITUST
Head of household	d must b	e 18 years or o	lder	WAITI	IST FOR PARKING:		CALL EVERY	
			1	PARKING INF		PET INFO	; F	PETS OK: NO
				Parking not a	vailable			
AN OWN RESID		SSET LIMITS:				J GENERAL	INFO:	
AN OWN RESIDENTIAL PROPERTY: YES ASSET LIMIT INFO:			_EASE:		Funding:			
				1 year				
NCOME CRITERI	IA·							
Maximum Annual 1 person - \$52,900 2 persons - \$60,48	Income: D;			FURNISHED: Partly furnisheallpiances onl				
-PERSON MAXIM	IUM MO	NTHLY INCOM	E: .	4220		<u> </u>		

		Last Comp	lete Update:	3/2/2020					AREA:	Ala Moana
ROJECT NAME:	WISTE	RIA VIS	TA					PROJECT	TYPE:	Elderly
ADDRESS:	1239 South	King St.						PHONE:	597-896	3
CITY:	Honolulu		STATE: HI	ZIP:		96814		FAX:	589-289	97
MANAGER	: Luana Ho	li, Resident	Manager			APPLY AE				OUT-OF-STAT
APPLY TO:	: Locations					Honolulu, I	HI 96823			APPLICATIO ACCEPTED
APPLY ATTN	: Property N	Managemen	t Division							YES
APPLY PHONE	: 597-8963				FAX:	589-2897	EMAIL:	http://www. ble-rentals.		srentals.com/affor
		lumber f UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXII Numb Peo	er of	CAREGIVER Allowed:
One E		91	969	2xrent		384				YES
Two E										
Four E										YES
Section 8 certificat gross income requ		eed not mee	et the min	Water & Sewe	er			ES1	ΓΙΜΑΤΕ ΜΑΧΙΜ L	AIT LIST (Months): JM WAIT STIMATE
AGE CRITERIA:								TO REMAI	IN ON W	/AITLIST
All residents must	be 62 or old	der				PARKING	_			(Months):
				PARKING INF \$40/ month; 3			PET INFO	:	F	PETS OK: NO
		ET LIMITS:								
AN OWN RESID ASSET LIMIT INFO		ROPERTY:					GENERAL Air condit		Washe	r/dryer available.
				LEASE: 1 Year			worker av	ailable on s gency call s	ite 1x pe	CCH social r week. On bus
NCOME CRITERI	A:							LIHTC - 50%	% AMI, F	RHTF
Maximum annual income 50% AMI: 1 person - \$42,200 2 persons - \$48,200			1	FURNISHED: Partly furnishe appliances on	lly		Catholic (Application Download	Transportation to Shopping available Catholic Charities Hawai'l Applications: Download from locationsrentals.com Pick up form Locations main office		ıls.com
-PERSON MAXIM	UM MONTH	HLY INCOM	E: :	3516						