Last Complete	Update: 1/21/2022	AREA: Makiki
PROJECT NAME: 1506 P'IKOI APA	RTMENTS	PROJECT TYPE: Family
ADDRESS: 1506 Piikoi St. CITY: Honolulu S	TATE: HI ZIP: 96822	PHONE: 808-536-1506 FAX:
MANAGER: Shanelle Lum APPLY TO: Contact Shanelle Lum for	APPLY ADDRES	OUT-OF-STATE APPLICATION
APPLY ATTN:		ACCEPTED: EMAIL: shanelle@hsiservices.net
APPLY PHONE: 808-536-1506	FAX : 973-0605	
Unit Type: Number of UNITS: Studio: One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: RENT INFO: RENT IS 30% OF INCOME: AGE CRITERIA: 18 and older	RENT: INCOME Required: SQ FT: Of SQ FT: Of SQ FT: No of S	MAXIMUM Number of People: 1
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:	LEASE:	ENERAL INFO: pplication: Request by email all for appointment to pick up from manager's ffice wo 3 & 2 story walk up buildings. Il applicants must be experiencing
INCOME CRITERIA: Must not exceed 50% of HUD Oahu AMI; 1 pe \$40,850; 2 persons - \$46,050; 3 - \$52,500; 4 \$58,300; 5 - \$63,000; 6 - 67,650; 7 - \$72,300	Prson - FURNISHED:	omelessness, sheltered or unsheltered, prior presidency at the project. No violent criminal proviction two years prior; no registered sex iffender. Must show legal residency if not a tizen. Must be able to pay rent, deposit and equired fees. O RESPONSE IN 2023. Last completed podate 3/19/2019
1-PERSON MAXIMUM MONTHLY INCOME: 2-PERSONS MAXIMUM MONTHLY INCOME:	3404 3887	

	2401 00111	olete Update:	1/21/2022			AREA:	Moiliili
OJECT NAME:	1727 SOUTH	BERETANIA	STREET	•	ı	PROJECT TYPE:	Family
ADDRESS:	1727 S. Beretania St.				-	PHONE: 808-944	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 955-59 ²	15
MANAGER	R: Pam Sakai			APPLY ADI	DRESS:		OUT-OF-STA
APPLY TO	: Housing Solutions, Ir	nc.					APPLICATIO ACCEPTED
APPLY ATTN	l:						
APPLY PHONE	E: 808-944-5020			FAX: 955-5915		/ebsite: https://ww mail: pam@hsise	w.hsiservices.net rvices.net
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 0	942		600	2	4	
	Bdrm: 5	1131		700	5	7	
Three I							
Four	Bdrm: 0						
	ENT IS 30% OF INCOM		TILITIES INC	LUDED:	_	TOTA	L UNITS: 23
meless and hav	be homeless or at risk of the homeless or at least one child undired every 6 months for	der age 18.				MINIMUM W ESTIMATE	
		Į.					STIMATE
E CRITERIA: or older.					Т	O REMAIN ON W CALL EVERY	
		P	WAITLI ARKING INFO	ST FOR PARKING: D: YES	PET INFO:	F	PETS OK:
		F	Parking include	ed when available.			r.
N OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				J GENERAL II	NFO [.]	
SET LIMIT INF			EASE:		Low-income	permanent hous	ing features 23
					size of 2-7. risk of being child under	o-bedroom apartm Applicants must be phomeless and ha 18. Amenities included laundry facilities.	e homeless or at ave at least one ude resident
COME CRITER	IA:	F	URNISHED:			NSE IN 2023.	

		Last Comp	lete Update:	8/30/2023			AREA:	Wahiawa
PROJECT NAME:	220 Ca	lifornia e					PROJECT TYPE:	Elderly
ADDRESS:	220 Califor	nia Ave.					PHONE: 808-220	0-7671
CITY:	Wahiawa		STATE: HI	ZIP:	96786		FAX : 808-484	4-4051
MANAGER	R: Darlene H	liga			98-030 H	ADDRESS: Hekaha Street #20	6	OUT-OF-STATE
APPLY TO	Property F Attn: Darle				Аіва, Па	awaii 96701		APPLICATION ACCEPTED: YES
APPLY ATTN	: Property I	Managemen	t Division					123
APPLY PHONE	E: 808-220-7	'671			FAX: 808-484-4	EMAIL: 4051		
	Of	lumber f UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	41	950	1470	403	1	2	
	Bdrm:	41	850	1470	403		2	
Three								
Four	Bdrm:							NO
RENT INFO: RE Fixed rent of \$850 ertificate holders r income requireme *Confirmation letter received. Inform	0; 50% AMI need not me ent. er is sent aft managemer	et the minim	num gross	All utilities incluphone (\$25 per month	uded except cable Basic	e & cable	MINIMUM W ESTIMATE MAXIMU	(Months): 1 JM WAIT
AGE CRITERIA:	ngoc			•			TO REMAIN ON W	
All residents must	t be 55 or old	der		WAITLI	ST FOR PARKIN	IG:	CALL EVERY	
				PARKING INF		PET INFO	: F	PETS OK: YES
<u> </u>	ASSI	ET LIMITS:	NONE	1 stall for each	n unit			
AN OWN RESID		ROPERTY:	YES			GENERAL		
ASSET LIMIT INF	·O:			LEASE: 1 year		meeting rarea, victor manager. 2 handica	2007. Picnic Area, (oom, elevator, priva ory garden, visitor p apped accessible un rated laundry on eac	te park with BBQ arking, on-site its.
INCOME CRITER 50% AMI: 1 persor Food stamps accoriteria.	on \$45,700;			FURNISHED: Partly furnishe appliances; vir garbage dispo	nyl flooring,	*Failure to managem	o respond to communent in a timely man noved from the waitl	unication from ner will result in
I 1-PERSON MAXIM	MUM MONTH	HLY INCOM	E:	3809		Į.		
2-PERSONS MAXI	IMUM MON	THLY INCO	ME:	4355				

		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: 808-9	41-3436
CITY:	Honolul	u	STATE: HI	ZIP:	96815		FAX:	
MANAGER	R: Keala	Souza			APPLY AD			OUT-OF-STAT
APPLY TO): Housir	ng Solutions, In	ic.		Appointme	THE OTHY		APPLICATION ACCEPTED
APPLY ATTN	۱:							
APPLY PHONE	E: 808-9 ⁴	11-3436			FAX:	EMAIL:	Website: https://w Email: kealo@hsi	www.hsiservices.net/ iservices.net
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	itudio:	32	1000			1	2	
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							
\$1000/month; \$10 nomeless. Updat those on the waitl	es are re	sit. Applicants quired every 6	must be months for	Electric and wat	ter		MAXIN	E (Months):
AGE CRITERIA:				r.			TO REMAIN ON	ESTIMATE WAITLIST
Age 18+, singles	or couple	es only; 2 perso	ons max.	\Λ/ΔΙΤΙ IS	ST FOR PARKING:		CALL EVER	
				PARKING INFO		PET INFO):	PETS OK: NO
				Parking not ava	ilable	Doctor ve	rification required	for service animal.
AN OWN RESI		SSET LIMITS: PROPERTY:				GENERAL	_ INFO:	
ASSET LIMIT INF				LEASE:		Low-incor	income permanent housing with 32 ios. Applicants must be homeless. Units	
				Month-to-month	n	feature pr No reside	rivate baths as wel ent parking available ear a bus stop, ret	I as kitchenettes. le but conveniently
NCOME CRITER	IA:					NO RESE	PONSE IN 2023.	
				FURNISHED: Microwave and	mini refrigerator.			
-PERSON MAXIN	иим мо	NTHLY INCOM	1E:	0				
PERSONS MAX	IMUM M	ONTHLY INCO	ME:	0				

	IAU VIST	ΓΑ					
2420 T						PROJECT TYPE	Elderly
ADDRESS: 2428 Tusitala St.						PHONE : 808-9	26-6700
Honolulu		STATE: HI	ZIP:	96815		FAX:	
Ainahau	Vista						OUT-OF-STAT APPLICATION ACCEPTED
Resident	Manager's (Office					YES
808-738-	3100			FAX: 735-1978	EMAIL:	https://www.locati able-rentals	ionsrentals.com/affor
		RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	99	1225	2xrent	403			
	7	1470	2xrent	607			
							YES
studio - \$ 1 1 Bedroo 2 Bedroo e holders :	616 om - \$1053.0 m - \$1195.0 need not me	0	Electric, water,	and sewer		MINIMUM \ ESTIMATI MAXIN	E (Months): 2. MUM WAIT ESTIMATE 6. WAITLIST
			PARKING INFO	O: YES	PET INFO):	PETS OK: NO
			\$40/mo. Once assigned, occu	all stalls upancy to be	GENERAL	_ INFO:	
):			LEASE:				
			1 year		with kitch park/Victo 6 visitor p floor. Fur	en; picnic area, tra ory Garden parking stalls, coin	ansportation, private laundry on ground
						AMI)	
30% of AMI: 1 person \$27,450; 2 persons \$31,350 50% of AMI: 1 person \$45,750; 2 persons \$52,250 Food stamps accepted to help meet min. income criteria. Sect 8 certificate holders need not meet min. income requirements.			FURNISHED: Partly furnishedmajor appliances only; has A/C, window blinds, disposal, vinyl flooring			,	
	Resident 808-738- Type: drm: drm: drm: drm: 1T IS 30% studio - \$ 1 1 Bedroo 2 Bedroo e holders in the property of the proper	Ainahau Vista Resident Manager's G 808-738-3100 Type: Number of UNITS: udio: 99 drm: 7 drm: 99 drm: 7 drm: 115 30% OF INCOMI studio - \$616 1 1 Bedroom - \$1053.0 2 Bedroom - \$1195.0 2 Bedroom - \$1195.0 3 be holders need not mercomposition and state of the properties of the p	Ainahau Vista Resident Manager's Office 808-738-3100 Type: Number of UNITS: RENT: udio: 1470 drm: 99 1225 drm: 7 1470 drm: NO studio - \$616 1 Bedroom - \$1053.00 2 Bedroom - \$1195.00 e holders need not meet the min remont ASSET LIMITS: NONE ENTIAL PROPERTY: YES Die on \$27,450; 2 persons \$31,350 on \$45,750; 2 persons \$52,250 onted to help meet min. income tificate holders need not meet	Ainahau Vista Resident Manager's Office 808-738-3100 Type: Number of UNITS: RENT: Minimum INCOME Required: udio: 1470 2xrent Type: Number of UNITS: RENT: Required: udio: 1470 2xrent UTILITIES INC Electric, water, 1470 2xrent Electric, wa	APPLY AD 2428 Tusita Honolulu, F Resident Manager's Office 808-738-3100 FAX: 735-1978 Minimum INCOME Required: SQ FT: GOT	APPLY ADDRESS: 2428 Tusitala St Honolulu, HI 96815 Resident Manager's Office 808-738-3100 FAX: 735-1978 Minimum INCOME Required: Green	Ainahau Vista Resident Manager's Office 808-738-3100 FAX: 735-1978 EMAIL: https://www.locat able-rentals able-rentals able-rentals able-rentals INCOME Required: SQ FT: MINIMUM Number of People: Popple: SQ FT: SQ FT: MINIMUM Number of People: SQ FT:

Printed: 4/2/2024 Page: 5

DO JECT NAME.	AINIAI		lete Update:	5/23/2023			AREA PROJECT TYPE	
ROJECT NAME: ADDRESS:			IAII					
ADDRESS.	2426 Tus	silaia Si.					PHONE: 808-92	26-6700
CITY:	Honolulu		STATE: HI	ZIP:	96815			
MANAGER	:				APPLY ADI			OUT-OF-STAT
APPLY TO	: Ainahau	ı Vista II			Honolulu, H			APPLICATION ACCEPTED
APPLY ATTN	: Resider	nt Manager's C	Office					
APPLY PHONE	: 808-738	3-3100		F	AX:	EMAIL:	https://www.locati	onsrentals.com/affo
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:	15	1140	2x rent	377			
One E	3drm:	47	1225	2x rent	420			
Two E								
Three E								
Four E	3drm:						J	YES
ENT INFO: REI	NT IS 309	% OF INCOME	E: NO	UTILITIES INCLU	JDED:		тот	AL UNITS: 62
6 units - 30% AM 9 units - 50% AM 1 units - 50% AM	II studio - II 1 bedrro	\$901 per mon oom - \$966 pe	er month	Electricity, Water	, Sewer		MINIMUM V ESTIMATE	VAIT LIST E (Months):
6 units - 60% AM	II 1 bedro	om - \$1137 pe	er month	ļ				IUM WAIT STIMATE
GE CRITERIA:							TO REMAIN ON	
5+				WAITLIST	FOR PARKING:		CALL EVERY	· · · · · · · · · · · · · · · · · · ·
				PARKING INFO: 22 parking stalls	available only	PET INFO	:	PETS OK: NO
	Δς	SET LIMITS:		to 50% and 60%	AMI @ \$40 per			
AN OWN RESID						GENERAL	. INFO:	
SSET LIMIT INFO	O:			LEASE:		Coin oper Locked er	ated laundry	
						Communi	ty room for recreat al activities	ional and
ICOME CRITERI	IA:			•				
0% AMI \$4	1 Persor 27,450/yr 45,750/yr 54,900/yr	2 Person \$31,350/y \$52,250/y \$62,700/y	ır ır	FURNISHED: Range/Oven, Ga Refrigerator/Free floor covering, W				
	II INA NAONI	THLY INCOM	IE-	4410]		

		Last Comp	olete Update:	11/2/2021			AREA	McCully	
PROJECT NAME:	ARTI	ESIAN VI	STA				PROJECT TYPE	Elderly	
ADDRESS:	1828 Y	oung St.					PHONE : 808-9	49-5936; 808-947-4	
CITY:	Honolul	u	STATE: H	ZIP: 96826			FAX: 949-5238		
		James, Resid	ent Manager		APPLY AD P.O. Box 2 Honolulu, H	2420		OUT-OF-STATE APPLICATION	
APPLY TO								ACCEPTED: YES	
APPLY ATTN		rty Managemei 38-3100	nt Division		FAX: 735-1978	EMAIL:	http://www.location	onsrentals.com/afforda	
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	itudio: Bdrm:	53	1100	Ovront	420				
	Bdrm:	53	1100	2xrent	420		.		
Three	Bdrm:								
Four	Bdrm:]	YES	
RENT INFO: RE 6 units at 30% AI 47 units at 50% A 2 handicapped un to meet min incon holders are not re	MI rent \$0 MI rent \$0 nits; food ne requir	615 1100 stamp benefit ement and Sec	can be used	UTILITIES INC			MINIMUM Y ESTIMAT MAXIN	WAIT LIST E (Months): 24 MUM WAIT ESTIMATE 60	
AGE CRITERIA:							TO REMAIN ON	WAITLIST	
All residents must	t be 55 o	r older		PARKING INF	IST FOR PARKING: FO: NO alls; \$40/ month	PET INFO	CALL EVER	Y (Months): 6 PETS OK: NO	
		SSET LIMITS:							
AN OWN RESII		. PROPERTY:	YES			GENERAL *Confirms		ed once application	
none				LEASE:		is receive Has comp closet in b bars, no t on every	ed. puter area and cor bathroom, walk in sub, has kitchen pa floor.	nmunity room, no	
INCOME CRITER		510: 2 parcan	c \$31 440	FURNISHED:			ocial worker		
30% of AMI: 1 person \$27,510; 2 persons \$31,440 50% of AMI: 1 person \$45,850; 2 persons \$52,400 preference for 30% units given to lowest income (<20%AMI) minimum income is 2x rent		major applian	ces, vinyl flooring, olinds, a/c. garbage		pprox. 9/2006 LIHTC, RHTF, Se	ction 8			
						NO RESF	PONSE IN 2020. L	AST UPDATE 2019	
1-PERSON MAXIN	иим мо	NTHLY INCOM	ΛE:	3820					
2-PERSONS MAX	11.41 11.4 1.41	ONTHLY INCC	ME.	4366					

	Last Compl	ete Update:	10/15/2021			AREA:	Palama
PROJECT NAME:	BANYAN STRE	ET MANO	R			PROJECT TYPE:	Family
ADDRESS:	1122 Banyan St.					PHONE: 808-843	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 376-004	42
MANAGER	R: Jodie Sakai			APPLY ADI 1122 Banya			OUT-OF-STAT
APPLY TO	: Banyan Street Manor			Honolulu ĤI			APPLICATION ACCEPTED:
APPLY ATTN	1: Jodie Sakai						YES
APPLY PHONE	E: 808-843-0021			FAX: 376-0042	EMAIL:	manager@banyans	streetmanor.com
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 12				1	4	
	Bdrm: 42				1	6	
Three	Bdrm:						
30% of adjusted n	ENT IS 30% OF INCOME monthly gross income. communication from marer or be removed from war	agement	Hot and cold w	ater, Trash, Sewer		MINIMUM W ESTIMATE MAXIMU	(Months): 24
AGE CRITERIA:			Įt.			TO REMAIN ON W	STIMATE 84
Head of househol time of application	d must be 18 years or ol n.	der at the	WAITLIS	ST FOR PARKING:	PET INFO	CALL EVERY	
	ASSET LIMITS:	NONE					
	DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INF	·O:		LEASE: 1 Year		Send requences	n: gement to mail it or lest with self-addres om manager's office	ssed stamped
INCOME CRITER	IIA:		FURNISHED:		NO RESP	ONSE IN 2023.	
			Partly furnished appliances only				
-PERSON MAXIM	MUM MONTHLY INCOM	≣:	3525		<u> </u>		
DEDCONE MAY	IMLIM MONTHLY INCOM	/ □·	4029				

	-	lete Update:	6/30/2023			AREA:	Ala Moana
PROJECT NAME:	BIRCH STREE	T APARTM	ENTS			PROJECT TYPE:	Family
ADDRESS:	916 Birch St.					PHONE: 808-597	
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 589-289	97
MANAGER	:			APPLY AD			OUT-OF-STATE
APPLY TO	: Locations			Honolulu, F	-		APPLICATION ACCEPTED:
APPLY ATTN	: Property Managemen	t Division					YES
APPLY PHONE	: 808-738-3100			FAX: 735-1978		nttp://www.location ple-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:						
-	3drm: 52	1458	2.5xrent	600			YES
Three E							
Four E	3drm:						YES
RENT INFO: RE	NT IS 30% OF INCOME	E: NO	UTILITIES INC	CLUDED:		TOTA	L UNITS: 52
Units are advertise available.	ed in the newspaper who	en	Water, sewer	& trash		MINIMUM W	AIT LIST
Section 8 certificate gross income requ	te holders need not mee uirement.	et the min				ESTIMATE	(Months): 12 JM WAIT
		l					STIMATE 60
AGE CRITERIA: Head of household	d must be 18 years or o	lder				TO REMAIN ON W CALL EVERY	
			WAITL PARKING INF	IST FOR PARKING: O: NO	PET INFO:	F	PETS OK: NO
			free	,			·
AN OWN DEGIS	ASSET LIMITS:				OENEDAL	INFO	
AN OWN RESIL ASSET LIMIT INFO	DENTIAL PROPERTY: O:		LEASE:		GENERAL Funding: L	IHTC, RHTF	
			1 year		Ask manag	from website gement to mail it	
INCOME CRITERI	IA:				Pick up fro	m 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				
-PERSON MAXIM	IUM MONTHLY INCOM	E:	4220]		

		Last Comple	ete Update:	10/18/2021			AREA:	Chinatown
PROJECT NAME:	CHIN	NATOWN G	ATEWAY	/ PLAZA			PROJECT TYPE:	Family
ADDRESS:	1031 N	luuanu Ave.					PHONE: 808-524	1-3737
CITY:	Honolu	llu	STATE: HI	ZIP:	96817		FAX: 528-529	99
	Rande D: Hawai	Huang, Resident eatte McEnroe P iian Affordable P es Ma	roperty Manag	er	APPLY ADI Chinatown (1031 Nuuar Honolulu, H	Gateway Plaza nu Avenue	a	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONI	=: 808-5	24-3737			FAX: 528-5299	EMAIL:		
Uni	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
5	Studio:	1	1100	2050	500	1	2	YES
One	Bdrm:	199	1200	2160	555	1	3	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							NO
RENT INFO: RE Rent posted is the 1 Bedroom - 60% AMI - \$1200 \$1400; 140% AM accept section 8 Can apply oven it. AGE CRITERIA:	e low ren ; 80% Al I - (Mark	nt of a range. MI - \$1300; 120% et) \$1500.	6 AMI -	UTILITIES INC Water + Sewe			MINIMUM W. ESTIMATE MAXIMUL LIST ES TO REMAIN ON W.	(Months): 6 JM WAIT STIMATE 36 VAITLIST
Head of househo time of application		oe 18 years or old	der at the	WAITLI PARKING INF	ST FOR PARKING: O: NO	PET INFO	CALL EVERY): F	(Months): 12 PETS OK: NO
]	А	SSET LIMITS:	NONE	Parking starts depends on re	at \$40 mo. and			ę.
AN OWN RESI ASSET LIMIT INF		L PROPERTY:	NO			GENERAL	_ INFO: ing in the City Housi	ng
7.00ET ENVIT II.VI	<u>. </u>			LEASE: 1 year		Rental As	on deck with bbq grill	
INCOME CRITER	RIA:			1				
Maximum income 60% AMI 80% AMI 120% AMI 140% AMI	e 1 per \$52,9	920 \$60,480 \$ 500 80,600 800 120,900	\$68,040 90,650	FURNISHED: Partly furnishe appliances onl Washer/dryer	ly. Carpet or tile.			

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	ete Update:	10/15/2021			AREA:	Chinatown
PROJECT NAME:	CHIN	ATOWN I	MANOR				PROJECT TYPE:	Family
ADDRESS:	175 Nor	th Hotel St.					PHONE: 808-545	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 536-680	80
MANAGER	: Susan	Chen			APPLY AD On-Site	DRESS:		OUT-OF-STATE
APPLY TO	: Chinate	own Manor			GII GIIG			APPLICATION ACCEPTED:
APPLY ATTN	: Winnie	Louie						YES
APPLY PHONE	: 808-54	5-1996			FAX: 536-6808	EMAIL:	winniel@hawaiiaffo	rdable.com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	89	612	2.5x rent	310	1	2	YES
One I	Bdrm:							
Two	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE 310 sq ft \$612 330 sq ft \$636 450 sq ft \$646 Must respond to c in a timely manner	ommunic	cation from mar	nagement	UTILITIES INCL Water	UDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	Į.
Head of household time of application		e 18 years or o	der at the	WAITLIS	T FOR PARKING:		CALL EVERY	(Months):
une or application	•			PARKING INFO		PET INFO:	F	PETS OK: NO
				Parking not ava	ilable			
AN OWN RESID		SSET LIMITS:				GENERAL	INFO:	
ASSET LIMIT INF		TROFERTT.	1120	LEASE:			open until decision	to close.
				1 year			undry facility and co	mmunity room
INCOME CRITER	IA:			,				
Maximum Annual 2 persons - \$62,88		1 person - 55,	000	FURNISHED: Partly furnished appliances only				
-PERSON MAXIM		NTHLY INCOM		4583 5240				

	Last Comp	lete Update:	7/27/2023			AREA:	Ewa
PROJECT NAME:	D.E. THOMPSO	ON VILLA	GE (EWA VII	LAGE ELD	DERL	PROJECT TYPE:	
	91-1295 Renton Rd.					PHONE: 808-68	1-4960
CITY	Ewa Beach	STATE: HI	ZIP:	96706		FAX : 681-49	
OIII.	Ewa Beach	OTATE: HI		96700			
MANAGER	: Susan Lee, EAH			APPLY AD	DRESS:		OUT-OF-STATI
APPLY TO	: Closed for application	1					APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 808-681-4960		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:						
One I	Bdrm: 84	0		600	1	3	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:					J	NO
rent is 30% to a m allowance = \$100° Deposit is based or responsible for up	NT IS 30% OF INCOME naximum of \$1165 minus 1 con income. **Applicants dating any change in inf mber and address.	s \$68 utility	UTILITIES INCLU Water; \$68 utility Utility Allowance	allowance	ge	MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:						TO REMAIN ON V	VAITLIST
	spouse, must be 62 ye (section 515). If disable		WAITLIST	FOR PARKING:		CALL EVERY	(Months): 12
provide a doctor's	note (disability does no	t need to	PARKING INFO:	NO	PET INFO		PETS OK: YES
pe disclosed) of or			Parking included		Service a	nimal only, with MD	letter, max 30 lbs.
AN OWN DESIG	ASSET LIMITS:				GENERAL	INEO:	
ASSET LIMIT INF	DENTIAL PROPERTY: O:	160	I FACE.			d in 2023. Acc units	s: 7 total, 5 for
income from asse	ts cannot put applicant (over income	LEASE: 1 year		hearing ir Caregiver outside h	ir w/ 1 for sight impa npairment. Priority of s are allowed with Nome. If elderly tenar e may rent unit, mus	given to 30% AMI. MD letter; can work nt dies, under age
INCOME CRITER	IA:				eligible. S	e may rent unit, mus Services: On-site So nding: Farmers Hom	cial Worker from
	Tenant must have adec nt to afford own basic liv lectric, etc.)		FURNISHED: Partly furnished-appliances only,		CCH Sho Must resp	iding. Farmers Horr pping van available bond to communicat nent in a timely man	, opened 1992. ion from
 1-PERSON MAXIM	IUM MONTHLY INCOM	IE:	4575				

Printed: 4/2/2024 Page: 12

		Last Compl	ete Update:	9/7/2023			AREA	: Ewa
PROJECT NAME:	FRAN	NCISCAN	VISTAS E	WA			PROJECT TYPE	: Elderly
ADDRESS:	91-1471	l Miula St.					PHONE: 808-68	31-4000
CITY	Ewa Be	oob	STATE: HI	ZIP:	96706		FAX : 681-40	001
OII I.	Ewa be	acii	OTATE: FI		96706			
MANAGER	: Comm	unity Director -	Kathy McAliste	er		ADDRESS:	pen for all units	OUT-OF-STATE
APPLY TO	: Francis	scan Vistas Ewa	а				,	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-68	31-4000			FAX: 681-4001		AIL: leasing@Francisc www.Franciscanvi	anVistasEwa.com stasewa.com
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIM Numb of Peo	per Number of	CAREGIVER Allowed:
S	tudio:							
	Bdrm:	126	1290	2Xrent	530	1	n/a	
	Bdrm:	23	1512	2Xrent	750	1	n/a	
Three I								YES
RENT INFO: RE 6 - 1 bedroom unit w/\$664 rent with n \$1176 - \$1380; Mi certif. holders. Mir Stamp/Rent subsi	ts w/\$571 ninimum in. incom n income	income require e not needed fo	bedroom ment of or Sec 8	UTILITIES IN			MINIMUM V ESTIMATE MAXIM	-
AGE CRITERIA:							TO REMAIN ON V	P. Contraction of the contractio
62 years of age at applicants.	the time	of application a	and for all	WAITL PARKING INF	LIST FOR PARKIN	NG: PET I	CALL EVERY	(Months): PETS OK: NO
				Parking base 102 stalls tota	d on availability, al	Servi	ce animals ok	
AN OWN RESID		SSET LIMITS: PROPERTY:	YES			GENE	ERAL INFO:	
ASSET LIMIT INF	O:			LEASE:		Amer	nities: Community cent	er that includes
Assets are taken i income eligibility.	nto cons	ideration in dete	ermining	1 year		room	ering room, kitchen, acti i, fitness room, salon ar dry in each building.	d lap pool. On-site
INCOME CRITER	IA:			,			ts @ 30% AMGI, 1 unit units @ 60% AMGI	@ 50% AMGI
30% AMI - 1 perso \$31,440 60% AMI - 1 perso max - \$55,020					s electric range, disposal, and air	www. Ask r	cation: .Franciscanvistasewa.c management to mail it up from manager's offic	
1-PERSON MAXIM	IUM MUI	NTHLY INCOM	E:	4410				

Printed: 4/2/2024 Page: 13

	Last Compl	lete Update:	11/2/2021			AREA:	Aiea
ROJECT NAME:	HALAWA VIEV	V				PROJECT TYPE:	Family
ADDRESS:	99-009 Kalaloa St.					PHONE: 808-488	
CITY:	Aiea	STATE: HI	ZIP:	96701		FAX : 486-61	50
MANAGER:	Tammy K. Lopez			APPLY ADI			OUT-OF-STATE
APPLY TO:	Halawa View Apts.			Aiea HI 967	701		APPLICATION ACCEPTED:
APPLY ATTN:	Management Office						NO
APPLY PHONE:	808-488-3613		F.	AX : 486-6150	EMAIL:	tammy@pacificdg.	com
Unit 1	of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	udio:						
One B							YES
Three B		0		840	3	7	YES
Four B		0		1080	4	9	YES
Limited number of 3 Two bdrm: \$948 - \$ Three bdrm: \$1053 Four bdrm: \$1147- Updates not require contact information AGE CRITERIA:	\$1500 maximum. 3 - \$1850 maximum. \$2000- maximum ed to remain on waitlist	unless	UTILITIES INCLU Gas, electricity an			MINIMUM W ESTIMATE MAXIMU	(Months): 12 JM WAIT STIMATE 18 VAITLIST
riead of flodseriold	must be 10 years of of	luci	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: NO
	ASSET LIMITS:	NONE	Parking included when asking for 2	waitlist only			o 140
	ENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO):		LEASE: 1 year; then mon	th-to-month	- mdihawa	R APPLICATIONS aii.com from manager's offi	
INCOME CRITERIA	A :		,				
persons: \$27,850; 4	c. 8 units: 2 persons: \$ 4 persons: \$30,900 and 60% 2014 HHFDC		FURNISHED: Partly furnished-appliances only.	major			
-PERSON MAXIMU	JM MONTHLY INCOM	E:]		

Printed: 4/2/2024 Page: 14

	Last Compl	ete Update:	1/21/2022				AREA:	Kalaeloa
PROJECT NAME:	HALE HA'I KA'	OPUA (Buil	dina 37)			PROJECT TYPE:	Family
	Building 37, 91-1039 Sh		<u></u>				PHONE: 808-682	-1949
]		· =				FAX: 682-197	
CITY:	Kapolei	STATE: HI	ZIP:		96707		,	
	t: Richelle Taylor, Direct Rtaylor@Cantwell-And p: 91-1078 Yorktown St. HI 96707		· ·	apolei	APPLY AD 91-1078 Yo Kapolei HI	orktown St.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	I: Cloudbreak Hawaii, LL	.C / Attn: Leasing	Team					152
APPLY PHONE	: 808-682-1949			FAX:	682-1970		CloudbreakCommu CloudbreadHawaii@	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 39	650	1.5 x rent	ı j	111-221	1	1	
One I	Bdrm:							
Two I	Bdrm:			<u> </u>				
Three I	Bdrm:			<u> </u>				
Four I	Bdrm:							YES
RENT INFO: RE	NT IS 30% OF INCOME	· NO	TILITIES IN	ICLLIDE	D·		TOTA	L UNITS: 39
\$650 deposit and	first month's rent with ap	proval. All	Vater, electr				MINIMUM W	Į.
	om occupancy. Affordabingle veterans or others.	le housing					ESTIMATE	_
							MAXIMU LIST ES	M WAIT TIMATE 0
AGE CRITERIA:							TO REMAIN ON W	
Single, adult and/o	or veterans				R PARKING:			
			ARKING IN stall per un		NO	PET INFO:	P	ETS OK: NO
į.	ASSET LIMITS:		·					
AN OWN RESID	DENTIAL PROPERTY:					GENERAL	INFO:	
ASSET LIMIT INF	O:		EASE:				y Kitchen, Commur y coin-laundry area	
		r	/lonth-to-mo	nth			walk-up stairway.	s, vending
						Application		
INCOME CRITERI	IA:					Cloudbrea	y email to: kHawaii@Cantwell-	
Applicant must ma to sustain rental a	ake 1.5 times the rent an mount.		URNISHED Fully furnishe			application	gement to email oven. n. ONSE IN 2023.	er rental
	NUM MONTHLY INCOME		0					

Last Co	omplete Update:	6/30/2023			AREA:	Ala Moana
HALE KEWA	ALO APARTI	MENTS (Clo	sed for appl	<mark>licati</mark>	PROJECT TYPE:	Family
450 Piikoi St.					PHONE: 808-589	9-1845 ext 15
Honolulu	STATE: HI	ZIP:	96914		FAX : 589-184	41
: Hawaii Affordable	Properties, Inc.		APPLY ADI	DRESS:		
) :						OUT-OF-STAT APPLICATION ACCEPTED
l:						
∷ 808-589-1845 x15	5	F	FAX:	EMAIL:		
		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	0		500			
Bdrm: 29	1841		1071	5	7	
Bdrm:	0					
pts); 2 Bdrm \$787 (6 20 apts); 2 Bdrm \$13	3 apts) 318 (45 apts)	Solar Hot Water	Heating, Sewer,		MINIMUM W ESTIMATE MAXIMU	
				Т		
household must be	18 years or					
ASSET LIMI	TS:	PARKING INFO:		Choice of or weighing no	ne: (1)small to me more than 25 lbs	; (2) small cat; (3)
				GENERAL II	NFO:	
·O:		LEASE:		Standford C	Carr Development	- 1100 Alakea
IA:						
50 \$45,750 50 \$52,250 \$62 80 \$58,800 \$70	2,700 0,560	FURNISHED:		Rents and I	ncome are subjec	t to change
	## ## ## ## ## ## ## ## ## ## ## ## ##	## HALE KEWALO APARTN ## 450 Piikoi St. ## Honolulu STATE: ## ## HI ## Hawaii Affordable Properties, Inc. ## Honolulu STATE: ## HI ## Hawaii Affordable Properties, Inc. ## Hawaii Affordable Properties, Inc. ## HI ## HI ## Hawaii Affordable Properties, Inc. ## HI ## HI ## Hawaii Affordable Properties, Inc. ## OBA	HALE KEWALO APARTMENTS (CIO 450 Piikoi St. Honolulu STATE: HI ZIP:	HALE KEWALO APARTMENTS (Closed for app)	HALE KEWALO APARTMENTS (Closed for applicati 450 Pilkoi St.	HALE KEWALO APARTMENTS (Closed for applicati

		Last Comple	ete Update:	1/21/2022			AREA:	Waipahu
PROJECT NAME:	HALE	KUHA'O	Weinberg	3			PROJECT TYPE:	Family
ADDRESS:	94-909 K	(au'olu Pl.					PHONE: 808-678	3-0892
CITY:	 Waipahu		STATE: HI	ZIP:	96797		FAX: 678-088	37
	,		,					
MANAGER	: Marisa	Olmeda-Macias	s, Res. Mgr.		APPLY ADD			
APPLY TO		66-7722 - Trish 702-259-1903	a Bauman, CO	S; or Marisa Oln	St Paul MN	sity Ave. West I 55114	r, #330	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-678	3-0892			FAX: 651-209-6623		housing@accessib	espace.org
Unit	Type:	Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	. , p o .	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:							
One I	Bdrm:	18			520		2	YES
Two I	Bdrm:	6			773		4	YES
Three I	Bdrm:							
Four I	Bdrm:							
RENT INFO: RE	NT IS 30%	% OF INCOME:	YES	UTILITIES INC	LUDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	
Head of household have a qualifying of		18 years or old	ler and	WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 6
nave a qualifying t	aloubility.			PARKING INFO	11.1	PET INFO:	F	PETS OK: YES
				Minimum parki	ng available			
		SET LIMITS:				J		
AN OWN RESIDE		PROPERTY:	NO			GENERAL covered la	INFO: nai w/ bbq, roll in sl	nowers dranes
				LEASE:		entertainm units, heig opened in	ent center, ceiling the ht-adjustable work	an, window a/c stations
INCOME CRITER	IA:			,			Res Manager are of	
Maximum annual 1 person \$36,650; \$47,100; 4 person	income: 2 person:		ersons	FURNISHED:			off = caretaker and a ONSE IN 2021 - La 10/2017	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	1/21/2022				Decad Otto
DDO IECT NAME.	-			ACCEPTING	ADD	AREA: PROJECT TYPE:	Pearl City
	HALE LAULIMA 1184 Waimano Home R		e) - NOT	ACCEPTING A	APP		Family
ADDRESS.	1184 waimano Home R	.d.				PHONE: 808-483	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX : 483-255	2
MANAGER APPLY TO	: Marcus Asami : HPHA NOT ACCEPTING APF	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCER	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	: Oahu applications offic NOT ACCEPTING APP : 808-832-5961			FAX : 832-3461	EMAIL:	hphaishereforyou.o	
s	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
				771 893	3	6 8	YES
Minimum Rent: \$0 the waitlist are to g change or check t	NT IS 30% OF INCOME: D. All HPHA applicants we go to: hpha.myhousing.come heir status. A username and to access their accounts are accounts.	ho are on om to and	JTILITIES INC Water and allo	ELUDED: wance for electricity		MINIMUM WA ESTIMATE (MAXIMU	(Months): 36
AGE CRITERIA: Head of household	d must be 18 years or old	ler	WAITLI	ST FOR PARKING:		TO REMAIN ON W CALL EVERY ((Months):
			PARKING INFO	0:		nimals ok, but only cories listed below:	ers OK: YES
	ASSET LIMITS:					under 25 lbs) or cat	
ASSET LIMIT INF			LEASE: 1 year		homeless displaced.	NCES: Domestic V in transitional shelte	ers; involuntary
2 persons - \$60,90 4 persons - \$76,10	80% of AMI Income: 1 person - \$53,2 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250;	FURNISHED: Partly furnishe appliances onl			tions must be 3 yrs a thamphetamine or s	
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		J		

Printed: 4/2/2024 Page: 18

		Last Comp	olete Update:	6/30/2023			AREA	Moiliili
PROJECT NAME:	HALI	E MAKAN	A O MOIL	IILI		ı	PROJECT TYPE	Elderly
ADDRESS:	2139 AI	garoba St.					PHONE: 808-73	5-9099
CITY:	Honolul	lu	STATE: HI	ZIP:	96826		FAX:	
MANAGER	R:				APPLY AD 3165 Waial Honolulu, H	lae Avenue, Suite	e 200,	OUT-OF-STATE APPLICATION
APPLY TO): Mark [Development, I	nc.		rionoldia, r	11 300 10		ACCEPTED:
APPLY ATTN	1:					EMAIL	. dile ae:: a.e.e./ee	
APPLY PHONE	E: 808-73	35-9099		FA	X : 781-292-342		ndihawaii.com/mo	ollilli
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:	80	962					
	Bdrm:	24	1024				3	
	Bdrm:		0					
Three			0					
Four	Bdrm:		0]		YES
RENT INFO: RE 30%AMI Studio (4 units) \$962; 60% a 30%AMI One bdrr bdrm (20 units) \$1 \$1243 - Preference Chaice Voucher AGE CRITERIA: Age 55 plus for al	4 units) \$ AMI Stud m (2 units 1024; 609 de for per	553; 50% AMI dio (4 units) \$1 s) \$587; 50%A %AMI One bdr sons with a Ho	Studio (72 166 MI One m (2 units)	UTILITIES INCLUI	DED:	Т	MINIMUM W ESTIMATE MAXIM	(Months): 1 UM WAIT STIMATE 3 VAITLIST
7.90 00 p.u.o .o. a				WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK:
	A	SSET LIMITS:		Parking currently	full.			P.
AN OWN RESI		PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INF	·O:			LEASE:		on-site.	m and communit	y resource center
INCOME CRITER	IA:			FURNISHED: Full range, refrige garbage disposal.				
-PERSON MAXIM	MUM MOI	NTHLY INCOM	ΛΕ:	4575]		
2-PERSONS MAXI	ІМИМ МО	ONTHLY INCO	MF:	5225				

	Last Comple	ete Update:	2/7/2022			AREA:	Nanakuli
PROJECT NAME:	HALE MAKANA	O'NANAI	KULI			PROJECT TYPE:	
	89-201 Lepeka Ave.	117.117.11	TO E1)-9037, 808-754-75
	<u> </u>					FAX: 620-903	
CITY:	Wai'anae	STATE: HI	ZIP:	96792			
MANAGER	: Annie Au Hoon, Reside Inc.	ent Manager, M	ark Development,	, APPLY ADD Main Office	RESS:		OUT-OF-STATE
APPLY TO	: Hale Makana O'Nanaki	uli		89-201 Lepe		1	APPLICATION
				Waiʻanae HI	90792		ACCEPTED: YES
APPLY ATTN	: Application Division						120
APPLY PHONE	: 808-735-9099, then 1		F	FAX: 781-295-3427		www.mdihawaii.con anniea@mdihawaii.	.com
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: 15	0			1	3	
Two	Bdrm: 8	0			2	5	
Three I	Bdrm: 24	0			3	7	
Four I	Bdrm:						YES
Rents are approxi	NT IS 30% OF INCOME: mately 30% of income. credit checks are done.	YES	UTILITIES INCL Water; utility allo			MINIMUM WARE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be of adult age at		WAITLIS	T FOR PARKING:		CALL EVERY	
residents of all age	lti-family Complex include es.	es	PARKING INFO:		PET INFO:	P	PETS OK: NO
]	ASSET LIMITS:		Adequate parkin who can show v license, current safety check and	alid driver's car registration,	Accomada animal	ation considered for	verifiable service
AN OWN RESIDE	DENTIAL PROPERTY:	NO	Caroty official and	a mouraneo.	GENERAL		A BB
ASSET LIMIT INFO	0.		LEASE:		Resident r	RHTF, LIHTC, USD manager onsite	DA RD rent assist.
			1 year Recertification a	nnually	1bdrm)	loor handicaped un	its (2-2-bdrm, 1-
INCOME CRITERI	IA:				Application	ng, ramps. n available at www.r	
Income Limit 30	%AMI 40% AMI 1,120 \$28,160		FURNISHED:			units are ADA for he and these are on the	
2 persons \$24 3 persons \$27 4 persons \$30	7,150 \$32,160 7,150 \$36,200 7,150 \$40,200 2,580 \$43,440		Stove, Refrigera	itor	NO RESP update 5/2	ONSE in 2021. Las 27/20.	st completed
1-PERSON MAXIM	IUM MONTHLY INCOME	i:	2346		Į.		

Printed: 4/2/2024 Page: 20

Last Comp	olete Update:	1/4/2022			AREA:	Kapolei
HALE MOENA	KUPUNA			PR	OJECT TYPE:	Elderly
1020 Wakea St.				PH	ONE: 808-466	6-0801
Kapolei	STATE: HI	ZIP:	96707		FAX : 466-080)2
₹:			1020 Wakea	a Street, Suite 110	,	OUT-OF-STA
D: Manager's Office			Kapolei, HI 9	96707		APPLICATIO ACCEPTED
N:						
E: 808-466-0801			FAX: 466-0802			
Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
		J				
Bdrm:	1701	J				
Bdrm:						
Bdrm:						
ed. ipplication fee of \$30 in cash). iposit in check or money rds).	check or				MINIMUM WA ESTIMATE	(Months):
oo EE or older				ТО		
be 55 of older.	P			PET INFO:		PETS OK: YES
ASSET LIMITS:	P	arking is incluome, first ser	uded on a first ved basis. There		artment with a	\$350 one-time pe
	V			GENERAL INF	O:	
- O:	<u></u>	EASE:		Huge windows Undercabinet I	that open; Brea	athtaking views; ge
				Covered Parki	ng, 9,166 Sq. F	
RIA:				Covered Parki Deck, No smo High-speed ele	ng, 9,166 Sq. F king allowed on	the property le neighborhood;
	To 20 Wakea St. Kapolei R: C: Manager's Office N: E: 808-466-0801 t Type:	Kapolei STATE: HI R: C: Manager's Office N: E: 808-466-0801 Type: Number of UNITS: RENT: Studio: 1258 Bdrm: 1417 Bdrm: 1701 Bdrm: 1701 Bdrm: 1701 ENT IS 30% OF INCOME: NO ed. application fee of \$30 in check or cash). posit in check or money order (no ds). irod to remain on waitliet DENTIAL PROPERTY: 150 ASSET LIMITS: Vision of the control of the con	Type: Number of UNITS: RENT: RENT: REQUIRED: REQUIRED: REQUIRED: RENT: RENT: RENT: REQUIRED: REQUIRED: RENT: RENT: RENT: REQUIRED: REQUIRED: RENT: RENT: RENT: RENT: REQUIRED: REQUIRED: RENT: RENT: RENT: RENT: REQUIRED: REQUIRED: RENT: RENT: RENT: RENT: RENT: REQUIRED: REQUIRED: RENT: RENT:	STATE: HI ZIP: 96707	R: APPLY ADDRESS: 1020 Wakea Street, Suite 110 Kapolei, HI 96707 R: APPLY ADDRESS: 1020 Wakea Street, Suite 110 Kapolei, HI 96707 EMAIL: Wet Email Street of UNITS: RENT: RENT: RENT: RENT: RENT: RENT: Required: Re	HALE MOENA KUPUNA 1020 Wakea St. Kapolei STATE: HI ZIP: 96707 R: 466-080 APPLY ADDRESS: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 R: 1020 Wakea Street, Suite 110, Kapolei, HI 96707 REMAIL: Website: www.oah. Email: HMK@tmo.org. RAX: 466-0802 EMAIL: Website: www.oah. Email: HMK@tmo.

Printed: 4/2/2024 Page: 21

	Last Comp	lete Update:				AREA:	Kapolei
PROJECT NAME:	HALE MOENA	OHANA				PROJECT TYPE:	Family
ADDRESS:	1055 Alohikea St.					PHONE:	
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX:	
MANAGER	<u>:</u>			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO) :						APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	i:		F.	AX:	EMAIL:		
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:						
One I	Bdrm:						
	Bdrm:						
Three	Bdrm:						
	NT IS 30% OF INCOME		UTILITIES INCLU	IDED:		MINIMUM W ESTIMATE MAXIMU LIST ES	(Months):
AGE CRITERIA:			WAITI IST	FOR PARKING:		TO REMAIN ON W	
			PARKING INFO:		PET INFO		PETS OK: YES
					One time 30lbs and	pet fee: \$350 cat/do breed restrictions a	og weight limit of apply
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				JENERAL	INFO:	
ASSET LIMIT INF			LEASE:		Covered p controlled communit	parking garage, laur access, elevator, to y center, lobby, rec y garden and bike r	rash chute, reational deck,
INCOME CRITER	IA:						
			FURNISHED:				
]		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	2/7/2022			AREA:	Pearl City
PROJECT NAME:	HALE MOHAL	J II Family	/			PROJECT TYPE:	
ADDRESS:	781 + 779 Kamehameh	na Hwy				PHONE: 808-456	6-9420
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX:	
MANAGER APPLY TO	: Locations				DDRESS: ehameha Hwy., Pe	earl City,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	·						AGGETTED.
APPLY PHONE				FAX: 456-9406		ttp://www.location le-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:
		950 1325	2.5x rent 2.5x rent	595 751			YES
		NO	Water & sewe			MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:			ı		1	O REMAIN ON W	
			WAITL PARKING INF \$50/month	IST FOR PARKING	PET INFO:	CALL EVERY	PETS OK: NO
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY: O:		LEASE:		4 handicapı On-site mai	IHTC, RHTF, HON ped units; nager	
50% of AMI: 1 Per	IA: rson \$25,320, 2 persons rson \$42,220, 2 persons rson \$50,640, 2 persons	\$48,200		osal, refrigerator, window coverings,	2 parking st Visitor park Applications locationsrer walk in (ap office entra 2020 Updat	s: ntals.com plication box outsi nce) e - Info from Web DNSE IN 2023. La:	ide next to rental
	IUM MONTHLY INCOM		3517 4017]		

		Last Comp	lete Update:	2/7/2022				AREA:	Pearl City
PROJECT NAME:	HALE	MOHAL	U II SENIO	R			PROJEC	T TYPE:	Elderly
ADDRESS:	785 Kan	nehameha Hwy	/				PHONE:	808-456	6-9420
CITY:	Pearl Cit	ty	STATE: HI	ZIP:	9678	2	FAX:	456-940	06
MANAGER:	Kainoa	Aitaro				Y ADDRESS:	Pininin - 044		
APPLY TO:	Locatio	ns			Kapal		nt Division, 614 e 102, Honolulu,		OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN:									YES
APPLY PHONE:	808-45	6-9420			FAX: 456-94		IAIL: http://www ble-rentals		srentals.com/afford
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT	MINIM Numb of Peo	per Numb	MUM per of ople:	CAREGIVER Allowed:
One B		163	1470	2 x rent	432				
Two B									
Four B									YES
RENT INFO: REN 9 Units - 30%AM 130 Units - 60% AM Food stamp &/or housed to meet min. is	MI - \$565 MI - \$925 ousing s	5		UTILITIES INC				IMUM W TIMATE MAXIMU	L UNITS: 163 AIT LIST (Months): 0
AGE CRITERIA:				r.			TO REMA		STIMATE 12 AITLIST
All residents must be Applications accept				WAITLI	IST FOR PARK	(ING:	CALL		(Months): 0
applicant reaching	age 55.	·		PARKING INF Parking availa first serve bas	ble on a first co	PET I	NFO:	F	PETS OK: NO
AN OWN RESID		SSET LIMITS: PROPERTY:				GENE	ERAL INFO:		
ASSET LIMIT INFO	D:			LEASE:			unit plus 8 handi ose building with		essible ones; multi- s and social
				6 months - mo		laund conv	ces; locked entr dry; two elevator enient to bus an ent manager. F	s at both d shoppi	buildings; ng; on site
NCOME CRITERIA	A:					HHF	DC, LIHTC, RH IE/CDBG		
Maximum Income 1 Perso 30% AMI \$26,460 60% AMI \$52,920	0/yr	2 Persons \$30,340/yr \$60,480/yr		refrigerator/fre	garbage dispos eezer, vinyl ow coverings,ai	Appli (appli 2021 r NO F	ications: location ication box outs Update - Inform RESPONSE IN 2 te 03/17/2019	ide of ren nation fro	ntal office) m Website
-PERSON MAXIMU				4410					

	La	st Complet	e Update:	6/29/2023			AREA:	Pearl City	
PROJECT NAME:	HALE MO	DHALU	SENIOR	APARTM	IENTS		PROJECT TYPE:	Elderly	
ADDRESS:	800 Third St.						PHONE: 808-456	6-0368	
CITY.	Decad Otto		STATE: HI	ZIP:	00700		FAX: 456-088	35	
CITY:	Pearl City		STATE: HI	ZIP:	96782				
	: Kristine Sem	·	ent Manager		APPLY ADI 800 Third St Pearl City H	t.		OUT-OF-STATE APPLICATION	
APPLY ATTN	:							ACCEPTED: YES	
APPLY PHONE: 808-456-0368					FAX : 456-0885	EMAIL:	halemohalu@cbmg	roup.net	
Unit		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio: 4	15	878	2x rent	420	1	2	YES	
One Bdrm: 132 898			898	2x rent	526	1	2	YES	
	Bdrm:								
Three I								YES	
RENT INFO: RE 132 efficiency one people, \$898mon 32 regular one bed Must respond in a from management	bedroom apts droom apts \$97 timely manner	, 436 sq ft, 73/mon to commur	max 2	UTILITIES IN Water, sewer			MINIMUM WA ESTIMATE MAXIMU		
AGE CRITERIA:							TO REMAIN ON W	12	
One member mus	t be 55+; The o	other memb	er can	WAITL PARKING INI	LIST FOR PARKING:	PET INFO:	CALL EVERY		
	ACCET	LIMITS: N	IONE	Parking incluserve - NOt g	ded; First come first guaranteed		s under 40 lbs, neut license. \$100 pet de	ered or spayed w/	
AN OWN RESID	DENTIAL PRO	=	ES			GENERAL	INFO:		
ASSET LIMIT INF If residential prope mortgage owed) is Income from asse .06% whichever is	erty owned, 2% added to the atts is included v	annual inco	me.	LEASE: 6 months; the 12 months fo	en month-to-month or studios	outside ho Must have personal r	s are allowed with Mome. 5 5 years landlord his eferences or 5 pers	story and 2	
INCOME CRITER	INCOME CRITERIA:					opened 19 Communit	y room, laundry, bb	q area	
Min. income = 2x rent w/some flexibility Maximum Annual Income: 1 person - \$45,850 (studio) (efficiency/1bdrm) (60% AMI); \$55,020 2 persons - \$62,880;				Partly furnish appliances or		18 handica >7 yrs for	e shuttle service handicap accessible units yrs for criminal record ITC + HOME subsidies		
1-PERSON MAXIM	IUM MONTHLY	Y INCOME:		3798		J.			

Printed: 4/2/2024 Page: 25

	Last Comp	lete Update:	7/27/2023			AREA:	Pearl City	
PROJECT NAME:	HALE O' HAU	OLI				PROJECT TYPE:	Elderly	
ADDRESS:	950 Luehu St.					PHONE: 808-455	5-4744	
CITY:	Pearl City	STATE: HI	ZIP:	96782		FAX : 455-438	34	
APPLY TO				APPLY ADI On-Site; Ma	DRESS: nager's Office (#102)	OUT-OF-STATE APPLICATION ACCEPTED: YES	
APPLY ATTN	:: 808-455-4744			FAX: 455-4384		hauoli@cmiweb.noww.haleohauoli.co		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
One I	tudio: 99 Bdrm: 99	0		497	1	3	YES	
Three I								
	NT IS 30% OF INCOM aximum rent, 30% of in		UTILITIES INC Electricity and			MINIMUM W. ESTIMATE MAXIMU		
AGE CRITERIA: Head of household	d must be 62 years or c	older, or	\A(A)\T\		1	TO REMAIN ON W	/AITLIST	
disabled, spouse of	can be 18 and older.		WALLI PARKING INF Parking includ		PET INFO:	Pogs or cats, but n	PETS OK: YES	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		-			they need a pet.		
ASSET LIMIT INF Assets cannot exc	O: ceed maximum income		LEASE: 1 year; then m	nonth-to-month	busline, bea shopping, c Manager or tour.	rden and activity re autifully landscape on-site laundry n site - Unit #102, o	d, close to	
NCOME CRITERIA:				edenergy efficient len closet,lots of , self-cleaning lady, blinds,	Section 8 Transportat	Funding: Low Income Housing Tax Credit 50		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	ete Update:	10/15/2021			AREA:	Chinatown
PROJECT NAME:	HALE PAUAHI	TOWERS				PROJECT TYPE:	Family
ADDRESS:	155 North Beretania St					PHONE: 808-532	2-3535
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 532-353	36
MANAGER APPLY TO	: Michael Johnson			APPLY ADI	DRESS:		OUT-OF-STATE APPLICATION
							ACCEPTED: NO
APPLY ATTN	:: 808-532-3535		ı	FAX: 532-3536	EMAIL:	n/a	
Two I Three I Four I RENT INFO: RE Must have verifiab Must respond to c	Type: Number of UNITS: tudio: 110 Bdrm: 214 Bdrm: 72 Bdrm: 72 NT IS 30% OF INCOME ole residential history. communication from mar r to remain on the waitlist.	agement	Minimum INCOME Required: 2.5xrent 2.5xrent 2.5xrent UTILITIES INCL Water Sewer Trash pick up	SQ FT: 560 729 - 745 937 - 959 UDED:	MINIMUM Number of People	MINIMUM W ESTIMATE MAXIMU	(Months): 24 JM WAIT STIMATE 60
			PARKING INFO \$60/month - 1st \$90/month - 2 c	car	PET INFO:	CALL EVERY	
AN OWN RESIDE	ASSET LIMITS: DENTIAL PROPERTY: O:		below market re \$40/mo LEASE:	ent for 1st space	Send requences send requestions	n: gement to mail it lest with self addres lest by fax	ssed stamped
person - \$67,700 2 \$87,000; 4 person	Income for Below Marke 2 persons - \$77,350; 3 p is - \$96,650; 5 persons - 150; 7 persons - \$119,85	ersons - \$104,400;	FURNISHED: Partly furnished appliances only garbage disposa	. Carpet, drapes,	Fully equip	om manger's office oped Laundry Roon ooms, sprinkler/smo garden area	
	IUM MONTHLY INCOM		5642 6446		1		

	Last Co	mplete Update:	10/15/2021			ADEA.	Lanakila
PRO IECT NAME:	HALE DO'AL	NOT ACC	EDTING AI	PPLICATIONS	•	AREA: PROJECT TYPE:	
	1001 North School		IP HING AI	PELICATIONS	<u>, </u>		,
ADDICESS.	North School	Si.				PHONE: 808-832 FAX: 832-179	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX. 032-178	15
MANAGER	: Joseph Baxa			APPLY ADI			OUT-OF-STATE
APPLY TO	: Hawaii Affordable	Properties Inc.					APPLICATION ACCEPTED: NO
APPLY ATTN	: Joanna Li						NO
APPLY PHONE	: 808-832-3445			FAX : 832-1795		http://hawaiiaffordal properties/	ole.com/residential-
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio: 80	170	NO	390	1	1	YES
One E	3drm: 126	195	NO	544	2	2	YES
Two E	Bdrm:						
Three E	3drm:						
Four E	3drm:						NO
Rent is 30% of inc 1bdrm \$195. All h floor Security Deposit e	NT IS 30% OF INCO ome with studio min andicapped units and qual to 1 month's re ED 8/2/2016******	imum of \$170, e on the first	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
One member mus	t be 62+; spouse mu	ust be 55+.	\/\ \	.IST FOR PARKING:		CALL EVERY	
(Caregivers must I	oe 18+)		PARKING INF		PET INFO:	F	PETS OK: NO
]	ASSET LIMIT	S: YES	Parking include parking in back				
AN OWN RESID	ENTIAL PROPERT	Y: NO			GENERAL	INFO:	
ASSET LIMIT INFO			LEASE:			s are allowed with Mass, spouse may remain	
1 person: \$38,60 2 people: \$44,100			1 year; renew following rece		move to a the 1st floor Yearly income	studio unit. 18 han	dicap units all on
INCOME CRITERI	A:				Transporta	ation to Shopping av harities Hawai'l	
Maximum Annual 2 persons - \$39,20	Income: 1 person - \$	\$34,300	FURNISHED: Partly furnish appliances or	edmajor	Must respo	ond to communicati ent iin a timely man	
1-PERSON MAXIM 2-PERSONS MAXI	UM MONTHLY INC		2858				

		Last Compl	ete Update:	1/6/2022			AREA:	Barbers Point	
PROJECT NAME:	HALI	E UHIWAI	NALU (B	uildings 34	and 35)		PROJECT TYPE:	Single Veterans	
ADDRESS:	91-1078	3 Yorktown St.					PHONE: 808-68	2-1949	
CITY	Kapolei		STATE: HI	ZIP:	96707		FAX : 682-19	70	
OIII.	rapolei		OTATE: IT		90101				
	RTaylo 91-107	le Taylor, Direct or@Cantwell-An 78 Yorktown St. ei HI 96707		Management	APPLY AD 91-1078 Yo Kapolei HI	orktown St.	OUT-OF-STAT APPLICATION ACCEPTED		
APPLY ATTN	: Cloud	oreak Hawaii LL	C / Leasing Te	eam				YES	
APPLY PHONE : 682-1949					FAX : 682-1970	EMAIL:	CloudbreakCommo CloudbreakHawaii		
Unit	Type:	Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER	
		of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:	
S	tudio:	80 / 50	1350	1.5 x rent	208-374	1	1		
One I	Bdrm:								
	Bdrm:								
Three I	Bdrm:								
Four I	Bdrm:							NO	
RENT INFO: RE	NT IS 30	0% OF INCOME	: NO	UTILITIES INC	CLUDED:		ТОТА	AL UNITS: 130	
A clean + sober et \$1200 - \$1350 Bldg 34 - 80 units; Accept HUD VASI subsidies. All unit	; Bldg.35 H vouche	- 50 units. er and other ren		Electric, water	r, sewer, trash				
AGE CRITERIA:							TO REMAIN ON V		
SINGLE ADULT V	/ETERAI	NS		WAITL	IST FOR PARKING:	:	CALL EVERY	(Months): 6	
				PARKING INF	1	PET INFO	: I	PETS OK: NO	
]				1 stall per uni	t				
		SSET LIMITS:				J			
AN OWN RESIDE		PROPERTY:				GENERAL	- INFO: RHTF, Formerly U	S Vets	
7.002.1 2	<u> </u>			LEASE: 1 year			n August 2001	o veis	
				i yeai		Case Mar	nagement Services, nachines, Elevator	Coin laundry,	
INCOME CRITER	IΔ·			1		Applicatio			
Affordable housing	ffordable housing			FURNISHED:		Email: Clo	oudbreakHawaii@C .com	antwell-	
\$250 - \$84,600 pe	Affordable housing \$250 - \$84,600 per year (Depending on subsidy type)			Fully furnished	d, AC	7 I	son.com anagement to email it		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	10/18/2021			AREA:	Waianae
PROJECT NAME:	HALE WAI VIST	ΓΑΙ				PROJECT TYPE:	Family
ADDRESS:	86-084 Farrington Hwy.					PHONE: 808-696	6-8258
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 696-825	58
MANAGER:	Barbara Ramos			APPLY AD			OUT-OF-STATE
APPLY TO:	Locations LLC			Waianae, H Attn: Office	II 96792		APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE:	808-696-8258			FAX: 696-8259	EMAIL:	http://www.location ble-rentals.aspx	srentals.com/afforda
Unit 1	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One B							
Two B	drm: 63	1177	2.5 x rent	595			
Three B	drm: 21	1374	2.5 x rent	751			
Four B	drm:						YES
5 Two Bdrm (30% 51 Two Bdrm (50% handicap accessible 7 Two Bdrm, end un	6 AMÍ*) = \$1177 (3 two	bdrms are	Water and sev own electricity	ver included; Must p	ay	MINIMUM W ESTIMATE MAXIMU	(Months): 1 JM WAIT
AGE CRITERIA:			k			TO REMAIN ON W	STIMATE 1
	must be 18 years or old	der	WAITLI	ST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO	: F	PETS OK: NO
<u> </u>	ASSET LIMITS:	NONE	is monitered, a	urrent motor ation & insurance additional stalls	fish ok		
	ENTIAL PROPERTY:	YES	\$50/month		GENERAL		
ASSET LIMIT INFO):		LEASE:		Funding: I RHTF Applicatio pick up fro	lawai'i Housing Dev Low Income Housin n: locationsrental.com manager's office oplicants are contact	g Tax Credits;
INCOME CRITERIA						interest is needed. bby doors, security	cameras, visitor
	on \$26,460; 2 persons on \$44,100; 2 persons on				parking, c	oin-op laundry facili anager's office.	
1-PERSON MAXIMU	JM MONTHLY INCOME	::	3675		Į.		
2-PERSONS MAXIM	MUM MONTHLY INCOM	1E:	4200				

	Last Compl	ete Update:	10/18/2021			AREA:	Waianae
PROJECT NAME:	HALE WAI VIS	TA II				PROJECT TYPE:	Family
ADDRESS:	86-086 Farrington Hwy.					PHONE: 808-69	6-8258
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 696-82	59
MANAGER	R: Barbara Ramos			APPLY AC 86-084 Fa	DDRESS:	<i>I</i>	OUT-OF-STATE
APPLY TO	D: Locations LLC			Waianae, I		,	APPLICATION ACCEPTED:
APPLY ATTN	\ :						YES
APPLY PHONE	E: 808-696-8258			FAX: 696-8259		http://www.location ble-rentals.aspx	srentals.com/afforda
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
	Bdrm: 99	1177	2.5 x rent	595			
Three		1374	2.5 x rent	751			
	Bdrm:	1011					YES
, ,							
RENT INFO: RE	ENT IS 30% OF INCOME	: NO	UTILITIES INC			TOTA	AL UNITS: 132
83 Two Bdrm (50 (60% AMI) end ur 33 3 Bdrm (60% A	0% AMÍ*) = \$1177; 11 Tv nits -= \$1202; 33; AMI*) = \$1374	wo Bdrm	water, sewer,	gaibage		MINIMUM W ESTIMATE	
* AMI- see income	e eligibility below						STIMATE 1
AGE CRITERIA:	d must be 18 years or ol	der				TO REMAIN ON V CALL EVERY	
l lead of flouserior	u must be to years of or	uei	WAITLI PARKING INF	ST FOR PARKING O: NO	: PET INFO:		PETS OK: NO
				additional stalls	fish ok		2.0 0.0 [110
	ASSET LIMITS:	NONE	\$50/month				
	DENTIAL PROPERTY:	YES			GENERAL		1.0
ASSET LIMIT INF	·O:		LEASE:		Funding: L	awaiʻi Housing Dev .ow Income Housir	
			12 months		RHTF Handicap a bdrm	accessible units - F	Five 2 bdrm & 3 3
INCOME CRITER	IIA:				Application locations re		
50% of AMI: 1 per	rson \$26,460; 2 persons rson \$44,100; 2 persons on 52,920; 2 person \$60,	\$50,400;	Stove, Oven, I disposal, blind	Refrigerator only, is	pick up fro Waitlist ap	m manager's office	e cted via mail when
 1-PERSON MAXIM	MUM MONTHLY INCOMI	Ξ:	4410				
2-PERSONS MAXI	IMUM MONTHLY INCOM	ЛЕ :	5040				

	Last Compl	ete Update:	7/24/2023			AREA:	Haleiwa
PROJECT NAME:	HALEIWA SEN	IIOR CITIZE	N HOUS	ING CENTER		PROJECT TYPE:	Elderly
ADDRESS:	66-477 Paalaa Rd.					PHONE: 808-637	7-6455
CITY:	Haleiwa	STATE: HI	ZIP:	96712		FAX:	
	: Thomas Dulan, Resid	ent Manager		APPLY ADD 1165 Bethel Honolulu, HI	St. 2nd Fl.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						AGGET TED.
APPLY PHONE	: 808-539-9564			FAX: 637-7044	EMAIL:		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 63	0					
Three E	Bdrm:						
Four I	Bdrm:						
RENT INFO: RE Deposit of market	NT IS 30% OF INCOME rent - \$885		ITILITIES INC Vater, \$85 util			MINIMUM W ESTIMATE MAXIMU	(Months): 12
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
or mobility-disable	d OR spouse must be 6: ed. Family members can ate must be 18+, caregi	be	WAITLI	O: NO	PET INFO	CALL EVERY	(Months): 6 PETS OK: NO
be 18+	ASSET LIMITS:	F	Parking not indimited.				,
AN OWN RESID	DENTIAL PROPERTY:	NONE			GENERAL	INFO: 100% Section 8 buil	Iding
7.00ET EIIIII IIII	<u>. </u>		EASE:			pped units	iding
 INCOME CRITER	IA:						
Follows HUD guid	elines.	F	URNISHED: Partly furnishe appliances on				
 1-PERSON MAXIM	IUM MONTHLY INCOM	E: 4	1254]		

		Last Compl	ete Update:	10/13/2021			AREA:	Kakaako
PROJECT NAME:	HALI	EKAUWIL	A PLACE	APARTMEN	ITS	F	PROJECT TYPE:	Family
ADDRESS:	665 Ha	lekauwila St.				F	PHONE: 808-53	7-9000
CITY:	Honolul	u	STATE: HI	ZIP:	96813		FAX:	
MANAGER	: Daniel	le Delgado				nter, 665 Haleka	uwila	OUT-OF-STATE
APPLY TO	: Indigo	Real Estate Se	rvices, Inc.		Street, Horn	olulu, Hi. 96813		APPLICATION ACCEPTED:
APPLY ATTN	l: Live@	halekauwilaplad	eapts.com					
APPLY PHONE	: 808-53	37-9000		ı	FAX: 728-0985	EMAIL: w	ww.halekauwilapl	aceapts.com
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	26	1245	2 x Rent	396	1	2	
One I	Bdrm:	72	1325	2 x Rent	535	1	3	
	Bdrm:	82	1571	2 x Rent	684	2	5	
Three I	Bdrm:	18	1796	2 x Rent	1511	4	7	
Four	Bdrm:	0	0					YES
RENT INFO: RE Call for availability Based on 60% AN may be approved score of 774 & ea score 625 - 900 ha	r; no wait II; Credit with cos rns 4 x re	tlist is maitained t score between igner (who has ent) or increase	350 - 624 min. credit d deposit;	\$60 - Internet/W			MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:						T	O REMAIN ON V	
				WAITLIS	T FOR PARKING:	·	CALL EVERY	
				PARKING INFO	: NO	PET INFO:	F	PETS OK: YES
	Δ	SSET LIMITS:		1 free parking st	tall per unit			
AN OWN RESID						GENERAL IN	NFO:	
ASSET LIMIT INF	O:			LEASE:			la Mae bonds, Ll are footage range	
				12 months			oom - 535 - 597; 2	2 bdrm - 684-782;
INCOME CRITER	IA:						uwilapalceapartm	
Maximum annual 1 peson: \$52,920 2 persons: \$60,48 3 persons: \$68,04 4 persons: \$75,54	0			FURNISHED: ceiliing fans & A bedrooms	.C.; carpeting in	ріск ир тгот	ı manager's office	9
 1-PERSON MAXIN	IUM MO	NTHLY INCOM	E:	4410]		
2-PERSONS MAXI	MUM M	ONTHLY INCO	ИE:	5040				

	Last Comp	lete Update:	7/16/2020			AREA	Chinatown
PROJECT NAME:	HALEWAI'OLU	SENIOR F	RESIDENCE	S		PROJECT TYPE	Elderly
ADDRESS:	1331 River St.					PHONE: 808-80	8-1331
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER	R: Michaels Managemer Fautanu	nt; Resident Mana	ager - Cheryl-Anne		DRESS: tmo.com/hsr		OUT-OF-STATE
APPLY TO	control : drop by						APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	E: 808-439-6490		F	AX:		https://info.tmo.co LiveAtHSR.com	m/hsr
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One	Bdrm:	1304	2 X Rent				
Two	Bdrm:	1627	2 X Rent				
Three	Bdrm:						
Four	Bdrm:				<u> </u>		
3/2023 - \$99 depo		one month	UTILITIES INCLU Water, sewer & tr			MINIMUM W ESTIMATE MAXIM	(Months): 0
EOO/ AMI 44 unito							STIMATE 12
AGE CRITERIA: AllI residents mus	t be 55 and older.					TO REMAIN ON V	
			WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:		PETS OK: YES
	ASSET LIMITS:		unreserved garag	ge parking	1 per pers	on, 30 lb. limit unle	
AN OWN RESID	DENTIAL PROPERTY:				general	INFO:	
ASSET LIMIT INF	O:		LEASE:		private do	access to building g park; 2 activity ro kitchen; communit alking track; bike p	ty courtyard and
I INCOME CRITER	IA:		ļ				
60% AMI - 1 perso	0, 60 & 80% AMI. on - \$27,450; 2 person - on -\$54,900; 2 person - on - \$73,200; 2 person -	\$62,700	FURNISHED: A.C.				
 1-PERSON MAXIN	IUM MONTHLY INCOM	E:	6100]		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	6967				

	Last Comp	lete Update:	7/15/2020			AREA:	Lanakila
PROJECT NAME:	HALI'A HALE	NOT ACC	EPTING A	PPLICATION	IS	PROJECT TYPE:	Elderly
	851 North School St.					PHONE: 808-586	6-7595
	<u> </u>					FAX: 586-752	
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
	t: Thomas Ling Thomas Ling Thomas Ling	pperties Inc.		APPLY AD Apply on-si			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Joanna Li						NO
APPLY PHONE : 808-586-7595				FAX:		http://hawaiiaffordal properties/	ble.com/residential-
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 31	170	NO	408	1	1	YES
One	Bdrm: 10	195	NO	540	2	2	YES
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						YES
RENT INFO: RE	NT IS 30% OF INCOM	E: YES	UTILITIES INC	:LUDED:		ТОТА	L UNITS: 41
\$195.	ome minimum studio \$1 equal to 1 month's rent.	70, 1bdrm	Electricity and	water		MINIMUM W. ESTIMATE	-
Wait time for 1 bo Wait time for 2bdr							JM WAIT STIMATE 72
AGE CRITERIA:	st be 62+; spouse must	he 55+				TO REMAIN ON W	
Caregivers must b	, ,	20 001,	WAITLI PARKING INFO	ST FOR PARKING: O: YES	PET INFO:		PETS OK: NO
			Parking includ	1.20	TET INTO	<u> </u>	LTO OK.
	ASSET LIMITS:	YES					
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			s are allowed with M s, spouse must tran	
Asset Limit: 1 pers 2 persons - \$44,10			1 year; renewa following recer		Opened 1same w/l	•	isier to studio unit.
INCOME CRITER	IA:				Meeting ro	oom w/kitchen and v	wheelchair
Maximum Annual 2 persons - \$39,20	Income: 1 person - \$34	-,300;	FURNISHED:		accessible Funding: l		
2 persons - \$39,20	00.		Partly furnishe appliances onl		NO RESP update 3/1	ONSE IN 2021. Las 17/2019	st completed
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	2858				
2-PERSONS MAY		ME	3266				

		Last Comp	lete Update:	2/7/2022			AREA:	Chinatown	
PROJECT NAME:	HARE	BOR VILL	AGE				PROJECT TYPE:	Family	
ADDRESS:	901 Rive	er St.					PHONE: 808-528	8-2753	
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX: 566-09	14	
MANAGER					APPLY ADI 901 River S Honolulu, H	t.		OUT-OF-STATE APPLICATION	
APPLY TO			ant.					ACCEPTED: YES	
APPLY ATTN: Affordable Housing Dept. APPLY PHONE: 808-625-9573					FAX: 521-2714	EMAIL:	: locationsrentals.com/affordable- rentals.aspx		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:					\square			
	Bdrm:	60	1495		575	1	3		
	Bdrm:	30	1990		750	2	5		
Three									
Four	Bdrm:							YES	
RENT INFO: RE 60% AMI: 1 Bdrm 1 Bdrm \$1,270; 2 120% AMI: 1 Bdrr 140% AMI: 1 Bdrr	\$1,190 ; Bdrm \$1; n \$1410;	; 2 Bdrm \$1,29 355; 2 Bdrm \$1710	0; 80%AMI:	Water + Sewe			MINIMUM W ESTIMATE MAXIMU	(Months): 6	
AGE CRITERIA:				r.				STIMATE 36	
Head of househol	d must be	e 18 years or o	lder	\^/^ T	ICT FOR BARKING.		TO REMAIN ON W		
				PARKING INF	O: PARKING:	PET INFO	: F	PETS OK: NO	
				Parking include	led in rent				
	AS	SSET LIMITS:	NONE						
AN OWN RESIDE		PROPERTY:	NO			GENERAL		baita	
ASSET ENVIT IN	<u> </u>			LEASE:			DATE - Info from we		
				1 year			PONSE in 2021. La d - prior to 2020.	si update	
INCOME CRITER 1 60% \$49,020 \$55 80% \$65,360 \$74 120%\$98,040 \$11 \$151,200 (5 perso	2 5,980 \$63 1,640 \$84 11,960 \$1	,000 \$93,280 \$	\$100,800	FURNISHED: Partly furnishe appliances on					
1-PERSON MAXIN	NOM MUI	NTHLY INCOM	E:	8170		Į.			
2-PERSONS MAX	ІМИМ МС	ONTHLY INCO	ME:	9330					

		Loot Com	oloto Undoto:	4/04/0000				
			olete Update:	1/21/2022			AREA:	
			•	hon) - NOT	ACCEPTING	APP	PROJECT TYPE:	
ADDRESS:	1564-16	673 Meyers St					PHONE: 808-832	
CITY:	Honolul	lu	STATE: HI	ZIP:	96819		FAX: 832-338	85
	,		,					
MANAGER	t: Julie V	Viggett, Acting	g Manager		APPLY AD	DRESS:		
					1002 North Honolulu. H			OUT-OF-STATE APPLICATION
APPLY TO			PPLICATIONS			PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	l: Oahu	applications of	fice					NO
	NOT A	ACCEPTING A	PPLICATONS			EMAIL:	hphaishereforyou.c	org
APPLY PHONE	: 808-83	32-5961			FAX : 832-3461			
Unit	Type:	Number	$\overline{}$	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		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 Minimum Rent: Or Three Bdrm - \$15: applicants who are hpha.myhousing.c status. A usernan	ne Bdrm 2; Four E e on the com to ch ne and p	- \$108; Two B 3drm - \$180. A waitlist are to c nange or checl	drm - \$128; All HPHA go to: k their	UTILITIES INC	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:	unt			le.			TO REMAIN ON W	STIMATE 60
Head of household	d must b	e 18 years or		\A/A ITI	ICT FOR RADIVINIO.		CALL EVERY	
older ******** CLOSEI	D 8/2/20	16*****		PARKING INF	IST FOR PARKING: O: NO	PET INFO	: F	PETS OK: NO
				first come first	t serve			
	A	SSET LIMITS:	YES					
AN OWN RESID		PROPERTY:	NO			GENERAL		
ASSET LIMIT INF		ahu. Assets li	mited to two	LEASE:			OUSING PREFERE derly 2.) The Displace	
times the applicab times that limit for	ole incom	ne for admission		1 year		Families of was deter	w/ service connected of deceased veterary mined to be service terans 6.) Families r	ns whose death e connected. 5.)
INCOME CRITER	IA:						nal Shelters 7.) All o	
50% AMI: 1 perso persons \$42,800; must be <50% are government action	4 persor ea AMI u	n \$47,550. Fan nless displace	nily income d by	FURNISHED: Partly furnishe appliances on		Funding:	State Pub Hsing 10 tions must be 3 yrs	
1-PERSON MAXIM	IUM MO	NTHLY INCOM	ME:	3450		J		

Printed: 4/2/2024 Page: 37

		Last Comp	lete Update:	10/20/2021			AREA:	Moiliili
PROJECT NAME:	HAU:	STEN GA	RDENS			ı	PROJECT TYPE:	Elderly
ADDRESS:	808 Hau	usten St.					PHONE: 808-947	7-3423
CITY:	Honolul	u	STATE: HI	ZIP:	96826		FAX: 955-610	05
MANAGER		ine D. Bareng, Real Estate Se	Business Mana ervices, Inc.	ger	APPLY ADI 808 Hauste Honolulu HI	n St.		OUT-OF-STATE
APPLY TO	: Manag	er's Office			Honolulu Hi	90020		APPLICATION ACCEPTED: YES
APPLY ATTN	I: Busine	ss Manager						. 20
APPLY PHONE	: 808-94	7-3423			FAX: 955-6105		nanager@hausten ww.indigorealesta	
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	49	0		550	1	2	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							NO
All rents are 30% applicant must be	of income	e. Contact info		\$47 allowance water, sewer a	for electricity and all		MINIMUM W. ESTIMATE MAXIMU	(Months): 24 JM WAIT
AGE CRITERIA:				Į.			LIST ES O REMAIN ON W	STIMATE 60
Head of household				WAITLI	IST FOR PARKING:	·	CALL EVERY	
must be 62+. Car proof of caregiving		er 18 allowed.	Must show	PARKING INF	O: YES	PET INFO:	F	PETS OK: YES
]	Δ.	SSET LIMITS:	NONE	Parking includ available	led; Only if	NO PETS A	LLOWED. Service	e Dogs Allowed
AN OWN RESID						GENERAL II	NFO:	
ASSET LIMIT INF	O:			LEASE: 1 year		courtyard ar		of units in central
INCOME CRITER	IA:					Send reque envelope	st with self addres	
Maximum Annual 50% Income Limit 1 person \$42,200 2 persons \$48,200	s			Partly furnishe refrigerator, m wood floors ar	icrowave. Vinyl	T lok up non	i manager 3 onice	
1-PERSON MAXIM	10M MUI	NTHLY INCOM	1E:	3517]		
2-PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	4017				

_	Last Comp	olete Update:	2/7/2022			AREA:	Hawaii Kai
PROJECT NAME:	HAWAII KAI R	<mark>etirement</mark>	and Assis	ted Living Co	<mark>mmu</mark>	PROJECT TYPE:	Retirement
ADDRESS:	428 Kawaihae St.					PHONE: 808-395	5-9599
CITY:	Honolulu	STATE: HI	ZIP:	96825		FAX: 396-082	20
			,				
MANAGER:	Meli Chung, Assisted Michael Weider, Gen		trator	APPLY AD	DRESS:		0117 05 0717
APPLY TO:		iorai managor		On-Site			OUT-OF-STAT APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE:	808-395-9599			FAX: 396-0820	EMAIL	: michael.weider@ho	olidaytouch.com
Unit ⁻	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
Sto	udio:	4500	NO	≤ 541			YES
One B	drm:	6000	NO	≤ 810			YES
Two B	drm:	7000	NO	≤ 1134			YES
Three B	drm:	10000	NO	≤ 1950			YES
Four B	drm:						NO
1 bedrm = large stu bedrm = cottage in weekly housekeepi	NT IS 30% OF INCOM udio info; 2 bedrm = 1 fo; Rent includes 3 me ng, linen service, sche l, jacuzzi, and daily ac	bdrm info; 3 eals per day, eduled	UTILITIES INC All utilities incl Cable TV hool	luded except phone.		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
One tenant must be age restriction	e 55+; other co-tenant	s have no	WAITL	IST FOR PARKING:		CALL EVERY	
			PARKING INF	1114	PET INFO		PETS OK: YES
			Parking include	JEU	with neal	th certificate & up to	uate vaccinations
A N.I. O.VA/A-I. D.E. O.I.D.	ASSET LIMITS:				OENED 11	L INCO.	
AN OWN RESID ASSET LIMIT INFO	ENTIAL PROPERTY:):	TES	15405		GENERAL 81 assist	ed living units.	
None			LEASE: Month-to-mon	nth	STUDIO: ONE BDI	\$3,295 - \$4,020; 39 RM: \$4,395 - \$5,120 BDRM: \$5,495 - 6,2	; 527 - 810 Sq.
INCOME CRITERIA	4 :		,		Acciete	living foot \$0.000/	a and un
No maximum annu	al income.		FURNISHED: Partly furnishe appliances on		NO RESI	living fee: \$2,200/mo PONSE IN 2021 pleted update 9/7/20	·

2-PERSONS MAXIMUM MONTHLY INCOME:

Last Com	plete Update: 6/	1/2020			AREA:	Waipahu
ROJECT NAME: HIBISCUS HI	LLS APARTMEN	NTS			PROJECT TYPE:	Family
ADDRESS: 94-1121 Ka Uka Blvo	l.				PHONE: 808-676	6-3533;
CITY: Waipahu	STATE: HI	ZIP:	96797		FAX : 808-676	6-3533
MANAGER: Tashan Pacheco, R	esident Manager		APPLY ADI	DRESS:		OUT-OF-STA
APPLY TO:						APPLICATION ACCEPTE
APPLY ATTN:						
APPLY PHONE: 808-676-3533		F	AX : 676-3533		www.EAHHousing. hi-management@e	
Unit Type: Number of UNITS:	DENT:	inimum ICOME equired:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm: 80	1650 2	2.5x rent	588	1		
Three Bdrm:						YES
ENT INFO: RENT IS 30% OF INCOI 1550 - \$1650		TIES INCLU r, sewer, tra			MINIMUM W ESTIMATE MAXIMU	(Months):
GE CRITERIA:					LIST ES	STIMATE
ead of Household 18+		WAITLIST	FOR PARKING:		CALL EVERY	
		(ING INFO: 1st stall, \$75	NO 5 2nd stall	PET INFO	F	PETS OK: NO
ASSET LIMITS		, ,				
AN OWN RESIDENTIAL PROPERTY	: YES			GENERAL		
SSET LIMIT INFO:	LEAS			On-site m On-site la	anager undry facilities	
	1 year	ar		Accepts S	ection 8	
COME CRITERIA:					ail to request applic om manager's office	
ax income for 50 units is 80% AMI o income limits on 30 units	Partly		major ceiling fans; air		Housing.org	
PERSON MAXIMUM MONTHLY INCO	ME: 0]		
PERSONS MAXIMUM MONTHLY INC	OME: 0					

	Last Comp	lete Update:	10/13/2021			AREA	: Kakaako
PROJECT NAME:	HONUAKAHA				-	PROJECT TYPE	: Elderly
ADDRESS:	545 Queen St.					PHONE: 808-40)4-9260
CITY:	 Honolulu	STATE: HI	ZIP:	96813	FAX: 522-7917		
	: Cherish - manager at	Na Lei Hulu Kupı	una		DRESS: ent Manager's O Street, Honolulu		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Affordable Housing D	ept.					YES
APPLY PHONE	: 808-404-9260			FAX: 5227917	EMAIL:		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 141	1008	2x rent	350	1	2	YES
Two	Bdrm: 9 Bdrm: Bdrm: Bdrm:	1208	2x rent	488		2	YES
Updates not requi applicants must re housing managen AGE CRITERIA:	oom is taking over 4 yered to remain on waitlist espond to communication nent in a timely manner.	t, however on from	Electricity and	water ST FOR PARKING:	Т		(Months): 0 UM WAIT STIMATE 8 WAITLIST
			PARKING INF Car stall is \$80		PET INFO: Service anir		PETS OK: NO
	ASSET LIMITS:	NONE	mo; requests	are accepted on a stalls have been			
AN OWN RESIDE	DENTIAL PROPERTY:	1./50	assigned.	Stalls Have been	GENERAL II		
ASSET EIMIT IN	<u>o.</u>		LEASE: 12 months		conditioning Transportat Catholic Ch Social servi	ion to Shopping a arities Hawaii	available through time, provided by
INCOME CRITER					opened 199 Funding: LII		
Must be below 60 1 person: \$52,920	% AMI) 2persons: \$60,480		FURNISHED: Major appliand tiles.	ces, carpet or vinyl	handicap ur 3 for vision/	nits-1 one bed, 7	
1-PERSON MAXIM	MUM MONTHLY INCOM	1E:	4410]		

Printed: 4/2/2024 Page: 41

	Last Comp	lete Update:	1/21/2022			AREA:	Kahaluu
PROJECT NAME:	HOOKIPA KAI	HALU'U (HP	HA-wind)	- NOT ACCE	PTIN	PROJECT TYPE:	
	47-330 Ahuimanu Rd.					PHONE: 808-233	3-3766
						FAX: 233-376	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		,	
MANAGER	: Roberta Kahele			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA NOT ACCEPTING AI	PPLICATIONS		Honolulu, HI		CATIONS	APPLICATION ACCEPTED:
APPLY ATTN	l: Oahu applications off						NO
	NOT ACCEPTING AI	PPLICATIONS			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 808-832-5961			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: 8	0		549	1	4	YES
Two I	Bdrm: 32	0		697	2	6	YES
Three I	Bdrm: 16	0		891	3	8	YES
Four I	Bdrm:						
Minimum Rent: \$0 the waitlist are to change or check t	NT IS 30% OF INCOMED, All HPHA applicants vigo to: hpha.myhousing. heir status. A usernamed to access their accordance.	who are on com to e and	JTILITIES INCL Water and allov	LUDED: vance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	Q7-77-7114 C					TO REMAIN ON W	00
Head of household	d must be 18 years or c	older	WAITLIS	ST FOR PARKING:		CALL EVERY	
		1	PARKING INFO		PET INFO	; F	PETS OK: YES
]	ASSET LIMITS:		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			EASE:			ENCES: Domestic Vin transitional shelt	
Carmot own a nou	ise on Ganu		1 year		displaced		
INCOME ODITED					All convic	tions must be 3 yrs	ago unless it's
INCOME CRITER ncome Eligibility =	: 80% of AMI		FURNISHED:			ethamphetamine or	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350 450); ;	Partly furnished appliances only			PONSE IN 2019 oleted update 10/05,	/2017
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4570		Į.		

Printed: 4/2/2024 Page: 42

		Last Compl	ete Update:	11/2/2021			AREA:	Kalihi
PROJECT NAME:	ISLA	ND WEST	ı				PROJECT TYPE:	Family
ADDRESS:	607 No	rth King St.					PHONE: 808-847	7-8465
CITY	Honolu	lu l	STATE: HI	ZIP:	96817		FAX: 808-442	2-0407
3	rionoid	iu	· · · · · · · · · · · · · · · · · · ·		30017			
MANAGER APPLY TO	Manaç	ger West	ling Manager; L	inda West, Office	APPLY ADI	DRESS: am - 5pm M -	F	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY PHONE				F	AX:	EMAIL:	Linda@HSIservices	s.net
Unit	Type:	Number		Minimum	$\overline{}$	MINIMUM	MAXIMUM	CAREGIVER
	. , p c .	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:	400	750	1400	144	1	2adlt,1kid	YES
One I	Bdrm:	3	1565	2750	300	1	3adlt,1kid	
	Bdrm:	1	1800	3050	400	2	4adlt,1kid	
Three I	Bdrm:							NO
RENT INFO: RE Building A - rent is Building B - rent is [169 sq. ft] Min Income requir Plus \$100 for extra timely manner to a AGE CRITERIA: Head of household	s \$700 - s \$750 - rement was person	Min income = \$1 Min income = \$1 vaived if have replayed. Respond to me	1400 1600 p payee; gmt in a	UTILITIES INCLU Electricity and wa			MINIMUM W. ESTIMATE MAXIMU	(Months): 1 JM WAIT STIMATE 1 VAITLIST
time of application	1.			PARKING INFO: \$35/month (first of	YES	PET INFO): F	PETS OK: NO
AN OWN RESID		SSET LIMITS: PROPERTY:		served basis)		GENERAL	_ INFO:	
ASSET LIMIT INFO	O:			LEASE: Month-to-month; Section 8 vouche		back. Sm in own ref	ped access is from pall rooms with no ki frigerator and hot plare unfurnished.	tchen. Can bring
INCOME CRITER	IA:							
No maximum anni	ual incor	ne.		FURNISHED: No carpet. Not fu	ırnished.			
						-		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	olete Update:	1/4/2022			AREA	Waipahu
PROJECT NAME:	JACK HALL					PROJECT TYPE	: Family
ADDRESS:	94-827 Kuhaulua St.					PHONE:	,
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX:	
MANAGER	R: Jesse Johnasen			APPLY ADD	DRESS:		OUT-OF-STAT
APPLY TO	D: https://www.jackhallv	vaipahu.com/					APPLICATION ACCEPTED:
APPLY ATTN	l :						YES
APPLY PHONE	E: 808-468-5102			FAX : 949-7211		https://www.jackha hello@indigoreale	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 104	0	NO	559			YES
Two	Bdrm: 40	0	NO	793			YES
Three	Bdrm:						
Four	Bdrm:						NO
30% to a max of \$ (minus \$103 util. a for two bedrooms	ENT IS 30% OF INCOM \$877 for one bedroom allowance) 30% to a ma (minus \$250 util. allow ts are subject to change	ax of \$1022 ance)	bedrm; \$250 f	allowance \$103 for 1	je	MINIMUM V ESTIMATE MAXIM	(Months): 12
AGE CRITERIA:	to are subject to charige		ĮL				STIMATE 24
	d must be 18 years or o	older	WAITL PARKING INF	IST FOR PARKING:	PET INFO:	TO REMAIN ON V	
			Parking include				· ·
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				J GENERAL	INFO:	
ASSET LIMIT INF			LEASE:	nonth-to-month	5 accessit	Project Based Subble 1 bdrm units. Its on waitlist MUS as change in phon	T call to update
INCOME CRITER max income: 1 be	lA: droom \$39,200; 2 bedr	oom \$50,880	FURNISHED: Partly furnishe appliances on				
I-PERSON MAXIM	MUM MONTHLY INCOM	ΛE:	4475		J.		
2-PERSONS MAXI	IMUM MONTHLY INCO	DME:	5113				

	Last Comp	olete Update:	10/6/2023			AREA:	Chinatown
PROJECT NAME:	KAAHUMANU	HOMES (H	PHA-hon) - NOT ACCE	PTIN	PROJECT TYPE:	Family
	Alokele & Kaiwiula St.			,		PHONE: 808-832	2-3153
	<u> </u>					FAX: 832-318	
CITY:	Honolulu	STATE: HI	ZIP:	96817		,	
MANAGER	: Cynthia Yoshida - Ma	anager		APPLY ADI	DRESS:		
APPLY TO): HPHA NOT ACCEPTING A	PPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications off NOT ACCEPTING A						NO
APPLY PHONE	:: 808-832-5961	TEIOATIONO		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:						YES
Three I	116	0		714 888	3	8	YES
	Bdrm: 36	0		000			
Minimum Rent: \$0 the waitlist are to go change or check to password is neede	NT IS 30% OF INCOM O. All HPHA applicants go to: hpha.myhousing. heir status. A usernam ed to access their accord	who are on com to e and	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	(Months): 36
*********CI OSED	Q/?/?∩1 <i>C</i> *****						00
AGE CRITERIA: Head of household	d must be 18 years or c	older	\^/^ TI	ICT FOR RAPIZING.		TO REMAIN ON W CALL EVERY	
			PARKING INF	IST FOR PARKING: O:	PET INFO:	F	PETS OK: YES
<u> </u>	ASSET LIMITS:	NONE			the catego	nimals ok, but only or ries listed below: under 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL		
Cannot own a hou			LEASE: 1 year			ENCES: Domestic Vin transitional shelt	
			<u> </u>			Fed Low Inc Pub Hs	
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		crystal me	ions must be 3 yrs thamphetamine or ONSE IN 2023	
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4570		Į.		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

		Last Comp	lete Update:	10/6/2023			AREA:	Kahala
PROJECT NAME:	KAH	ALA NUI					PROJECT TYPE:	Retirement
ADDRESS:	4389 M	alia St.					PHONE: 808-218	3-7200
OITV			OTATE TO	710			FAX: 218-71	
CITY:	Honolul	u	STATE: HI	ZIP:	96821		•	
MANAGER	<u>:</u>				APPLY AD	DRESS:		
APPLY TO):				On-Site			OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	l:							
APPLY PHONE	: 808-21	8-7200			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	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			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	
All residents must	be 62 o	rolder		WAITLI	ST FOR PARKING:	<u> </u>	CALL EVERY	
				PARKING INFO	,	PET INFO		PETS OK: YES
ļ				Parking include	ea	Go throug	h interview for: dogs	s & cats
AN OWALDEOU		SSET LIMITS:				OFNEDAL	INIEO	
AN OWN RESIDER ASSET LIMIT INF		. PROPERTY:	YES			GENERAL	orovides discounted	health care in
				No lease - Life	Plan Community	assisted li when tran necessary Resident	ving, memory supp sfer to the on-site c	ort, and nursing are center is eping, linen
INCOME CRITER	IA:					service, s	ecurity, valet parkin	g, transportation,
				FURNISHED: Appliances & F	Floor covering	maintenar NO RESP	ry call system, interince, central air-cond PONSE IN 2023 Deted update 08/9/2	ditioning.

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Compl	lete Update:	10/6/2023			AREA:	Honolulu
PROJECT NAME:	KAHAUIKI VILI	LAGE				PROJECT TYPE:	Family
ADDRESS:	2325 N. Nimitz Hwy.					PHONE:	,
CITY:	Honolulu	STATE: HI	ZIP:	96819		FAX:	
MANAGER	t: Institute for Human Se	ervices		APPLY ADD	PRESS:		OUT-OF-STATE
	: Fax Referrals to 425-5	5168 attention t	o Family Program				APPLICATION ACCEPTED:
APPLY ATTN			F,	AX: 808-425-5168	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:	725		324			
Two I	Bdrm:	900		540			
Three I	Bdrm:						
Four I	Bdrm:						
Rent is deducted a tenats choosing. waitlist are not rec manager will be co	NT IS 30% OF INCOME automatically through the Regular updates to remaguired. Applicant or the contacted if selected for a	e bank of ain on the case	UTILITIES INCLU Water, electricity,	DED: internet, and cable	Э	MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): 0 JM WAIT STIMATE 0
AGE CRITERIA: Kupuna (62+ yrs)						TO REMAIN ON W	
	odial minor children		WAITLIST PARKING INFO: 1 parking per hou	FOR PARKING:	PET INFO	: F	PETS OK: NO
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL	_ INFO:	
ASSET LIMIT INF	O:		LEASE:			iving in Homeless E sitional Shelter for h	
			6 month		will have pliving in su of being h	priority for housing. ubstandard housing nomeless may also a st be minimum 1 ad	Families who are and are at a risk apply.
INCOME CRITER	IA:				under the	table jobs are acce are subject to a Cri	pted)
Maximum Income update."	Limit - 2021 - "Area inco	ome HUD	FURNISHED:		check, inc	are subject to a Crif cluding Sexual Offer PONSE IN 2023	
]			1]		

2-PERSONS MAXIMUM MONTHLY INCOME:

Last Complete Updat	te: 10/5/2023	AREA:	Kahuku
PROJECT NAME: KAHUKU ELDERLY -	HAUOLI HALE	PROJECT TYPE:	Elderly
ADDRESS: 56-154 Puuluana Pl.		PHONE: 808-293-	-1416
CITY: Kahuku STATE:	HI ZIP : 96731	FAX: 293-1416	6
MANAGER: Bonnie Cambra APPLY TO: EAH Housing, Inc.	APPLY ADDI 56-154 Puulu Unit 100	ana PI.	OUT-OF-STATE APPLICATION
APPLY ATTN:	Kahuku, Haw	aii 96731	ACCEPTED: YES
APPLY PHONE: 808-293-1416	FAX:	EMAIL: eahhousing.org ks-management@ea	ahhousing.org
Unit Type: Number of UNITS: RENT	T: Minimum INCOME Required: SQ FT:	MINIMUM Number of People MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	570	1 3	YES
Three Bdrm:			YES
RENT INFO: RENT IS 30% OF INCOME: YES Units come with patio and planter boxes. Applicants must submit changes to their contact information in writing and respond in a timely manner to communication from management.	UTILITIES INCLUDED: Water, sewer and trash	TOTAL MINIMUM WA ESTIMATE (MAXIMUI LIST ES	Months): 60 M WAIT
AGE CRITERIA: All members of the household must be 62 years or	WAITHOT FOR RADIGNO	TO REMAIN ON WA	AITLIST
older at the time of application.	Parking included	PET INFO: PI	ETS OK: YES
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO		GENERAL INFO:	
ASSET LIMIT INFO:	LEASE: 1 year; then month-to-month	If elderly spouse dies, underage remain in unit if can afford the Section 8/HUD; 9% LIHTC Built 2013; on-site manager, recoordinator, laundry room. Transportation to Shopping av	rent. Funding:
, INCOME CRITERIA:		Catholic Charities Hawaii	anabie infough
Maximum Annual Income: 50% AMI or less 1 person \$45,750 2 person \$52,250 3 person \$58,800	FURNISHED: Appliances; ceiling fan, solar water heaters, electric range, microwave, garbage disposal, granite countertops, window coverings.	Application: Complete online or Ask management to mail it Pick up from manager's office Request by email	
 1-PERSON MAXIMUM MONTHLY INCOME:	3813	1	

Printed: 4/2/2024 Page: 48

	Last Comp	lete Update:	10/6/2023			AREA:	McCully
PROJECT NAME:	KALAKAUA H	OMES (HP	HΔ-hon) -	NOT ACCEP	TING	PROJECT TYPE:	
	1545 Kalakaua Ave.			NOT ACCE		PHONE: 808-973	J
						FAX: 973-019	
CITY:	Honolulu	STATE: HI	ZIP:	96826		174. 373 010	
MANAGER	: Ioane Ah Sam			APPLY ADI			
APPLY TO	: HPHA NOT ACCEPTING AI	PPLICATIONS		1002 North Honolulu, H NOT ACCE		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications off NOT ACCEPTING AI						NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	3drm: 127	0		559	1	4	YES
Two I	3drm: 58	0		711	2	6	YES
Three I		0		901	3	8	
Four I	3drm:		ļ.		J	J	
Minimum Rent: \$0 the waitlist are to g change or check the password is neede	NT IS 30% OF INCOM D. All HPHA applicants was go to: hpha.myhousing. heir status. A usernam ed to access their accom	who are on com to e and	UTILITIES INC	CLUDED: owance for electricity		MINIMUM WARE MAXIMU	(Months): 36
AGE CRITERIA:	Q/Q/Q016*****		į.				TIMATE 60
	d must be 18 years or c	older	WAITL	IST FOR PARKING:		TO REMAIN ON W CALL EVERY	
			PARKING INF		PET INFO		ETS OK: YES
1	ASSET LIMITS:	NONE			the catego	nimals ok, but only on ories listed below: under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO			LEASE: 1 year		homeless displaced	ENCES: Domestic V in transitional shelte Fed Low Inc Pub He	ers; involuntary
						tions must be 3 yrs	
INCOME CRITERIA: ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450			FURNISHED:			ethamphetamine or s	
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	4570		Į.		

Printed: 4/2/2024 Page: 49

	Last Comp	lete Update:	7/18/2023			AREA:	Ala Moana
PROJECT NAME:	KALAKAUA VI	STA				PROJECT TYPE:	Elderly
ADDRESS:	1628 Kalakaua Ave.					PHONE : 808-946	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 949-552	25
MANAGER	: Kainoa Kuamoo, Res	ident Manager		APPLY ADI			OUT-OF-STATE
APPLY TO	: Locations			Honolulu, H	-		APPLICATION ACCEPTED:
APPLY ATTN	l: Property Managemen	t Division					YES
APPLY PHONE	: 808-738-3100			FAX: 735-1978		nttp://www.location ple-rentals.aspx	srentals.com/afforda
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 80	1065	2xrent	430	1	2	YES
Two E	Bdrm:						
Four E							YES
RENTINEO: RE	NT IS 30% OF INCOME	=: NO	UTILITIES INC	YLIDED:		TOTA	AL UNITS: 80
8 units at \$695; 72				, sewer, and trash		MINIMUM W	'AIT LIST
gross income requ							JM WAIT
AGE CRITERIA:			Į.			LIST ES TO REMAIN ON W	STIMATE 24
All residents must	be 62 or olderat the time	ne of	\^/^ITLI	ST FOR PARKING:		CALL EVERY	
application.			PARKING INF		PET INFO:	F	PETS OK: NO
			\$40/month				
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:				J GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			ower only; no batht	tub.
			1 year; then m	onth-to-month	Air-Condition Has CSS condition opened 20	ase manager 2 da	iys/wk
INCOME CRITERI	IA·					IHTC, RHTF, Sect	ion 8
Maximum income 30% of AMI: 1 per	NCOME CRITERIA: Maximum income requirements: 30% of AMI: 1 person \$27,510; 2 persons \$31,440 50% of AMI: 1 person \$45,850; 2 persons \$52,400		FURNISHED: Partly furnishe appliances only		Pick up fro	n: from website m manager's office gement to mail it	Э
I-PERSON MAXIM	IUM MONTHLY INCOM	IE:	3821				

	Last C	omplete Update:	10/6/2023			AREA:	Mililani
PROJECT NAME:	KALANI GA	RDENS				PROJECT TYPE:	Family
ADDRESS:	95-081 Kipapa Dr.					PHONE: 808-62	3-9811
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 623-72	12
MANAGER	R: Heather Weddle			APPLY A On-Site	DDRESS:		OUT-OF-STATE
APPLY TO):						APPLICATION ACCEPTED:
APPLY ATTN	I: Kalani Gardens						YES
APPLY PHONE	E: 808-623-9811			FAX: 623-7212	EMAIL:	website: www.eah kg-management@	
	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Two	Bdrm: 86	1236	YES	750	2	5	YES
Three	Bdrm: 31	1374	YES	900	3	7	YES
Four	Bdrm:						YES
Rent cannot exce One person house New rents as of 1 2BR \$1126 - \$123 3BR \$1253 - \$137		lify Applications	UTILITIES INC Gas, electricity sewer	CLUDED: y and water, trash a	and	MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:						TO REMAIN ON V	
time of application	d must be 18 years า.	or older at the	WAITL PARKING INF		PET INFO		PETS OK: NO
	ASSET LIM	ITS: NONE					
	DENTIAL PROPER	TY: YES			GENERAL		
ASSET LIMIT INF	O:		LEASE: 1 year		_	Section 8 and LIHT PONSE IN 2023	С
persons - \$65,280	me: 2 persons - \$58); 4 persons - \$72,4	80; 5 persons -	FURNISHED:	edmaior	-		
	ns - \$84,120; 7 pers y due to different c		appliances on				
7 1-PERSON MAXIN	NUM MONTHLY IN	COME:	,		lt		
2-PERSONS MAX	IMUM MONTHLY II	NCOME:	4820				

	Last Com	plete Update:	10/6/2023			AREA:	Chinatown
PROJECT NAME:	KALANIHUIA	(HPHA-hon) - NOT .	ACCEPTING	APPLI	PROJECT TYPE:	Elderly
ADDRESS:	1220 Aala St.	•	•			PHONE: 808-586	6-9724
CITY	J	CTATE: U				FAX: 586-972	28
CITY:	Honolulu	STATE: HI	ZIP:	96817		·	
	: Sol Sentous			1002 No	ADDRESS: rth School St.		OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING A			NOT AC	CEPTING APF	PLICATIONS	ACCEPTED: NO
APPLY ATTN	: Oahu applications of NOT ACCEPTING A				EMAI	L: hphaishereforyou.o	ora
APPLY PHONE	: 808-832-5961			FAX: 832-3461		,,,	•
Unit	Type: Number of UNITS:	RENT:	Minimun INCOME Required	E COET.	MINIMUI Number of People	Number of	CAREGIVER Allowed:
S	tudio: 60	0		420	1	2	YES
One I	30	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 t	NT IS 30% OF INCOMO. All HPHA applicants go to: hpha.myhousing heir status. A usernared to access their acco	s who are on g.com to me and	UTILITIES II			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
Head of household older, or disabled	d or spouse must be 6	2 years or	WAITPARKING IN	TLIST FOR PARKIN NFO:	PET INF	CALL EVERY	
	ASSET LIMITS	: NONE					
AN OWN RESID	DENTIAL PROPERTY	: NO			GENER	AL INFO:	
ASSET LIMIT INF			LEASE: 1 year		victims Displace of incore If elder	RENCES:(A) domest ; homeless in transition ed. (B) substandard h me. (C) others = indefindies, under age 62 sp	nal shelter; invol. nsing; rent >50% nite wait. ouse may rent
INCOME CRITER	IA:				Income		I .
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	ity = 80% of AMI ual Income: 1 person - \$53,250; i0,900; 3 persons - \$68,500; i6,100; 5 persons - \$82,200; i8,300; 7 persons - \$94,350; All convictions must be 3 yrs ago crystal methamphetamine or sex crystal methamphetamine or sex last completed update 10/05/20				sex offender		
1-PERSON MAXIN	IUM MONTHLY INCO	ME:	4570				

Printed: 4/2/2024 Page: 52

		Last Con	nplete	e Updat	e:	10/	6/2023				AREA:	Kalihi
PROJECT NAME:	KALI	HI VALL	ΕY	HOM	IES	(HP	HA-ho	on) -	NOT AC	CEPT	PROJECT TYPE:	Family
ADDRESS:	2250 Ka	alena Dr.				•					PHONE: 808-832	2-3336
			_			_	=				FAX: 832-338	35
CITY:	Honolul	u		STATE:	HI		ZIP:		96819		,	
MANAGER	: Julie W	/iggett							APPLY AD			OUT-OF-STATE
APPLY TO	- HDHA								1002 North Honolulu, H	II 96817		APPLICATION
ALLETTO		CCEPTING	APPL	LICATIO	NS	NOT ACCEPTING APPLICATIONS				ACCEPTED: NO		
APPLY ATTN		applications of		ICATIO	MC							NO
ARRI V RUONE			AFFL	LICATIO	INO			FAV	022 2464	EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 000-03	12-5901						FAX	832-3461			
Unit	Type:	Number					linimum NCOME			MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:		RENT	:		equired:		SQ FT:	Number of People	Number of People:	Allowed:
Si	tudio:											
One E	3drm:	52	ĺ	0					494	1	4	YES
Two E	Bdrm:	60	i	0		<u></u>			674	2	6	YES
Three E	3drm:	123	i	0					834	3	8	YES
Four	Bdrm:		l	0		F			1115	4	10	YES
Min. Rent: \$0; 26 - applicants who are hpha.myhousing.c	RENT INFO: RENT IS 30% OF INCOME: YES Min. Rent: \$0; 26 5 Bdrm units. All HPHA applicants who are on the waitlist are to go to: hpha.myhousing.com to change or check their status. A username and password is needed to			UTILITIES INCLUDED: Water and allowance for electricity				MINIMUM W. ESTIMATE MAXIMU	(Months): 36			
	ai it.										LIST ES	STIMATE 60
AGE CRITERIA: Head of household	d must be	e 18 vears or	olde	r	_						TO REMAIN ON W CALL EVERY	
		o . o , ou. o o.	0.00			DADI	WAITLI SING INF		OR PARKING:	PET INFO	۸۰ ـ ـ ـ	PETS OK: YES
							space per		INO		nimals ok, but only o	
	Δ9	SSET LIMITS	s. N	ONF							ories listed below: under 25 lbs) or cat	
AN OWN RESID			_		-					GENERAI	L INFO:	
ASSET LIMIT INFO						LEAS	SE:				ENCES: Domestic V	
Cannot own a hou	ise on Oa	ahu				1 yea				displaced	s in transitional shelte I.	ers; involuntary
1										Funding:	Fed Low Inc Pub Hs	sing 100%
INCOME CRITERI	ιΔ.									All convic	ctions must be 3 yrs	ago, unless it's
INCOME CRITERIA: ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450				Partl	NISHED: y furnishe ances on			. `	ethamphetamine or s	sex offender		
1-PERSON MAXIM	IOM MUI	NTHLY INCC	ME:			 4570				J		

Printed: 4/2/2024 Page: 53

	Last Compl	ete Update:	10/6/2023			AREA:	Hawaii Kai	
PROJECT NAME:	KALUANUI SE	NIOR APAR	TMENTS			PROJECT TYPE:	Elderly	
ADDRESS:	6950 Hawaii Kai Dr.					PHONE:		
CITY:	Honolulu	STATE: HI	ZIP:	96825		FAX:		
MANAGER	t: Mike Klein, Compliand	ce Manager		APPLY ADD 394-6688	DRESS:		OUT-OF-STATE APPLICATION	
APPLY TO	: call for viewing and ap	pplication					ACCEPTED:	
APPLY ATTN	l:							
APPLY PHONE	: 808-394-6688			FAX:	EMAIL:	halealiigroup@yah	oo.com	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	Bdrm: 10	1228		525				
Two I	Bdrm: 21	1473		600				
	Bdrm:						NO	
Lower rent units for 3 1bdrm 3 2bdr	or people at <50%AMI		TILITIES INCL			MINIMUM W ESTIMATE MAXIMU	(Months): 12 JM WAIT	
AGE CRITERIA:		, i				LIST ES	STIMATE 24 VAITLIST	
One member mus	st be 62+; spouse can be	e 18+	WAITLIS	T FOR PARKING:		CALL EVERY	(Months): 6	
			ARKING INFO		PET INFO:	F	PETS OK: NO	
	ASSET LIMITS:		Parking \$40 mo	onth				
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:		
ASSET LIMIT INF	O:	_	EASE: year		and ceiling ventilation have tub,	1/15/2003 all units of fans in bdrms and lever handles on of 2bdrm have showed the TV	I living room, cross doors. 1bdrm units r with low lip.	
NCOME CRITER	IA:					ry Lounge with TV, Tax Credit 100% RHTF	a/c. Fullding. Low	
INCOME CRITERIA: 30% of AMI: 1 person \$21,650; 2 persons \$24,750 50% of AMI: 1 person \$36,050; 2 persons \$41,200			URNISHED: Partly furnished appliances only			ONLY PARTIAL RESPONSE IN 2023 Last completed update 10/20/17		
	IUM MONTHLY INCOM		004					

		Last Comp	lete Update:	10/6/2023			AREA:	Kakaako
PROJECT NAME:	KAM	AKEE VIS	TA				PROJECT TYPE:	Family
ADDRESS:	1065 Ka	awaiahao St.					PHONE: 808-594	4-0121
CITY:	Honolul	u	STATE: HI	ZIP:	96814		FAX : 594-012	23
MANAGER	R: Toshi I	Hines			APPLY AD			OUT-OF-STATE
APPLY TO): Hawaii	i Affordable Pro	perties Inc.			001		APPLICATION ACCEPTED:
APPLY ATTN	l: Kamal	kee Vista						YES
APPLY PHONE	E: 808-59	94-0121			FAX: 594-0123	EMAIL:	kkamakeevista@hahttp://hawaiiafforda	awaii.rr.com ble.com/residential-
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	90	1510	3338	570	1		YES
	Bdrm:	136	1821	4115	720	2		YES
Three		130	1021	4110	720	2		
	Bdrm:							YES
Rental Assistance \$175 deducted from Deposit = 1 month	om marke		nits (max of	Water			MINIMUM W ESTIMATE MAXIMU	
]				ĮI			LIST ES	STIMATE 12
AGE CRITERIA: Head of househol	d must b	e 18 vears or o	lder				TO REMAIN ON W	
		,		WAITL PARKING INF	IST FOR PARKING: O:	PET INFO	: F	PETS OK: NO
					75 each additional			,
	A	SSET LIMITS:	NONE	Stall				
AN OWN RESII		PROPERTY:	YES			GENERAL		
Cannot own other		unit in this cou	nty.	LEASE: 1 year			can be converted to s are allowed with N	
				i yeai		Send requ	n: agement to mail it uest with self-addres	ssed stamped
INCOME CRITER No maximum ann		ne		FURNISHED:			om manager's office	e
Min Income for m	arket 1 b			Partly furnishe appliances on			oy email or fax PONSE IN 2023. La: i/19/2019.	st Completed
 1-PERSON MAXIN	MUM MOI	NTHLY INCOM	IE:	3700		J		
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	4463				

	La	st Compl	ete Update:	10/6/2023			AREA:	Waipahu
PROJECT NAME:	KAMAII	I - HOʻ	OLULU F	I DFRI Y -	NOT ACCEP	TING	PROJECT TYPE:	
	94-941 Kauol				TOT ACCE		PHONE : 808-67	1 '
			_				FAX: 675-00	
CITY:	Waipahu		STATE: HI	ZIP:	96797		,	
	R: Venus R. Ka		perties Inc.		APPLY AI On-Site Ap			OUT-OF-STATE
APPLY ATTN	I: Venus R. Ka	itano .						ACCEPTED: NO
APPLY PHONE	E: 808-675-009	9			FAX: 675-0098	EMAIL	: http://hawaiiafforda properties/	able.com/residential-
Unit		mber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 1	71	170		443	1	1	YES
One	Bdrm:	50	195		599	2	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE Minimum rent for \$195 or 30% of in ********Waitlist C	studio is \$170 come, whichev	and for on	e bdrm is	Electricity and			MINIMUM W ESTIMATE MAXIMI	(Months): 36
AGE CRITERIA:				r			TO REMAIN ON V	30
Head of househol				\^/^ ITI	IST FOR PARKING		CALL EVERY	
time of application old.	n, spouse/partn	er must b	e 55 years	PARKING INF	O:	PET INFO):	PETS OK: NO
	ASSET	LIMITS:	YES					
AN OWN RESI	DENTIAL PRO	PERTY:	YES			GENERA	L INFO:	
ASSET LIMIT INF		untv	Asset	LEASE:			rs are allowed with I	
Limit: 1 person - \$ 2 persons - \$44,1	38,600,	unty.	Associ	Month-to-mor	nth	opened 1 Large ga Meeting/	993-Kamalu 1994-	Hoʻolulu chen
INCOME CRITER	IA:					Catholic	Charities Hawai'i only in designated a	
Maximum Annual 1 person - \$34,30 2 persons - \$39,2	0			Partly furnish appliances or Central heat; system	edmajor	unit)	PONSE in 2023. Las	
I 1-PERSON MAXIN	MUM MONTHL	Y INCOME	≣:	2858		Į		
2-PERSONS MAX	IMUM MONTH	LY INCOM	ΛΕ:	3267				

	Last Comple	ete Update:	10/6/2023			AREA:	Kalihi	
PROJECT NAME:	KAMEHAMEHA	HOMES	(HPHA-ho	n) - NOT AC	CCEPTI	PROJECT TYPE:	Family	
	1541 Haka Dr.					PHONE: 808-832	2-3153	
	<u> </u>	_				FAX: 832-3188		
CITY:	Honolulu	STATE: HI	ZIP:	96817		1002 0		
MANAGER	: Cynthia Yoshida - Man	ager			ADDRESS:			
APPLY TO	: HPHA NOT ACCEPTING API	PLICATIONS		Honolulu	rth School St. I, HI 96817 CEPTING APPL	APPLICATIONS ACCE		
APPLY ATTN	l: Oahu applications offic NOT ACCEPTING API						NO	
APPLY PHONE	: 808-832-5961			FAX : 832-3461	EMAIL:	: hphaishereforyou.c	org	
	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								
Minimum Rent: \$0 All HPHA applicar to: hpha.myhousir	NT IS 30% OF INCOME: for Federal Low Income has who are on the waitlish ng.com to change or chec ne 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:			į¢.			TO REMAIN ON W	STIMATE 60	
	d must be 18 years or old	ler	\ \ / \ T	IST FOR PARKIN	G:	CALL EVERY		
			PARKING INF		PET INFO): F	PETS OK: YES	
	ASSET LIMITS:	NONE	Included	ŕ	the categ	nimals ok, but only ories listed below: under 25 lbs) or cat		
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	L INFO:		
Cannot own a hou			LEASE: 1 year		PREFER homeless displaced	ENCES: Domestic \ s in transitional shelt l.	/iolence victims; ers; involuntary	
					Funding:	Fed Low Inc Pub Hs	sing 100%	
INCOME CRITER	IA:					ctions must be 3 yrs ethamphetamine or		
ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450			FURNISHED: Partly furnishe appliances on		_ '	NO RESPONSE IN 2023		
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4570		P			
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220					

	Last Complet	e Update:	10/6/2023				Kaneohe
DDO IECT NAME:			/UDUA	wind) NOT	CCE F	AREA: PROJECT TYPE:	Family
	KANE'OHE APA		(ПРПА-	-wina) - NOT A			J
ADDRESS.	45-507 & 45-513 Pania R	a.			·	PHONE: 808-233	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX : 233-376	9
MANAGER	: Roberta Kahele			APPLY ADD	PRESS:		
APPLY TO): HPHA NOT ACCEPTING APPI	LICATIONS		1002 North S Honolulu, HI NOT ACCER		ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APP						NO
APPLY PHONE	E: 808-832-5961			FAX : 832-3461	EMAIL: hp	phaishereforyou.o	rg
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						YES
	Bdrm: 5 19	0	<u> </u>	600	2	6	YES
Three				600	2	0	
Four	Bdrm:						
Minimum Rent: \$0 All HPHA applicar to: hpha.myhousir	NT IS 30% OF INCOME: Of for Federal Low Income paths who are on the waitlist and come to change or checking and password is neede unt.	projects. Ware to go	TILITIES INC /ater and allo	CLUDED: owance for electricity		MINIMUM WA ESTIMATE ((Months): 36
AGE CRITERIA:		į.			Т	LIST ES O REMAIN ON W	AITUST 60
	d must be 18 years or olde	er	WAITL	IST FOR PARKING:	·	CALL EVERY	
		P.	ARKING INF	O:	PET INFO:		ETS OK: YES
]	ASSET LIMITS: N		ncluded		the categorie	nals ok, but only o es listed below: der 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:	0			GENERAL IN	NFO:	
Cannot own a hou			EASE:			CES: Domestic V transitional shelte	
					Funding: Fe	d Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:					ns must be 3 yrs a	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,25 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	50;	JRNISHED: artly furnishe ppliances on		1	NSE IN 2023	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOME:	4	570		p.		
2-PERSONS MAXI	IMUM MONTHLY INCOME	: 5	220				

	Last Comp	olete Update:	7/20/2023			AREA:	Kaneohe
PROJECT NAME:	KANEOHE EL	DERLY				PROJECT TYPE:	Elderly
ADDRESS:	45-457 Meli Pl.					PHONE: 808-235	5-4399
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX: 235-003	33
	R: Community Manager Richard Char (rchar	@cmiweb.net) 808-	859-6514	Leasing Off			OUT-OF-STATE APPLICATION
	D: Cambridge Managen Friday, 9:00am - 1:00		ours - Monday	· -			ACCEPTED: YES
APPLY ATTN	l :						
APPLY PHONE	E: 808-235-4399			FAX: 235-0033		kaneohe@cmiweb. https://www.kaneol	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 44	0		588		3	YES
	Bdrm: 44			300		3	
Three	Bdrm:						
Four	Bdrm:						NO
			caken off the re	2 mo. utility allowance ent.	3		(Months): 36 JM WAIT
AGE CRITERIA:		į.				LIST ES	STIMATE 36
Head of househol	d must be 62 years or o		WAITL	ST FOR PARKING:		CALL EVERY	
caregivers allowed	amily members, roomm d at any age.	Í	PARKING INF	O: YES	PET INFO:		PETS OK: YES
J	ASSET LIMITS:		Parking includ	led if available		sit; one dog/cat/ca c; breed/species res	
AN OWN RESI	ASSET LIMITS. DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O:		EASE:			nhanced complex; ent; community roc	
			1 year		convenien landscape		
INCOME CRITER					Section 8 Application	100%	3
	income: 1 person \$40,1 0, 3 persons \$52,500		flooring. Ampl	ly. Wood-style	Send reques	gement to mail it est with self-addres	·
I 1-PERSON MAXIN	NUM MONTHLY INCOM	ле: ;	3404		1		
2-PERSONS MAXI	IMUM MONTHLY INCO	DME:	3887				

	Last Compl	ete Update:	10/6/2023			AREA:	Lanakila
PROJECT NAME:	KAPUNA I - NO	T ACCEP	TING APF	PLICATIONS		PROJECT TYPE:	Elderly
ADDRESS:	1015 North School St.					PHONE: 808-845	5-2130
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: 845-668	34
	Tionolaid	<u> </u>		00017			
	R: Sherry Prevo D: Sage Apartment Com	munities, Inc.			DDRESS: th School St. HI 96817		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l :						YES
APPLY PHONE	E: 808-845-2130			FAX: 845-6684	EMAIL:	kapunaonesage.co	m
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 162	0		530			YES
Three I	Bdrm:						NO
RENT INFO: RE	ENT IS 30% OF INCOME	: YES	UTILITIES IN	CLUDED:		TOTA	L UNITS: 162
minimum rent \$25 Annual update bas	sed on anniversary date respond to mail from ma	of	Electricity and	d water		MINIMUM W ESTIMATE MAXIMU	AIT LIST (Months): 1
	10/12/21 10/19/21 for a	lotton	Į.				STIMATE 9
AGE CRITERIA:	lication, Head of househ	old must				TO REMAIN ON W	
be 62 years or old	ler, or 18+ w/ disability.	Spouse	WAITL PARKING INF	LIST FOR PARKING FO: YES	B: PET INFO		PETS OK: YES
	mily members, roommated with mgmt approval.	e, and	Parking include			oved reasonable ac	
	ASSET LIMITS:	NONE			anyone re	questing pet	
AN OWN RESI		YES			GENERAL	. INFO:	
ASSET LIMIT INF			LEASE:		office mus	st be notified if appli	cant's gross
				month-to-month.	Funding: Tax Credi Transport	ncome goes up or d Section 8 and Low I t 100% ation to Shopping a Charities Hawai'i upo	ncome Housing vailable through
INCOME CRITER						e in personally to up with form sent to ap	
	income is 80% AMI: 1 pensons - \$77,350, 3 persons -		FURNISHED: Partly furnish			ONSE IN 2023	
PREF: VERY LO	W INCOME (<30% OF N	MEDIAN)	appliances or				
1-PERSON MAXIM	MUM MONTHLY INCOME	≣:	5642		<u> </u>		
2-PERSONS MAXI	IMUM MONTHLY INCOM	ЛЕ :	6448				

		Last Compl	ete Update:	10/6/2023				AREA:	Waianae
PROJECT NAME:	KAU'I	OKALAN	I (HPHA-I	ee) - CLOS	SED		PROJECT	T TYPE:	Family
ADDRESS:	85-658 Fa	arrington Hwy.		<u> </u>			PHONE:	808-697	7-7171
CITY:	Waianae		STATE: HI	ZIP:	96792		FAX:	697-717	74
MANAGER	R: Lui Fale	afine				ADDRESS:			OUT-OF-STATE
APPLY TO): HPHA					, HI 96817			APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu ap	oplications office	ce						NO
APPLY PHONE	: 808-832	-5960			FAX : 832-3461	EMAIL:			
		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXI Numb Ped		CAREGIVER Allowed:
	Bdrm:								
	Bdrm:								
Three I	!	50	0		987	3	.	8	YES
	Bdrm:	30							
				,	,	,	,		
RENT INFO: RE	NT IS 30%	6 OF INCOME	YES	UTILITIES INC				TOTA	L UNITS: 50
Minimum Rent: \$5 projects PREFERI victims; homeless displaced. NOT ACCEPTING	ENCES: D in transition	omestic Viole onal shelters;	nce	Water and allo	owance for electric	ity only	ES ⁻	TIMATE MAXIMU	AIT LIST (Months): 36
AGE CRITERIA:	5EU 8/3/30	16*****		p.			TO REMA		TIMATE 60
Head of household	d must be	18 years or ol	der	\\/ \ I.T.I	IST FOR PARKIN	C.			(Months):
				PARKING INF		PET INFO):	F	PETS OK: YES
	ASS	SET LIMITS:	NONE	Parking one s	tall	the categ	nimals ok, t ories listed l under 25 lbs	below:	one from each of
AN OWN RESID		PROPERTY:	NO			GENERAL	_ INFO:		
ASSET LIMIT INF		nu		LEASE: 1 year		any corre updates r update ar composit	spondence needed, how ny contact ir	from HP vever, ap nformation d check v	a timely manner to HA. No waitlist oplicants must n/household vaitlist status via
INCOME CRITER						Usernam	e/password Fed Low Ind	to do so).
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 00; 3 perso 00; 5 perso 00; 7 perso	person - \$53, ons - \$68,500; ons - \$82,200;		FURNISHED: Partly furnishe appliances on		All convic	tions must l	be 3 yrs a mine or a	ago, unless it's sex offender
1-PERSON MAXIM	MUM MON	THLY INCOM	E :	4570		r			
2-PERSONS MAXI	IMUM MON	NTHLY INCOM	ИЕ :	5220					

	Last Com	plete Update:	5/17/2023			AREA:	Kakaako
PROJECT NAME:	KAUHALE KA	KAAKO			1	PROJECT TYPE:	Family
ADDRESS:	860 Halekauwila St.					PHONE: 808-593	3-9035
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX: 591-025	50
	t: Laura Kim	roperties Inc.		APPLY AD On-Site Ste			OUT-OF-STATE
	I: Kauhale Kakaako	•					ACCEPTED: YES
APPLY PHONE	E: 808-593-9035			FAX: 591-0250	h	auhalekakaako.co ttp://hawaiiaffordal	m ble.com/residential-
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 116	1832	4350	578	1	4	YES
Two I	Bdrm: 152	2167	5600	728	2	5	YES
Four	Bdrm:						YES
Rent increases pla	ENT IS 30% OF INCOM	III. IIIO	Water, Sewer,			MINIMUM W. ESTIMATE MAXIMU	
AGE CRITERIA:					Т	O REMAIN ON W	/AITLIST
Head of househole time of application	d must be 18 years or n.	older at the	WAITLI PARKING INFO	ST FOR PARKING: O: NO	PET INFO:	CALL EVERY	(Months): 6 PETS OK: YES
	ASSET LIMITS	: NONE		ond Parking (Non-residents -	Pets permit	ted with a \$200 ref	i.
AN OWN RESIDE	DENTIAL PROPERTY O:	: YES		guest parking.	GENERAL I	NFO: Lanai, AC, renova	ted & landscaped
			LEASE: 1 year		recreationa court, barbe center and Manager/M	I deck with a baske ecue areas, playgre convenience store gmt Office, and Ce	etball/pickleball ound, fitness . On-site Resident entral Laundry
depends upon nur	IA: cannot exceed 100% mber of occupants and persons - \$141,100, an	d size of unit.	with hood, refr kitchen sinks,	ed- carpet, range rigerator, double blinds, ceiling able jacks, dead	up from ma hawaiiafford *Along with applicants r well as resp		online: m
	MUM MONTHLY INCO		7625 8708		1		

	Last Comp	elete Update:	10/6/2023			AREA:	Wahiawa
PROJECT NAME:	KAUHALE NA	NI (HPHA-	cen) - NOT	ACCEPTING	APP	PROJECT TYPE:	
	310 North Cane St.					PHONE: 808-622	2-6360
OITY]	OTATE III				FAX: 622-636	62
CITY:	Wahiawa	STATE: HI	ZIP:	96786		•	
MANAGER	: Jimary Quinones			APPLY ADD			OUT-OF-STATE
APPLY TO	: HPHA			Honolulu, HI	96817	CATIONS	APPLICATION
	NOT ACCEPTING A	PPLICATIONS		NOT ACCE	PTING APPLIC	CATIONS	ACCEPTED: NO
APPLY ATTN	I: Oahu applications off NOT ACCEPTING A						110
APPLY PHONE		1 210/110110		FAX: 832-3461	EMAIL:	hphaishereforyou.c	org
ATTETTTIONE	000 002 0001			TAX. 002 0401			
Unit	Type: Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
Si	tudio:						
One I	Bdrm: 14	0		564	1	4	YES
Two E	Bdrm: 16	0		727	2	6	YES
Three E	Bdrm: 20	0		958	3	8	YES
Four E	Bdrm:						
Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.	NT IS 30% OF INCOM of for Federal Low Incom Domestic Violence vict itional shelters; involunt PLICATION SINCE 8/2	ne projects ims; cary	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be 18 years or o	older	WAITI	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO:	F	PETS OK: YES
]	ASSET LIMITS:	NONE	Parking includ	led	the catego	nimals ok, but only or ries listed below: under 25 lbs) or _cat	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INFO	-		LEASE:		*Applicant	s must respond to	any
Cannot own a hou	ise on Oanu		1 year		correspond manner. N applicants	dence from HPHA, lo waitlist updates r must update any c hold composition ir	in a timely needed, however, contact
INCOME CRITERI	IA:				waitlist sta	tus via hpha.myhoi name/password to	using.com (will
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350););	FURNISHED: Partly furnishe appliances on		Funding: F All convict crystal me	Fed Low Inc Pub Hs ions must be 3 yrs thamphetamine or ONSE IN 2023	sing 100% ago, unless it's
	NUM MONTHLY INCOM		4570				

	Last Com	plete Update:	10/6/2023			AREA:	Waimanalo
PROJECT NAME:	KAUHALE O'I	HANA (HPH	IA-wind) -	NOT ACCEPT	TING	PROJECT TYPE:	Family
	41-1260 Kalanianaole					PHONE: 808-233	3-3766
						FAX: 233-376	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		,	
MANAGER APPLY TO	: Roberta Kahele : HPHA NOT ACCEPTING A	PPI ICATIONS		APPLY ADE 1002 North S Honolulu, HI NOT ACCEI	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications of	fice					NO
APPLY PHONE	NOT ACCEPTING A : 808-832-5961	PPLICATIONS		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:
	Bdrm:						
Two I	3drm:						
Three I		0		1003	3	8	YES
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced. AGE CRITERIA:	NT IS 30% OF INCOM for Federal Low Incom Domestic Violence vic tional shelters; involun DULICATION SINCE 97 d must be 18 years or 6	ne projects tims; tary	and gas	owance for electricity	PET INFO	MINIMUM W. ESTIMATE MAXIML LIST ES TO REMAIN ON W CALL EVERY : F	MONTHS): 36 JM WAIT ETIMATE 60 VAITLIST (Months): PETS OK: YES
AN OWN PESIT	ASSET LIMITS: DENTIAL PROPERTY:				the catego	nimals ok, but only opries listed below: under 25 lbs) or_cat	
ASSET LIMIT INF	O:		LEASE:		*Applican correspor manner. N applicants info/house	ts must respond to a dence from HPHA, No waitlist updates no must update any cehold composition in	in a timely needed, however, ontact ofo and check
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 - \$94,350	O; O;	FURNISHED: Partly furnishe appliances on		need user Funding: All convic crystal me	atus via hpha.myhou rname/password to o Fed Low Inc Pub Hs tions must be 3 yrs a ethamphetamine or s DNSE IN 2023	do so). ing 100% ago, unless it's
1-PERSON MAXIM	IUM MONTHLY INCOM	ME:	4570		Į-		

Printed: 4/2/2024 Page: 64

	Last Comple	ete Update:	5/16/2023			AREA:	Wahiawa
PROJECT NAME:	KAWAHI MALU	WAI APAR	TMENTS		ı	PROJECT TYPE:	Family
ADDRESS:	730 Wilikina Dr.					PHONE: 808-888	3-5287
CITY:	Wahiawa	STATE: HI	ZIP:	96786		FAX: 888-532	29
MANAGER:	Kristina Garza, Manage	er		APPLY AD On-Site	DDRESS:		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:	Kawahi Maluwai Apartr	ments					YES
APPLY PHONE:	808-888-5287			FAX : 888-5329		awahi@cmiweb.ne ww.KawahiMaluw	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One B	3 drm: 79	0	NO NO		1 2	3 5	YES
Three B							
project-based secti managed by Camb	NT IS 30% OF INCOME: ion 8 building with private oridge Management, Inc. is Wilikina Apartments	e owner	JTILITIES INC Water, sewer,			MINIMUM W. ESTIMATE	(Months): 24
		Į.					JM WAIT STIMATE 48
AGE CRITERIA: Head of household	must be 18 years or old	ler at the	\A/A!\\	OT FOR RAPIWA		O REMAIN ON W CALL EVERY	
time of application.		F	WAITLI PARKING INF	ST FOR PARKING: O: NO	PET INFO:	F	PETS OK: NO
<u> </u>	ASSET LIMITS:	YES		ed, 149 stalls. have car and stalls Guest parking	Only service	e animals with doc	tor letter
AN OWN RESID	ENTIAL PROPERTY:	YES			GENERAL I		r waitlist updates,
Property is counted	d when determining inco- current interest rate (de	me etermined	_EASE: One-year then thereafter	month-to-month	applicants r and respon- mgnt in a til Funding: Se	must keep all conta d to communication mely manner.* ection 8 100% + Lloed accessible uni	act info current, in from housing
INCOME CRITERIA	A:				at ground le		Community Room,
Maximum Monthly	Income: 5 persons - \$65		FURNISHED: Partly furnishe appliances & r carpet.	d with-major microwave. No	maintenand Laundry Fa Transportat	e, On-site manage cilities. Newly ren ion to shopping av arities Hawai'i. Cu	ement and novated (2012) vailable through
	UM MONTHLY INCOME		4220				

	Last Comp	lete Update:	10/6/2023			AREA	. Moiliili
PROJECT NAME:	KEAUHOU SH	ELTER				PROJECT TYPE	: Emergency/Transi
ADDRESS:	1020 Isenberg St.					PHONE: 808-53	37-8330
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
APPLY TO	R: Jordan Torres, Housin		m - 4:30pm	APPLY AD Walk-in, on			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	E: 808-537-8330		F	FAX:	EMAIL	: https://waikikihc.o shelter/	rg/locations/keauhou-
S	Number of UNITS: Studio: 75 Bdrm: Bdrm:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Three	Bdrm:						
RENT INFO: RE	ENT IS 30% OF INCOME	E:	UTILITIES INCL Yes	UDED:		MINIMUM V ESTIMATE MAXIM	
AGE CRITERIA: 18 years or older,	adults only, no family		WAITLIS' PARKING INFO:	T FOR PARKING:	PET INFO	TO REMAIN ON V	WAITLIST
AN OWN RESII ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:	YES	No Fee LEASE:		GENERA Dormitor	v, 8 animals max for L INFO: y facility, shared ba and laundry facilities	throoms, showers,
INCOME CRITER	IA-		Program Fee		Services assistant	include housing place, job training, help ats and mail service	acement o obtaining
INCOME ORITER	in.		FURNISHED:				

2-PERSONS MAXIMUM MONTHLY INCOME:

Last Compl	ete Update: 10/2	24/2023			AREA:	Moiliili
PROJECT NAME: KEAUHOU SH	ELTER			ı	PROJECT TYPE:	Emergency/Transi
ADDRESS: 1020 Isenberg Street					PHONE: 808-537	7-8330
CITY: Honolulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER: APPLY TO: on-site, 7:30am - 4:30 pre-application	pm; if space available	e, to complete	appointment	RESS: lable, staff will to complete ac		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:						
APPLY PHONE : 808-537-8330		F	AX:	EMAIL: h	ttps://waikikihc.oro	g/locations-shelter/
Unit Type: Number of UNITS:	DENT:	Minimum NCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:	0					
One Bdrm:	0					
Two Bdrm:	0					
Four Bdrm:	0					
Tour Burni.	0 1					
RENT INFO: RENT IS 30% OF INCOME		ITIES INCLU	IDED:	_	TOTA	L UNITS:
Emergency housing for up to 75 clients whouseless or at risk. Dormatory-type arrai with shared bathrooms and showers, shar and laundry spaces.	ngement					(Months): 0
AGE CRITERIA:	le.			Т	O REMAIN ON W	OTIMATE 0
All individuals or couples, age 18 and olde homeless or at risk.	er, who are	WAITLIST	FOR PARKING:	'	CALL EVERY	
nomeless of at fisk.	PAR	KING INFO:		PET INFO:	F	PETS OK:
ASSET LIMITS:						
AN OWN RESIDENTIAL PROPERTY:				GENERAL II		
ASSET LIMIT INFO:	LEA	SE:		housing pla help obtaini mail service Housing Fir	cement assistance ng ID, social secu es. st model is used,	rity card, etc.;
INCOME CRITERIA:	FUR	NISHED:		and assist t	hem once they are	e housed.
I-PERSON MAXIMUM MONTHLY INCOM		0		<u> </u>		

_		Last Comp	olete Update:	10/6/2023			AREA:	Chinatown
PROJECT NAME:	KEK	AULIKE C	OURTYA	RDS			PROJECT TYPE:	Family
ADDRESS:	1016 Ma	aunakea St.					PHONE: 808-54	5-2993
CITY:	Honoluli	u	STATE: HI	ZIP:	96817		FAX : 545-36	54
MANAGER:	: Eric W	ong, Property	Manager		APPLY	ADDRESS:		
APPLY TO:	: Kekaul	like Courtyards	Corp.					OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN:	:							NO
APPLY PHONE:	: 808-54	5-2993			FAX: 545-3654		: http://www.mutual- housing.org/kekau	
Unit 1	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:	12	793	2x rent	300	1	2	YES
One B	Bdrm:	63	995	2x rent	500	1	4	YES
Two B	Bdrm:							
Three B	Bdrm:							
Four B	Bdrm:							YES
RENT INFO: REN Waitlist is open into http://www.mutual-	ermittent	tly. Application	available at	Water and set			MINIMUM W ESTIMATE MAXIMI	(Months): 3
A OF ODITEDIA				Įt.				STIMATE 12
AGE CRITERIA: Head of household	I must be	e 21 years or c	older at the	\A/A ITI	IOT FOR RADION	10	TO REMAIN ON V CALL EVERY	
time of application; caregiver must be				PARKING INF	IST FOR PARKIN O: NO	PET INFO): I	PETS OK: YES
<u> </u>				\$40/month		Small bire	ds (2 max) and fish	only.
AN OWN RESID		SSET LIMITS:				J GENERA	I INFO:	
ASSET LIMIT INFO				LEASE:		*No waitl	ist updates necessa	
				1 year; then n	nonth-to-month	respond in a time Laundry	ep contact info current to communication from ly manner.* room on every floor has only 1 laundry	om management (except C
INCOME CRITERIA		050 (0		FURNIOUER		Application	ds, secure building. on available at:	
\$45,750 for 1 perso \$58,800 for 3 perso				Partly furnishe appliances on		http://ww courtyard open).	w.mutual-housing.oi ds/ (only during time: PONSE IN 2023	
I 1-PERSON MAXIMI	UM MOI	NTHLY INCOM	1E:	3813				
2-PERSONS MAXIN	мим мс	ONTHLY INCO	ME:	4029				

Last Complete Update	5/5/2023			AREA:	Kapolei
PROJECT NAME: KEKUILANI COURTS				PROJECT TYPE:	Family
ADDRESS: 91-1083 Kekuilani Lp.				PHONE: 808-674	4-0405
CITY: Kapolei STATE:	HI ZIP:	96707		FAX: 674-042	26
MANAGER: Nua Vaovasa Site Manager: Kristine Scott		APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO: Hawaii Affordable Properties Inc.					APPLICATION ACCEPTED:
APPLY ATTN: Kekuilani Courts LLC					YES
APPLY PHONE : 808-674-0405		FAX: 674-0426	ŀ	kekuilanicourts@gr http://hawaiiafforda	mail.com ble.com/residential-
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:					
Two Bdrm: 80 2000	3600	790	1		YES
Three Bdrm:					
Four Bdrm:					YES
RENT INFO: RENT IS 30% OF INCOME: NO Section 8 holders do not need to meet the minimum income requirement. Must have verifiable residential history.	Water			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:				TO REMAIN ON W	12
Head of household must be 18 years or olderat the time of application.	WAITLI	IST FOR PARKING:		CALL EVERY	· ·
unic of application.	PARKING INF		PET INFO:	F	PETS OK: NO
ASSET LIMITS: YES	stall - \$15/mo.	uded, additional Guest parking ng specified hours.			
AN OWN RESIDENTIAL PROPERTY: NO			GENERAL		
ASSET LIMIT INFO: Property is counted when determining income eligibility.	LEASE:		applicants and respor	completing regula must keep all cont nd to communication timely manner.*	act info current
INCOME CRITERIA:				s resident manage ndry facility, recrea	
Income is not to exceed 80% AMI.		ed major as range; disposal, th storage closet.	wash area with acces	parbecue area, visi , membership in Ka s to the rec facility stops across street	apolei Association and swimming
			Application	1:	
1-PERSON MAXIMUM MONTHLY INCOME:	6100				
2-PERSONS MAXIMUM MONTHLY INCOME:	6967				

_	Last Comp	lete Update:	10/6/2023			AREA:	Kapolei
<u>-</u>	KEKUILANI GA	ARDENS			ı	PROJECT TYPE:	Family
ADDRESS:	01-1045 Kekuilani Lp.					PHONE: 808-67	4-6647
CITY:	Kapolei	STATE: H	ZIP:	96707		FAX : 674-41	70
MANAGER:	Mark Development, Ir	nc.		APPLY AD	DRESS: kuilani Lp., Kap	olei	OUT-OF-STA
APPLY TO:	Kekuilani Gardens			Hawaii 967		5.61,	APPLICATIO ACCEPTED
APPLY ATTN:							YES
APPLY PHONE:	808-735-9099 ext 1		F	AX: 674-4170		ttp://www.mdihaw ens	/aii.com/kekuilaniga
Unit T	ype: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	idio:						
One Bo							YES
Two Bo		0		790	2	5	120
Four Bo							YES
RENT INFO: REN Priority given to ver	T IS 30% OF INCOME		UTILITIES INCLU	JDED:		TOTA	AL UNITS: 55
MI). Security Dep Monthly Allowable F	osit \$925 Rent \$925	n 30%	Water				(Months): 6
MI). Security Dep Monthly Allowable F Market Note Rate R	osit \$925 Rent \$925	n 30%	Water		Т	ESTIMATE MAXIMI LIST ES	(Months): 6 UM WAIT STIMATE 7
MI). Security Dep Monthly Allowable F Market Note Rate R GE CRITERIA:	osit \$925 Rent \$925		WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:	ESTIMATE MAXIMI LIST E: O REMAIN ON V CALL EVERY	(Months): 6 UM WAIT STIMATE 7
MI). Security Dep Monthly Allowable F Market Note Rate R GE CRITERIA:	osit \$925 Rent \$925 Lent \$1,354 must be 18 years or o	lder	WAITLIST	NO		ESTIMATE MAXIMI LIST E: O REMAIN ON V CALL EVERY	(Months): 6 UM WAIT STIMATE 7 VAITLIST (Months):
AMI). Security Dep Monthly Allowable F Market Note Rate R AGE CRITERIA: Head of household	osit \$925 Rent \$925 Lent \$1,354	lder	WAITLIST PARKING INFO:	NO	PET INFO:	ESTIMATE MAXIMI LIST EST O REMAIN ON V CALL EVERY J M.D. letter	(Months): 6 UM WAIT STIMATE 7 VAITLIST (Months):
AMI). Security Dep Monthly Allowable F Market Note Rate R AGE CRITERIA: Head of household AN OWN RESIDE ASSET LIMIT INFO	osit \$925 Rent \$925 Lent \$1,354 must be 18 years or of ASSET LIMITS: ENTIAL PROPERTY:	lder YES	WAITLIST PARKING INFO:	NO	PET INFO: Must have M GENERAL I *Waitlist up	ESTIMATE MAXIMI LIST ESTIMATE O REMAIN ON V CALL EVERY M.D. letter NFO: dates not required	(Months): 6 UM WAIT STIMATE 7 VAITLIST (Months): NO
AMI). Security Dep Monthly Allowable F Market Note Rate R AGE CRITERIA: Head of household AN OWN RESIDE ASSET LIMIT INFO Property is counted	osit \$925 Rent \$925 Lent \$1,354 must be 18 years or of ASSET LIMITS: ENTIAL PROPERTY:	lder YES	WAITLIST PARKING INFO: Parking included	NO	PET INFO: Must have M GENERAL I *Waitlist up keep all cor to communi a timely ma Funding: R	ESTIMATE MAXIMI LIST ESTIMATE O REMAIN ON V CALL EVERY M.D. letter MFO: dates not required that info current, cation from housinner.* HTF	(Months): 6 UM WAIT STIMATE 7 VAITLIST (Months):
AMI). Security Dep Monthly Allowable F Market Note Rate R AGE CRITERIA: Head of household AN OWN RESIDE ASSET LIMIT INFO Property is counted eligibility.	osit \$925 Rent \$925 Lent \$1,354 must be 18 years or of ASSET LIMITS: ENTIAL PROPERTY: : when determining income	Ider YES ome	WAITLIST PARKING INFO: Parking included LEASE:	NO	PET INFO: Must have M GENERAL I *Waitlist up keep all cor to communia timely ma	ESTIMATE MAXIMI LIST ESTIMATE O REMAIN ON V CALL EVERY M.D. letter M.D. letter MEO: dates not required tract info current, cation from housinner.* HTF opment Inc. ddy room	(Months): 6 UM WAIT STIMATE 7 VAITLIST (Months): NO DETS OK: NO

Printed: 4/2/2024 Page: 70

		Last Comp	lete Update:	8/15/2023			AREA:	Waianae
PROJECT NAME:	KEOL	A HOOM	ALU				PROJECT TYPE:	Elderly
ADDRESS:	85-259 F	Plantation Rd.					PHONE: 808-524	4-2731
CITY:	Waianae)	STATE: HI	ZIP:	96792		FAX: 545-52	14
MANAGER	R: Sunnie	Lee, COS. Ja	y Okada, Off-Si	te Manager		etania St., Suite	C101	OUT-OF-STATE
APPLY TO	: Urban F	Real Estate Co) .		Honolulu, I	HI 96813		APPLICATION ACCEPTED:
APPLY ATTN	: Housing	g Management	t Department					YES
APPLY PHONE	E: 524-27	31 x 3609			FAX : 545-5214	EMAIL:		
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	itudio:							\
	Bdrm:	35	0			1	2	YES
	Bdrm:							
Three								
Four	Bdrm:			ļ				
RENT INFO: RE Market \$1,100.00		% OF INCOME	E: YES	UTILITIES INC			MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:				le .			LIST ES TO REMAIN ON W	STIMATE 60
Head of Househo				\\/ \ \ \	ST FOR PARKING		CALL EVERY	
union partner 18+ household must b	•		ne	PARKING INFO		PET INFO:	F	PETS OK: YES
J				Parking includ	ed	Subject to	Management Appr	oval
		SSET LIMITS:				J		
AN OWN RESII		PROPERTY:	YES	<u> </u>		GENERAL Waitlist as	INFO: of 8/15/23: 3-5 year	ars
				LEASE:	onth-to-month	-	Section 8 100%	
				l' your, morrin			er residing on site.	
INCOME ODITED							nits not available fr	
INCOME CRITER 50% AMI: 1 perso		0; 2 persons \$4	46,650	FURNISHED: Partly furnishe appliances onl		Application		
 1-PERSON MAXIN	MOM MUN	THLY INCOM	E:	3404				
2-PERSONS MAX	IMUM MC	NTHLY INCO	ME:	3888				

	Last Comp	lete Update:	6/13/2023			AREA:	Vineyard
PROJECT NAME:	KEOLA HOON	ANEA				PROJECT TYPE:	Elderly
ADDRESS:	1465 Aala St.					PHONE: 808-53	3-4582
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
	:: Beverley Febenito - P Specialist; Sterling Ro	osa - On-site Mg		ŭ	ni Blvd. Ste. 70	00	OUT-OF-STATE APPLICATION ACCEPTED:
ΔΡΡΙ Υ ΔΤΤΝ	I: Housing Managemen	t Denartment					YES
APPLY PHONE		Dopartment	F	AX : 447-5169	EMAIL:		
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 175 Bdrm: Bdrm:	862	2.5x Rent	500	1	2	YES
70 units are Section by 30% of income not apply. Rest of	NT IS 30% OF INCOMI on 8 units where rent is and the minimum incor f units have rent range of given to veterans. Minimum th \$1832.50.	calculated me need of \$733 -	UTILITIES INCLU Electricity, gas ar			MINIMUM W ESTIMATE MAXIM	(Months): 9
AGE CRITERIA:			le.			LIST E. TO REMAIN ON V	STIMATE 60
Head of household disabled. All other	d must be 62 years or o r members of househol Caregivers over 18 yrs o	d must be	WAITLIST PARKING INFO:	FOR PARKING:	PET INFO:	CALL EVERY	
	ASSET LIMITS:	NONE	50 stalls; no park avg. 2-3 years; lii parking available	mited guest		property manager' ssible; \$100 pet de	
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERAL	INFO: ation to Shopping a	vailable through
	<u> </u>		LEASE: 1 year; then mon	th to month	Catholic C Veteran pr Application Send requ envelope	harities Hawaii eference. n: Ask managemer est with self-addre	nt to mail it ssed stamped
INCOME CRITERI All income limits a HUD	IA: ure usually published an	nually by	FURNISHED: major appliances	only	Pick up fro Funding - 9	m manager's offic Section 8	е
 -PERSON MAXIM	IUM MONTHLY INCOM	IE:	5642]		

Printed: 4/2/2024 Page: 72

	Last Compl	ete Update:	6/14/2023			AREA:	Makiki
PROJECT NAME:	KEWALO APA	RTMENTS				PROJECT TYPE:	Family
ADDRESS:	1407 Kewalo St.					PHONE: 808-531	-3233
CITY:	Honolulu	STATE: HI	ZIP:	96822		FAX : 529-051	6
	n lone la la	<u> </u>		00022			
MANAGER	: Kelli Lopez			APPLY ADI			
APPLY TO	: Kewalo Apartments				nagement off www.mdiha		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 808-531-3233			FAX: 529-0516	EMAIL	kellil@mdihawaii.con www.mdihawaii.con	n (online
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm:						
Two I	Bdrm: 37	0	NO	610	2	5	YES
Three I	Bdrm:						
Four I	Bdrm:						YES
Project-based Sec	NT IS 30% OF INCOME ction 8 - 32 units only LIHTC at \$1022/mo.	YES	UTILITIES INC Gas, water, an			MINIMUM WARESTIMATE	(Months): 48
AGE CRITERIA:						TO REMAIN ON W	Į.
Head of household time of application	d must be 18 years or ol	der at the	WAITLI	ST FOR PARKING:		CALL EVERY	(Months): 6
Пино от арриоаного			PARKING INFO	1.15	PET INF	O: P	PETS OK: NO
J	ASSET LIMITS:	NONE	Assigned park with one vehicl options are lim available.	ing for residents le; other parking lited or not			
AN OWN RESID	DENTIAL PROPERTY:	YES			GENERA		4 info ourment
ASSET ENVIT IN	<u> </u>		LEASE:		well as r	nts must keep contact espond to communication	ation from
			1 year; then m	onth-to-month	2-5 peop	ment in a timely manr ble per unit mmon areas were rer	
INCOME CRITER							
Must qualify for LII and/or Section 8 li	HTC income limits set by imits set by HUD.	y HHFDC	FURNISHED: Partly furnishe appliances onl			ion: ww.mdihawaii.com from manager's office	,
<u> </u>							

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	10/6/2023			AREA:	Kaneohe
PROJECT NAME:	KILO	HANA AP	ARTMENT	S - NOT	ACCEPTING	APPLI	PROJECT TYPE:	Family
ADDRESS:	45-265	William Henry I	Rd.				PHONE: 808-23	5-1844
CITY:	Kaneoh	e	STATE: HI	ZIP:	96744		FAX: 234-70	58
MANAGER	R: Terrily	n Ahakuelo-Kah	hanu		APPLY A	DDRESS:		OUT-OF-STATE
APPLY TO): Qualpa	ac Managemen	t Corporation			SED FOR		APPLICATION ACCEPTED:
APPLY ATTN	I: Kilohar	na Apartments						YES
APPLY PHONE	: 808-23	35-1844			FAX: 234-7058	EMAIL	:	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:		105					YES
	Bdrm:	17	485	-	479	1	4	YES
Three		90	760		821	4	8	YES
	Bdrm:	42	700					
*******CLOSED F	OR APPI	LICATIONS****	*****	Gas, electrici	ty and water			
AGE CRITERIA: Head of househol	d must b	- 10 veers or e	ldor				TO REMAIN ON V	
nead of flouserior	a must bi	e to years or o		WAITL PARKING INI Parking inclu		PET INFO		PETS OK: NO
į.	Δ	SSET LIMITS:	NONE		-			
AN OWN RESI						GENERA	L INFO:	
ASSET LIMIT INF	O:			LEASE:		Funding:	Section 221(d) 1009	%
				Month-to-mo	nth		PONSE IN 2023. LA E OCCURRED ON 1	
INCOME CRITER	IA:							
Maximum Annual 2 persons - \$73,0 4 persons - \$91,2 6 persons - \$108, persons - \$120,40	00; 3 per 00; 5 per 800; 7 pe	sons - \$82,100 sons - \$98,500	· , , , , , , , , , , , , , , , , , , ,	FURNISHED: Partly furnish appliances or	nedmajor			
 1-PERSON MAXIN	10M MUN	NTHLY INCOM	IE:	5320				
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	6083				

	Last Comple	ete Update:	7/18/2023			AREA:	Makiki
PROJECT NAME:	KINAU VISTA				F	PROJECT TYPE:	Elderly
ADDRESS:	1150 Kinau St.				F	PHONE: 808-521	-7111
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 521-689	7
MANAGER	t:			APPLY ADD P.O. Box 224	420		OUT-OF-STATE
APPLY TO	2: Locations LLC			Honolulu, HI	96823		APPLICATION ACCEPTED: YES
APPLY ATTN	I: Property Management	Division					120
APPLY PHONE	E: 808-738-3100			FAX: 735-1978	bl	tp://www.locations e-rentals.aspx	srentals.com/afforda
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 62	1335	2xrent	430			
Two I	Bdrm:						
	Bdrm:						YES
7 units (for 30 % A 24 units (for 50% 31 units (for 60%	AMI seniors) - \$630 AMI seniors) - \$1,050 AMI seniors) - \$1,335 the holders need not mee uirement.		UTILITIES INC			MINIMUM W. ESTIMATE MAXIMU	
AGE CRITERIA:	be 55 or older				T	O REMAIN ON W CALL EVERY	/AITLIST
	ply without verifiable resi	dential	PARKING INFO	ST FOR PARKING: D: NO Indicap stalls; \$40	PET INFO:	F	PETS OK: NO
1	ASSET LIMITS:	NONE		; guest parking	l oto not allo		
AN OWN RESIDE	DENTIAL PROPERTY:	YES			GENERAL IN		O DUTE
1	o. ssets is counted to deter	mine	LEASE:		Has social w Community with BBQ ar Application:	ea, victory garder	services (PT). en & TV; courtyard n. agement to mail it;
INCOME CRITER	IA:					ick up from mana	
50% of AMI: 1 per	rson \$27,450; 2 persons rson \$45,750; 2 persons rson \$54,900; 2 persons	\$52,250	FURNISHED: Partly furnishe appliances onl		*Waitlist upo	tact info current, a cation from housing	; Applicants must as well as respond ng management in
I-PERSON MAXIM	NUM MONTHLY INCOME	≣ :	4575		J.		

Printed: 4/2/2024 Page: 75

5225

	Last Comp	lete Update:	10/6/2023			AREA:	Kaneohe
PROJECT NAME:	KO'OLAU VILI	AGE (HPI	HA-wind) -	NOT ACCEP	TING	PROJECT TYPE:	Family
	45-1027 Kamau Pl.	•				PHONE: 808-233	3-3766
OITY	<u> </u>	OTATE III				FAX: 233-376	69
CITY:	Kaneohe	STATE: HI	ZIP:	96744		-	
MANAGER	: Roberta Kahele			APPLY ADD	DRESS:		
				1002 North S Honolulu, Hl			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING AI	PPLICATIONS			PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications off						NO
APPLY PHONE		LICATIONS		FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
				-			
Unit	Type: Number	DENT	Minimum INCOME	20.57	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
Si	tudio:						
One E	3drm: 8	0		526	1	4	YES
Two E	3drm: 24	0		662	2	6	YES
Three E	36	0		915	3	8	YES
Four E	3drm: 12	0		996	4	10	YES
Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.	NT IS 30% OF INCOM for Federal Low Incom Domestic Violence vict tional shelters; involunt	e projects ims;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	CINICE 0/2/2016*****					TO REMAIN ON W	00
	d must be 18 years or c	lder	\\/ \ I.T.I	IST FOR PARKING:		CALL EVERY	
			PARKING INF		PET INFO	: F	PETS OK: YES
]	ASSET LIMITS:	NONE	Included		the catego	nimals ok, but only or ories listed below: under 25 lbs) or_cat	
	DENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO			LEASE:			s must respond to a dence from HPHA,	
			1 year		applicants info/house waitlist sta	No waitlist updates r must update any c Phold composition in htus via hpha.myhou	ontact ifo and check using.com (will
INCOME CRITERI	IA:					name/password to Fed Low Inc Pub Hs	
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		All convict crystal me	tions must be 3 yrs ethamphetamine or ONSE IN 2023	ago, unless it's
	IUM MONTHLY INCOM		4570		1		

	Last Comple	ete Update:	1/23/2024			AREA:	Downtown
PROJECT NAME:	KOKUA HALE					PROJECT TYPE:	Elderly
ADDRESS:	1192 Alakea Street					PHONE: 808-809	9-7600
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 833-893	3-0226
	t: Tress Sotelo, Commur	, ,	reAtKokuaHale.c	APPLY ADD 1192 Alakea Honolulu, Ha	Street #630		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Schedule in-person ap complete the one online: 808-809-7600		tance if unable to	FAX: 833-693-0226		liveatkokuahale.cor kokuahale@tmo.co	
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	tudio: 222 Bdrm:	1310		258 - 275			
Three	Bdrm:						
Lower rent - 12 ur 60% AMI units are person application the one online. \$5	INT IS 30% OF INCOME nits at 30%AMI - waitlist is e open for application. So n assistance if unable to 100 deposit and \$19 appli ved) due in certified fund.	s closed. chedule in- complete cation fee	UTILITIES INC Water, sewer,			MINIMUM WA ESTIMATE MAXIMU	(Months): 6
AGE CRITERIA:	usehold must be age 55 o		ΜΔΙΤΙ Ι	ST FOR PARKING:		TO REMAIN ON W	
			PARKING INFO			or dog) per unit, 30 f \$350 due at move	
AN OWN RESII	ASSET LIMITS:			0. 0, 220.0 22).	GENERAL	. INFO:	
ASSET LIMIT INF	O.		LEASE: 6 months than	month-to-month	Beretania Trash sho video surv City or Sta	oot, roll-in showers, by veillance, two commate Section 8 welcor	oike storage, unity rooms, me.
	IA: aximum annual gross inc n) \$31,440 (2 person)	come -	Applica date to			n fee of \$19 is waive determined) and re O. Box is not accept	quired in certified
	laximum annual gross inc n) \$62,880 (2 people).	come	options. VCT f				
I-PERSON MAXIM	MUM MONTHLY INCOME	<u>:</u> :	4585		Į		

Printed: 4/2/2024 Page: 77

5240

	Last Comple	te Update:	5/16/2023			AREA:	Ewa Beach
PROJECT NAME:	KO'OLOA'ULA,	Phase I &	II - waitlis	st closed	F	PROJECT TYPE:	Family
ADDRESS:	91-1159 Keahumoa Pkw	/y.				PHONE: 808-550)-3800
OLTY		OTATE III	710			FAX: 356-333	30
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		,	
MANAGER	: Laurie Burgess - Prope	rty Manager		APPLY AD			
APPLY TO	: CLOSED for application	n		91-1159 Ke Ewa Beach	eahumoa Pkwy, # i, HI 96706	[‡] 801	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 808-550-3800			FAX: 356-3330	EMAIL: w	ww.mutual-housir	ng.org
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 54	1095	>2x rent	569	1	4	
Two I	Bdrm: 169	1275	>2x rent	765	2	6	
Three I	3drm: 46	1665	>2x rent	1143	3	8	
Four I	Bdrm: 38	1855	>2x rent	1462	4	10	YES
60% AMGI: (see h (136); 3-bd (37); 4 50% AMGI: 1-bd ((6) - \$1,335; 4-bd 30% AMGI: (see h (111): 2-bd (2): 4-bd	8) - \$950; 2-bd (22) - \$11 (5) \$1,485 ower rent above) 1-bd (3)	3); 2-bd 55; 3-bd	JTILITIES INC	LUDED: er; solar water heati		MINIMUM W ESTIMATE MAXIML LIST ES O REMAIN ON W	(Months): 0 JM WAIT STIMATE 0 VAITLIST
18 and older			WAITLIS	ST FOR PARKING:		CALL EVERY	
			PARKING INFO	1.14	PET INFO:		PETS OK: NO
1	ASSET LIMITS:	YES	one bedroom u included for all	other sized units.	Pets not allo	owea.	
	DENTIAL PROPERTY:	YES	Guest parking	avaliable.	GENERAL II		
ASSET LIMIT INF	O:		LEASE: 1 year		as well as re housing mg Participating Funding: Hu	nust keep all cont espond to commu mt. in a timely ma g in City's Ready t ala Mae Multi Fam	nication from nner.* o Rent program.
INCOME CRITERI	IA:					grounds with pla	
rent. Maximum an	st be greater than two tim nual income for 5-person is - \$90,900; 7-person - \$	s - 97,720; 8-	FURNISHED: ceiling fans, en appliances, cai vinyl floors, ma cherry wood ve	rpeted bdrms, arble counter tops,	laundry roor community Applicants r	m, resident service room, on-site mgr nust have satisfact al background che	nt office. ctory credit check,
1-PERSON MAXIM	IUM MONTHLY INCOME	:	4575]		
2-PERSONS MAXI	MUM MONTHLY INCOM	E:	5225				

	Last Comple	ete Update:	10/6/2023			AREA:	Kalihi
PROJECT NAME:	KUHIO HOMES	(HPHA-h	on) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	·					PHONE: 808-832	2-6075
						FAX: 832-343	
CITY:	Honolulu	STATE: HI	ZIP:	96819		,	
MANAGER	: Nua Vaovasa			APPLY ADI			
400177				1002 North Honolulu, H			OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING AP	PLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	l: Oahu applications offic	e					NO
	NOT ACCEPTING AP	PLICATIONS			EMAIL:	hphaishereforyou.o	rg
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	TOADEON/ED
	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
St	tudio:		1.04				
	Bdrm: 20	0		490	1	4	YES
							YES
		0		688 877	3	8	YES
Three E		0					
Four E	Bdrm: 37	0		1042	4	10	YES
RENT INFO: REI	NT IS 30% OF INCOME	YES	UTILITIES INC		_	TOTA	L UNITS: 134
Minimum Rent: \$0	for Federal Low Income		electricity	s + allowance for		MINIMUM W ESTIMATE	
	Domestic Violence victin itional shelters; involunta						JM WAIT
displaced.			<u> </u>				STIMATE 60
AGE CRITERIA:						TO REMAIN ON W	
Head of household	d must be 18 years or old	der	WAITL	ST FOR PARKING:		CALL EVERY	(Months):
			PARKING INF	0:	PET INFO		PETS OK: YES
Į.			Included			nimals ok, but only ories listed below:	one from each of
	ASSET LIMITS:				one doa (under 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	. INFO: ts must respond to a	2001
Cannot own a hou			LEASE:		correspon	dence from HPHA,	in a timely
			1 year		applicants	No waitlist updates r s must update any c	ontact
					info/house waitlist sta	ehold composition in atus via hpha.myhou	nfo and check using.com (will
INCOME CRITERI	IA:				need user	rname/password to Fed Low Inc Pub Hs	do so).
ncome Eligibility = Maximum Annual	: 80% of AMI Income: 1 person - \$53,2	250.	FURNISHED:		All convic	tions must be 3 yrs	ago, unless it's
2 persons - \$60,90 4 persons - \$76,10	00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	,	Partly furnishe appliances on			ethamphetamine or PONSE IN 2023	sex offender
1-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u> :	4570				
2-PERSONS MAXII	MUM MONTHLY INCOM	1E:	5220				

	Last Comp	olete Update:	6/13/2023			AREA:	Liliha
PROJECT NAME: KU	IKUI GARD	ENS				PROJECT TYPE:	Family
ADDRESS: 1103	3 Liliha St.					PHONE: 808-532	2-0033
CITY: Hon	olulu	STATE: HI	ZIP:	96817		FAX: 762-233	33
MANAGER: Sa	ndie Ishimie, Prop	erty Manager		APPLY AD 1103 Liliha	DRESS: St., Ste. 102		OUT-OF-STATE
APPLY TO: EA	H Housing			Honolulu, F	II 96817		APPLICATION ACCEPTED:
APPLY ATTN: Ku	kui Gardens						YES
APPLY PHONE: 808	3-532-0033			FAX: 762-2333	EMAIL:	www.eahhousing.or	rg
Unit Type	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio):						
One Bdrm	115	1239	3110		1	2	YES
Two Bdrm	106	1472	3695		2	5	YES
Three Bdrm	122	1685	4235		3	7	YES
Four Bdrm	1: 46	1864	4687		4	9	YES
RENT INFO: RENT IS Deposit plus first month *Updates not required tupdating contact info), respond to communica	n rent to remain on waitli however, applicar tion from housing	st (unless	UTILITIES INCL			MINIMUM W. ESTIMATE MAXIMU	(Months): 4 JM WAIT
AGE CRITERIA:	v mannar *		-			TO REMAIN ON W	
Head of household mu	st be 18 years or	older	\\/\ITI IS	ST FOR PARKING:		CALL EVERY	
			PARKING INFO		PET INFO): F	PETS OK: NO
	ASSET LIMITS:	NONE	1 stall included available.	, guest parking			
AN OWN RESIDENT	TAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO:			LEASE:		Funding:	LIHTC	
			First year: Fixed lease. Month-to	d 12-month o-Month thereafter.	Accepting	g applications for AL	L bedroom sizes.
INCOME CRITERIA:			,				
			FURNISHED: Partly furnished appliances only				
-PERSON MAXIMUM I	MONTHLY INCOM	ИE:	4085]		
2-PERSONS MAXIMUM	MONTHLY INCO	DME:	4665				

		Last Compl	ete Update:	10/6/2023			AREA:	Downtown
PROJECT NAME:	KUKU	JI TOWER	R - CLOSEI	FOR ap	plications		PROJECT TYPE:	Family
ADDRESS:	35 North	Kukui St.		-	-		PHONE: 808-537	7-4935
CITY			CTATE: III	71D.			FAX: 537-968	32
CITY:	Honolulu		STATE: HI	ZIP:	96817		,	
	Celeste : Ms. Cor	Malloe, Propei Russell, Assis	stant Resident M	anager	APPLY ADI On-Site	DRESS:		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	: 808-537	7-4935			FAX: 537-9682	EMAIL:	KT-Management@	eahhousing.org
Unit	Type:	Niverban		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	туре.	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
s	tudio:							
	Bdrm:	126	778	1695	560	1	3	YES
	Bdrm:							YES
	!	254	846	1843	742	2	5	120
Three I	!							
RENT INFO: RE Calculated by usin income, the minim \$778 for 1 bdrm; \$ income cannot be *****CLOSED FOR AGE CRITERIA: Head of household AN OWN RESID ASSET LIMIT INFO	ng 30% of hum and m 5737 - \$84 at or above ABBLIC d must be AS DENTIAL I	the household naximum rents 6 2 bdrm. 30% we the maximum ATIONS****** 18 years or old SET LIMITS:	's adjusted are \$678 - % of m rent.	PARKING INF Parking 1st st stalls range fr \$175/month, of availability.	gas IST FOR PARKING: O: YES all \$25; additional om \$105 to	PET INFO: reasonable GENERAL *Waitlist u	MINIMUM W ESTIMATE MAXIMULIST ES TO REMAIN ON W CALL EVERY F e accommodations INFO: pdates must be controlled by ear, via submiss	JM WAIT STIMATE 36 /AITLIST (Months): 12 PETS OK: NO for disability
INCOME CRITER Section 8 limit - 50 Section 236 limit - Applicant's monthicannot exceed \$2	0% AMI; 80% AMI ly adjusted	d household in		FURNISHED: Partly furnishe appliances on		Completed Post card active on v Swimming communit 24 hour tra cameras.	sent once a year to waitlist. pool, playground, l y room, picnic/bbq	keep application

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	5/11/2023	-				AREA:	Makiki
PROJECT NAME:	KUL	ANA HALI	E					PROJEC	Г ТҮРЕ:	Elderly
ADDRESS:	1551 Sc	outh Beretania	St.					PHONE:	808-983	3-1551
CITY:	Honolul	u	STATE: HI	ZIP:		96826		FAX:	983-15	53
MANAGER	R: Leslie	Young (Genera	al Mgr.)			APPLY AD				OUT-OF-STATE
APPLY TO): Kulana	Hale LLP				4th Floor, N	Management O	ffice		APPLICATION ACCEPTED:
APPLY ATTN	l :									YES
APPLY PHONE	: : 808-98	33-1551			FAX:	983-1553	EMAIL:	leslie@hav https://www	w.low-inc	dable.com come-senior-
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required		SQ FT:	MINIMUM Number of People	MAXI Numb Pec	-	CAREGIVER Allowed:
S	tudio:	122	1295			400	1		2	YES
One I	Bdrm:	42	1495			520	1	;	3	YES
Two	Bdrm:	11	1855		I [594	2	4	4	YES
Three	Bdrm:				<u> </u>					
Four	Bdrm:									YES
RENT INFO: RE Credit Check Fee Based on 80% AM	\$24.95			UTILITIES IN Electricity, w			е	ES ⁻	IMUM W TIMATE MAXIMU	AL UNITS: 175 AIT LIST (Months): 12 JM WAIT
AGE CRITERIA:				Į.				TO DEMA		STIMATE 36
All residents must	t be 55 or	· older		\ \ / \ I T	I IST EOE	R PARKING:		TO REMA CALL		(Months):
				PARKING IN		NO	PET INFO		F	PETS OK: NO
	AS	SSET LIMITS:	NONE	Parking: \$80 parking is av limited and/o	ailable; p	arking is	Service Pe	ets Allowed		
AN OWN RESID		PROPERTY:	YES				GENERAL	INFO:		
ASSET LIMIT INF Income from Assetincome. Assets of	ets count			LEASE: 6 months (In	itial lease	term)	keep cont communic manner.* Funding:	act info cur ation from LIHTC	rent, as manage	I; Applicants must well as respond to ment in a timely
INCOME CRITER 1 person - \$73,20 annually.		ly; 2 person - \$	83,600	FURNISHED Partly furnish appliances o ceiling fan, o microwave	nedmajo	et, blinds,	work outsi Opened 1 building ed Applicatio housing.co	de home. 998; Accep quipped wit n: Online: l	ots Section th fire splow-income manager	ne-senior- ment to mail it
I 1-PERSON MAXIM	10M MUN	NTHLY INCOM	IE:	6100						
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	6967						

	Last Comp	lete Update:	5/9/2023			AREA	Kaneohe
PROJECT NAME:	KULANA NAN	I APARTMI	ENTS			PROJECT TYPE	Family
ADDRESS:	46-229 Kahuhipa St.					PHONE : 808-24	
CITY:	Kaneohe	STATE: HI	ZIP:	96744		FAX : 247-06	602
MANAGER	R: Farod Jackson			APPLY AD On-Site Un			OUT-OF-STATE
	O: Hawaiian Properties						APPLICATION ACCEPTED: YES
	N: Kulana Nani E: 808-247-0602		F	AX: 247-0602	EMAIL: r	m@kulananai.cor	m
ATTENTION				74K. = 11 000=			
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Studio:						
	Bdrm: 40	1575		745	2	5	YES
Three	Bdrm: 80	1765		862	3	7	YES
Four	Bdrm: 40	1810		980	4	9	YES
	ENT IS 30% OF INCOMI		UTILITIES INCLU	JDED:		TOT	AL UNITS: 160
Wait List for 4 bed AGE CRITERIA: Head of househol Applicants can ap	drooms is 3 months - 6 drooms is 6 months - 12 old must be 18 years or o oply without verifiable res	months 2 months	_	FOR PARKING:		LIST E TO REMAIN ON V CALL EVERY	UM WAIT STIMATE 12 WAITLIST (Months): 6
Wait List for 4 bed AGE CRITERIA: Head of househol Applicants can aphistory.	drooms is 3 months - 6 drooms is 6 months - 12	months 2 months older. sidential	WAITLIST PARKING INFO: \$50 per month; v	FOR PARKING: YES vaitlist for 2nd	PET INFO:	ESTIMATE MAXIM LIST E TO REMAIN ON V CALL EVERY	(Months): 3 UM WAIT STIMATE 12 WAITLIST
Wait List for 4 bed AGE CRITERIA: Head of househol Applicants can aphistory.	drooms is 3 months - 6 drooms is 6 months - 12 old must be 18 years or o	months 2 months older. sidential s is 3	WAITLIST PARKING INFO:	FOR PARKING: YES vaitlist for 2nd	PET INFO:	ESTIMATE MAXIM LIST E TO REMAIN ON V CALL EVERY	UM WAIT STIMATE 12 WAITLIST (Months): 6
Wait List for 4 bed AGE CRITERIA: Head of househol Applicants can aphistory. Minimum compos	drooms is 3 months - 6 drooms is 6 months - 12 old must be 18 years or o oply without verifiable res sition for 2 bedroom units ASSET LIMITS:	months 2 months older. sidential s is 3	WAITLIST PARKING INFO: \$50 per month; v	FOR PARKING: YES vaitlist for 2nd	PET INFO: Only assist GENERAL	ESTIMATE MAXIM LIST E TO REMAIN ON V CALL EVERY ive animals	UM WAIT STIMATE 12 WAITLIST (Months): 6

Printed: 4/2/2024 Page: 83

3888

	Last Comp	lete Update:	7/18/2023			AREA:	Waimanalo
PROJECT NAME:	KULANAKAUH	HALE MAL	JHIA O NA	KŪPUNA		PROJECT TYPE:	Elderly
ADDRESS:	41-209 Ilauhole St.					PHONE: 808-426	6-1400
CITY:	 Waimanalo	STATE: HI	ZIP:	96795		FAX : 426-140	01
	VVaimanaio	5 <u> </u>		30733			
MANAGER	: Nohealani Hoopii			APPLY AD			0117.05.07.475
APPLY TO	: Locations			Waimanalo	hole St. #87 , HI 96795		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Property Managemer	nt Division					YES
APPLY PHONE	E: 808-426-1400		F	FAX: 738-8981	EMAIL:	locationsrentals.com rentals.aspx	m/affordable-
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 85	1000					YES
	Bdrm: 85	1000	2xrent	528	1	2-3	120
Three I	Bdrm:						
Four I	Bdrm:						YES
9 units @ 30%AM 14 @ 80%AMI. Re \$800, \$825, \$960,	NT IS 30% OF INCOMI II; 49 @ 50% AMI; 10 @ ent amounts are as follo , and \$1000 per month. Hawaiian blood quantur	0 60%AMI; ows: \$560, HOH must	UTILITIES INCLU Water and sewer \$144/mo for elec	r. Utility allowance	e of	MINIMUM W ESTIMATE MAXIMU	Months): 24 JM WAIT STIMATE 60 /AITLIST
7 til residents must	. Bo oo or older,		WAITLIST PARKING INFO:	FOR PARKING:	PET INFO		PETS OK: NO
<u> </u>	ASSET LIMITS:	NONE	Parking included tenant stalls, inc handicap access	l, 103 visitor & luding 9			į, to
	DENTIAL PROPERTY:	NO	accessible.		GENERAL		
Cannot own a mai	O: jority percentage of resi	dential	LEASE:			on of 50% Hawaiian me of processing. A	
properties.	jeni, percentage er sec		1 year; then mor	nth-to-month	include co Hawaiian *Commur	onfirmation letter from Homelands (DHHL) hity room and garden pt. are handicap acc	mf Dept.of n plots; laundry
INCOME CRITER	IA:				resident n	nanager.*No waitlist applicants must kee	updates needed,
50% 45,750 5		83,600	FURNISHED: Partly furnished- appliances only. floors, curtains.		updated a timely ma holders no requirement applicatio	applicants fillust hee inner.Section 8 acce- eed not meet the mi ent. *Confirmation le n is received LIHTC, Section 8, D	espondence in a epted; voucher in. income etter mailed once
	IUM MONTHLY INCOM		7625 8708		Į.		

2-PERSONS MAXIMUM MONTHLY INCOME:

PROJECT NAME: KULAOKAHUA EMERGENCY SHELTER ADDRESS: 1311 Ward Ave. CITY: Honolulu STATE: HI ZIP: 96814 MANAGER: Property Manager - George McMorris APPLY ADDRESS: 1311 Ward Ave.		9-5759
CITY: Honolulu STATE: HI ZIP: 96814 MANAGER: Property Manager - George McMorris APPLY ADDR 1311 Ward A	FAX: 545-86	OUT-OF-STATE APPLICATION
MANAGER: Property Manager - George McMorris APPLY ADDR 1311 Ward A	RESS:	OUT-OF-STATE APPLICATION
MANAGER: Property Manager - George McMorris APPLY ADDR 1311 Ward A		APPLICATION
1311 Ward A		APPLICATION
APPLY TO: call or walk in		
APPLY ATTN:		NO
APPLY PHONE: 808-599-5759 FAX:	EMAIL: https://dynamichea	ilingcenter.org/
Unit Type: Number of UNITS: RENT: Minimum INCOME Required: SQ FT:	MINIMUM MAXIMUM Number of of People 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: YES Rent is 30% of income up to the maximum of \$250. Housing is temporarly for unsheltered individuals or couples with the goal of finding permanent housing. Residents must be following service plan to remain in the program. Depost = \$0 UTILITIES INCLUDED: Electricity and water	MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	TO REMAIN ON W	
Head of household must be 60 years or older; spouse/partner must be 18. Only visiting caregivers WAITLIST FOR PARKING:	CALL EVERY	
allowed. PARKING INFO: NO	PET INFO: F Service Animal - Doctor Verif	PETS OK: YES
ASSET LIMITS: NONE		
AN OWN RESIDENTIAL PROPERTY: NO	GENERAL INFO:	
ASSET LIMIT INFO: LEASE:	Applicants must be actively hunsheltered and capable of ir	omeless and
Shelter agreement only. Must accept offer for permanent housing.	No waitlist is kept for a unit. I couples have own unit. Resid participate in a social service an offer of permanent housin.	ndividuals or lents must plan and accept
INCOME CRITERIA:	Funding: Homeless Stipend	-
FURNISHED: Partly furnishedmicrowave, refrigerator, stovetop (no oven) and bed.		

	Last C	omplete Update:	6/13/2023			ARE	:A: Waianae
PROJECT NAME:	KULIA I KA	NUU (Kahi	kolu Ohana l	Hale O'Wai'a	anae)	PROJECT TYP	PE: Family
ADDRESS:	85-296 Ala Hema	St.				PHONE: 808-	697-7300 808-75
OLTY	J	07475	710			FAX: 697-	7302
CITY:	Waianae	STATE:	⊣I ZIP:	96792		-	
	: Leslie Young, Si (New manageme : Kulia I Ka Nuu			APPLY AD 85-235 Ala Waianae,	Akau St., U	Init 712	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						
APPLY PHONE	: 808-697-7300			FAX:	EMA	IL: www.hawaiiaffor	dable.com
Unit	Type: Number of UNITS		Minimum INCOME Required:	SQ FT:	MINIMUI Number of Peopl	r Number of	
	tudio: 24	944					
	3drm:		<u> </u>				
	3drm: 46	1418					
Three E	3drm:					_	
Four E	3drm:				<u> </u>		YES
	1 - \$944; based on @ \$1260 (24 units	30% of income.	UTILITIES INCI			MINIMUM ESTIMA	OTAL UNITS: 70 I WAIT LIST TE (Months): 6
]							ESTIMATE 12
AGE CRITERIA: Head of household			· ·	ST FOR PARKING		TO REMAIN ON CALL EVER	N WAITLIST RY (Months): 6
Applicants must ha	ave verifiable resid	ential history.	PARKING INFO		PET INI	FO:	PETS OK: NO
AN OWN RESID	ASSET LIM DENTIAL PROPER O:		safety check, a must be up to o parking availab	date. Guest	_	RAL INFO: rly knowns as Kahik	colu Ohana Hale
INCOME CRITER	IA:		LEASE:	D'W Req 1. 6 2. 6 3. E			TF ents
	olulu Median Incor	ne	FURNISHED:	FURNISHED: Appli			dressed stamped

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	te Update: 1	0/13/2023			AREA:	Barber's Point	
PROJECT NAME:	KUMUHONUA (Building 36	6)			PROJECT TYPE:	Transitional	
ADDRESS:	91-1096 Yorktown St.					PHONE: 808-682	2-5494	
CITY	Kapolei	STATE: HI	ZIP:	00707		FAX: 682-549	95	
CITT.	Kapolei	STATE. H	217.	96707				
MANAGER APPLY TO	: Davilyn J. N. Chang, Pr Carla Kahala, Assistant : HCAP		er	APPLY ADD P.O. Box 75 Kapolei, HI 9	547		OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	:						NO	
APPLY PHONE	: By CES			FAX: By CES		Website: www.hcapweb.org/k		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
S	tudio: 65	0		340	1	3		
One I	Bdrm:							
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							
	NT IS 30% OF INCOME:		TILITIES INC	CLUDED:		MINIMUM W		
*No waitlist; Entry 59 units available	coordinated via CES for public use; 6 units res	vd for					(Months): 0 JM WAIT STIMATE 0	
AGE CRITERIA:	OLIDODOV					TO REMAIN ON W		
Adults ONLY (>18	gyrs); *Maximum 3 ppl per	unit	WAITLI	ST FOR PARKING:		CALL EVERY		
		_	ARKING INF		PET INFO:	Р	PETS OK: NO	
]		P	arking includ	ed				
ANI OVAINI DECIT	ASSET LIMITS:				OENESA:	INICO		
AN OWN RESIL	DENTIAL PROPERTY: O:		- 4 0 5		GENERAL Opened 02			
		_	EASE: 20 Days			ooms and two kitch		
			,		meals.	rovides case mana		
INCOME ODITED	10				classes an	d workshops relate ermanent housing a	d to personal	
	me requirement, as fee is		JRNISHED:		independe	nce .		
	of gross income; maximuded on last update (2021)		mall refrigera athroom, mic		Coordinate	Application process done by referral thro Coordinated Entry System (CES) NO RESPONSE IN 2023		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	10/17/2023			AREA:	Moiliili
ROJECT NAME:	KUMUWAI APA	RTMENTS	3			PROJECT TYPE:	Elderly
ADDRESS:	1902 Young St.					PHONE: 808-76	2-0902
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX:	
MANAGER	: Maretta Espiritu			APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO:	: Housing Solutions, Inc.						APPLICATION ACCEPTED:
APPLY ATTN	: Maretta Espiritu						NO
APPLY PHONE	: 808-762-0902		F/	AX:	EMAIL:	Website: https://ww Email: Maretta@h	ww.hsiservices.net/ siservices.net
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio: 29	900			1	2	
One E		0					
Two E		0					
Three E		0					
Four E	Bdrm:	0					
AGE CRITERIA:	er housing vouchers acce	epted.	All utilities include	d.		LIST E	(Months): 1 UM WAIT STIMATE 6 VAITLIST
All applicants mus	t be 62 or older.		_	FOR PARKING:		CALL EVERY	
			PARKING INFO: Parking included,	however a	PET INFO		PETS OK:
	ASSET LIMITS:		waitlist for parking				
	ENTIAL PROPERTY:	NO			GENERAL		
ASSET LIMIT INFO	J:		LEASE:		for homele Features i Amenities facilities, a		st 62 years old. Id private baths.
NCOME CRITERI	A:		FURNISHED:			ear a bus stop.	
-PERSON MAXIM	UM MONTHLY INCOME	:	3675				
PERSONS MAXII	MUM MONTHLY INCOM	F:	4200				

	Last Compl	ete Update:	10/17/2023			AREA:	Kunia
PROJECT NAME:	KUNIA VILLAG	E				PROJECT TYPE:	Family
ADDRESS:	92-1770 Kunia Rd.					PHONE: 808-439	9-6375
CITY:	Kunia	STATE: HI	ZIP:	96759		FAX : 808-439	9-6375
MANAGER				APPLY ADD P.O. Box 16 Kunia, HI 96	3		OUT-OF-STATE
	: Kunia Village, EAH Ho	ousing		,			ACCEPTED:
APPLY ATTN	: Manager's Office					1/11	and the second second
APPLY PHONE	: 808-439-6375			FAX : 439-6375	EMAIL:	KU-management@	eannousing.org
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One E		0		630	2	5	
Three E	Bdrm:	0		960-1200	3	7	
Four E	3drm:	0		1300	4	9	YES
Affordable housing the agricultural ind	NT IS 30% OF INCOME g development serving p lustry. Rent will not exce sehold monthly income.	ersons in	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMU	(Months): 0
AGE CRITERIA:		Į.				LIST ES	STIMATE 0
18+			WAITL	ST FOR PARKING:		CALL EVERY	
			PARKING INF	O: NO	PET INFO:		PETS OK: YES
	ASSET LIMITS:		1 covered car	port for each house	Subject to	specific policy requ	uirements.
	ENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INFO	O:		LEASE:		keep all co to commu a timely m One mem	ber of the househol	as well as respond ng management in d must meet the
INCOME CRITERI	A:				farm labor	of Agriculture (USDA and minimum farm	labor income.
Income Maximums 1 Person: \$52,92 2 Persons: \$60,48 3 Persons: \$68,04 4 Persons: \$75,54 5 Persons: \$81,60 6 Persons: \$87,66	0 0 0 0 0		efficient applia	tures in kitchen	Kunia Fari Communit Indoor bas Kids play	anager and U.S. Pomers Market; ty room with kitchar sketballl/volleyball o structure; Head Sta LAST UPDATE IN 2	n; Gym with court rt preschool
	UM MONTHLY INCOM		4410 5040		ir.		

	Las	st Complet	te Update:	10/18/2023					AREA:	Waialua
PROJECT NAME:	KUPUNA	HOME	O'WAIA	LUA (HPF	IA-ce	n) - NO	T ACC	PROJE	CT TYPE:	Elderly
	67-088 Gooda							PHONE	: 808-637	7-8244
								FAX	: 622-636	62
CITY:	Waialua		STATE: HI	ZIP:		96791				
MANAGER	: Jimary Quino	ones				APPLY AL		5		
APPLY TO	: HPHA NOT ACCEP	TING APP	LICATIONS			PO Box 17		, Bldg L ılu, HI 96817 PLICATIONS	5	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: NOT ACCEP	TING APP	LICATIONS							NO
APPLY PHONE	: 808-832-596	1			FAX:	832-3461	EMA	AIL: hphaishe	reforyou.o	rg
Unit	Type: Num of UN	nber NITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMU Numbe of Peop	er Nun	XIMUM nber of eople:	CAREGIVER Allowed:
S	tudio: 2	4	0		1	390	1			YES
One I	Bdrm: 1	6	0		Ī	520	1	-		YES
Two I	Bdrm:				ΤÉ			_ (
Three I	Bdrm:				Ī					
Four I	Bdrm:									
DENT INFO	NT 10 000/ 05	11100145								
RENT INFO: RE				Water and ele): 				L UNITS: 40
*Applicants must if from HPHA, in a ti	respond to any								NIMUM W STIMATE	
	mony marinon.									JM WAIT STIMATE 24
AGE CRITERIA:									AIN ON W	
Head of household disabled. If elder of				WAITL	IST FO	R PARKING	i:	CAL	L EVERY	(Months):
rent.	aloo, andor ago	oz opodoo	may	PARKING INF			PET IN			PETS OK: YES
		_		Parking inclu	ded		Small	pets under 25	5 lbs. only	
		LIMITS: N					J			
AN OWN RESIDE		PERTY: IN	10					RAL INFO:	Omestic \	/iolence victims;
Cannot own a hou				LEASE: 1 year			homel		ional shelt	ers; involuntary
				l year			howev	er, applicants	s must upo	date any contact
J							waitlist	t status via h	pha.myhou	nfo and check using.com (will
INCOME CRITER		Φ00	200.0	FURNIOUER				username/pa: unding: Fed		do so). ub Hsing 100%
80% AMI: 1 perso persons \$68,500;			,900; 3	Partly furnish appliances or	edmaj		metha perma	nvictions mus imphetamine inently barred ESPONSE IN	or sex offe	
1-PERSON MAXIN	IUM MONTHLY	' INCOME:		4570			<u> </u>			
2-PERSONS MAXI	MUM MONTHL	Y INCOME	E:	5220						

	Last Comple	ete Update:	10/18/2023			AREA:	Wahiawa
PROJECT NAME:	LA'IOLA ELDE	RLY - NO	Г АССЕРТ	ING APPLICA	TIO	PROJECT TYPE:	Elderly
ADDRESS:	1 Iho Iho Pl.					PHONE: 808-622	2-6350
CITY.	J	STATE: HI	7ID.	00700		FAX: 622-635	51
CITT.	Wahiawa	STATE. HI	ZIP:	96786			
MANAGER	R: Jay Domanguera, Resi Lyn - Admin (675-0099			APPLY ADI			
APPLY TO): Hawaii Public Housing	,		1002 North Honolulu, H	School Street awaii 96817		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Lyn						NO
APPLY PHONE	E: 808-832-5961			FAX : 622-6351	EMAIL:	mu42laiola@gmail. http://hawaiiafforda	com ble.com/residential-
Unit	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 I	Bdrm: 48	195	YES	506	2	2	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						YES
RENT INFO: RE	NT IS 30% OF INCOME:	YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 108
Deposit same as r studio; \$195 for 1	rent. Minimum rent is \$17 bdrm.	70 for	Electricity and	water		MINIMUM W ESTIMATE	
*******WL CLOS	SED 8/2/2016*****						JM WAIT STIMATE 36
AGE CRITERIA:	ld must be 62 years or old	dor				TO REMAIN ON W	
spouse must be 5	5+. Caregiver 18+. Othe ousehold must be 62+.		WAITL PARKING INF	IST FOR PARKING: O: YES	PET INFO		PETS OK: NO
	ave verifiable residential	history.	Parking include			ote required	LTO OIK.
	ASSET LIMITS:	YES					
	DENTIAL PROPERTY:	YES			GENERAL		
ASSET LIMIT INF	O: erty in same county.	Asset	LEASE:		well as res	s must keep contact spond to communic	ation from
Limit: 1person - \$	38,600; 2 people - \$44,1	00	1 year			ent in a timely man	ner.*
					Opened 1	991	
INCOME CRITER		00	FURNIOUER		Funding: \$	State Low Income 1	00%
2- persons - \$39,2	Income: 1-person \$34,36 200	00	Partly furnishe appliances on		NO RESP	ONSE IN 2023	
1-PERSON MAXIM	MUM MONTHLY INCOME	::	2858]		
2-DERSONS MAY		IE.	3267				

		Last Comp	lete Update:	5/17/2023			AREA:	Lanakila
PROJECT NAME:	LANA	AKILA GA	RDENS				PROJECT TYPE:	Family
ADDRESS:	833 Nor	th School St.					PHONE: 808-94	9-4111
CITY:	Honolul	u	STATE: HI	ZIP:	96817		FAX : 949-72	11
		Lyman, Reside	ent Manager		APPLY AD 1055 Kalo Honolulu, F	Pl., Ste. 103		OUT-OF-STATE APPLICATION
APPLY TO): Bob Ta	anaka Inc.			, , , , , , , , , , , , , , , , , , , ,			ACCEPTED:
APPLY ATTN	1: Ext. 36	5						
APPLY PHONE	E: 808-94	19-4111			FAX: 949-7211	EMAIL:		
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	6	1029	2.5xrent				YES
	Bdrm:	15	1154	2.5xrent				YES
Three		6	1276	2.5xrent				YES
	Bdrm:		1270					NO
City Section 8 vou	ichers ac	серіец.		Water				(Months): 12 JM WAIT STIMATE 24
Head of househol	d must be	e 18 years or o	lder	\\/ A T 19	ST FOR PARKING:		CALL EVERY	
				PARKING INFO		PET INFO): I	PETS OK: NO
]	AS	SSET LIMITS:	NONE	Parking include parking availab				
AN OWN RESI		PROPERTY:	YES			GENERAL		
ASSET LIMIT INF		t make applica	nts go over	LEASE:		Accepts S	Sect 8 Vouchers	
income limit				1 year; then mo	onth-to-month	applicants well as re	th completing regula s must keep all cont spond to communion nent in a timely man	act info current, as ation from housing
INCOME CRITER							,	
Min. income requi below income limi	ired. Mus it.	st make 2.5x re	nt and be	FURNISHED: Partly furnished appliances only				
1-PERSON MAXIN	10M MUN	NTHLY INCOM	IE:	4696]		
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	5367				

		Last Comp	lete Update:	5/9/2023			AREA:	Kailua
PROJECT NAME:	LANI	HULI					PROJECT TYPE:	Elderly
ADDRESS:	25 Aulik	e St.					PHONE: 808-263	3-0268
CITY:	Kailua		STATE: HI	ZIP:	96734		FAX:	
MANAGER	: Dale C	ripps, Resident	Manager		APPLY ADI			OUT-OF-STATE
APPLY TO	: Bob Ta	anaka Inc.			Honolulu, H			APPLICATION ACCEPTED:
APPLY ATTN	: Ext. 24	ŀ						YES
APPLY PHONE	: 808-94	9-4111			FAX: 949-7211	EMAIL:		
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	50	726	2.5xRent	413/443	1	2	YES
One I	Bdrm:	32	864	2.5xRent	456/499	1	2	YES
Two I	Bdrm:							
Three I								
Four I	Bdrm:					J		NO
Accepts section 8				UTILITIES INCL Water			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	AITLIST
Head of household disabled. Under a				WAITLIS	T FOR PARKING:		CALL EVERY	(Months): 3
not without HOH.	3			PARKING INFO		PET INFO	: F al/assistance only	PETS OK: YES
1		2057 11472	NONE	\$25/month; gue available.	est parking not	Tor medica	al/assistance only	
AN OWN RESID		SSET LIMITS: PROPERTY:				general	. INFO:	
ASSET LIMIT INF	O:			LEASE:			s are allowed with N	
Income from asse limits.	ts canno	t put person ov	er income	1 year		Housing F Opened 1 Funding: I		rogram.
INCOME CRITER	IA:							
Minimum Income	Required	I. Must make 2	2.5 x the rent	FURNISHED: Partly furnished appliances only				
T-PERSON MAXIM				4696 5367]		

APPLY ATTN: APPLY PHONE: 808-522-0541 FAX: EMAIL: pams@hsiservices.net EMAIL: pams@hsiservices.net FAX: Unit Type: Number of UNITS: RENT: Number of UNITS: Required: SQ FT: People of People o	Last Complete Upda	ate: 6/13/2023	AREA: Kakaako
MANAGER: Pam Sakai, General Manager APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-522-0541 FAX: Durit Type: One Bdrm: Two Bdrm: Two Bdrm: Three Bdrm: Three Bdrm: Three Bdrm: Three Bdrm: Three Bdrm: Four Bdrm: Three Bdrm: Three Bdrm: Three Bdrm: Four Bdrm: Three Bdrm:	DJECT NAME: LOLIANA		PROJECT TYPE: Family
MANAGER: Pam Sakai, General Manager APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-522-0541 FAX: EMAIL: pams@hsiservices.net ARAIMUM MAXIMUM Number of People: Poople: Poople: Allowed: People: Allowed	ADDRESS: 565 Quinn Ln.		PHONE: 808-522-0541
APPLY TO: Housing Solutions, Inc. APPLY ATTN: APPLY PHONE: 808-522-0541 FAX: EMAIL: pams@hsiservices.net FAX: Unit Type: of Units and Indian In	CITY: Honolulu STATE	:: HI ZIP: 96813	FAX : 522-0539
APPLY TO: Housing Solutions, Inc. APPLY ATTN: EMAIL: pams@hsiservices.net AZECITE ACCEPTI AZECITE ACCEPTI Minimum Number of People o	MANAGER: Pam Sakai, General Manager	APPLY /	
APPLY PHONE: 808-522-0541 FAX: Unit Type: Number of UNITS: RENT: RENT: RENT: Required: SQ FT: MINIMUM Number of People: People: Allowed: Allowed: People: People: Allowed: People: Allowed: People: Allowed: People: Allowed: People: Allowed: People: Allowed: People: Allowed: Al	APPLY TO: Housing Solutions, Inc.		APPLICAT ACCEPTE
APPLY PHONE: 808-522-0541 Unit Type:	APPLY ATTN:		
Studio: 43 1000 319 1 4 One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Three Bdrm: To RENT IS 30% OF INCOME: NO	APPLY PHONE: 808-522-0541	FAX:	EMAIL: pams@hsiservices.net
One Bdrm: Two Bdrm: Three Bdrm: Four Bdrm: Toral units: 42 **Cool/month** **Electricity, water, refuse, sewer** **Electricity, water, refuse, sewer** **Initial Set CRITERIA: **Initial Set		INCOME SO ET.	Number Number of CAREGIVER
Two Bdrm: Three Bdrm: Four Bdrm: NO UTILITIES INCLUDED: Electricity, water, refuse, sewer Electricity, water, refuse, sewer Electricity, water, refuse, sewer MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE WAITLIST FOR PARKING: PARKING INFO: NO SET LIMITS: ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month Month-to-month FURNISHED: Under 50% AMI Must not be a registered sex offender or history of violence. Application: Ask management to email it, pams@hsiservices.net	Studio: 43 100	0 319	1 4
Three Bdrm: Total Units: 42	One Bdrm:		
Four Bdrm: NO INT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: Electricity, water, refuse, sewer UTILITIES INCLUDED: TOTAL UNITS: 42 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PARKING INFO: NO SET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month LEASE: Month-to-month FURNISHED: unfurnished, major appliances NO UTILITIES INCLUDED: TOTAL UNITS: 42 MINIMUM WAIT LIST ESTIMATE (Months): PET INFO: PET INFO: PETS OK: NO SET INFO: Homeless or at risk homeless families with minor children under the age of 18. Under 50% AMI Must not be a registered sex offender or histor of violence. Application: Ask management to email it, pams@hsiservices.net			
UTILITIES INCLUDED: TOTAL UNITS: 42 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE MINIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PARKING INFO: NO SECULIAR INFO: AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month FURNISHED: unfurnished, major appliances TOREMAIN OF INO MINIMUM WAIT LIST CALL EVERY (Months): PET INFO: PET INFO: PET INFO: Homeless or at risk homeless families with minor children under the age of 18. Under 50% AMI Must not be a registered sex offender or histo of violence. Application: Ask management to email it, pams@hsiservices.net			
Electricity, water, refuse, sewer MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PARKING INFO: NO SSO/ month; no guest parking AN OWN RESIDENTIAL PROPERTY: MO ESET LIMIT INFO: LEASE: Month-to-month FURNISHED: unfurnished, major appliances MINIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PET INFO: PET INFO: MINIMUM WAIT LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: AN Under 50% AMI Must not be a registered sex offender or history of violence. Application: Ask management to email it, pams @hsiservices.net	Four Bdrm:		NO
SE CRITERIA: TO REMAIN ON WAITLIST CALL EVERY (Months): WAITLIST FOR PARKING: PARKING INFO: PARKING INFO: NO \$50/ month; no guest parking ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SEET LIMIT INFO: LEASE: Month-to-month FURNISHED: unfurnished, major appliances MAXIMUM WAITLIST CALL EVERY (Months): PET INFO: PET INF	:NT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INCLUDED:	TOTAL UNITS: 42
LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PARKING INFO: NO \$50/ month; no guest parking ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month LEASE: Month-to-month FURNISHED: unfurnished, major appliances LIST ESTIMATE TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: AND PET INFO: PET INFO	000/month	Electricity, water, refuse, sewer	MIMIMUM WALLEST
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SEET LIMIT INFO: LEASE: Month-to-month LEASE: Month-to-month LEASE: Month-to-month LEASE: Month-to-month FURNISHED: unfurnished, major appliances TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO:			
WAITLIST FOR PARKING: PARKING INFO: NO \$50/ month; no guest parking AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month LEASE: Month-to-month COME CRITERIA: Just be less than 50%AMI FURNISHED: Junfurnished, major appliances WAITLIST FOR PARKING: PARKING: NO PET INFO: PETS OK: NO PET INFO: PETS OK: NO PET INFO: PETS OK: NO Application: Ask management to email it, pams@hsiservices.net	GE CRITERIA:		TO REMAIN ON WAITLIST
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month COME CRITERIA: Ist be less than 50%AMI SET LIMIT INFO: SET LIMIT INFO: LEASE: Month-to-month FURNISHED: Under 50% AMI Must not be a registered sex offender or history of violence. Application: Ask management to email it, pams@hsiservices.net	ult 18+ with at least 1 minor child (under 18)	WAITLIST FOR PARKIN	IG:
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month COME CRITERIA: Ist be less than 50%AMI FURNISHED: unfurnished, major appliances GENERAL INFO: Homeless or at risk homeless families with minor children under the age of 18. Under 50% AMI Must not be a registered sex offender or history of violence. Application: Ask management to email it, pams@hsiservices.net			PET INFO: PETS OK: NO
AN OWN RESIDENTIAL PROPERTY: NO SET LIMIT INFO: LEASE: Month-to-month Month-to-month COME CRITERIA: Ist be less than 50%AMI FURNISHED: unfurnished, major appliances GENERAL INFO: Homeless or at risk homeless families with minor children under the age of 18. Under 50% AMI Must not be a registered sex offender or history of violence. Application: Ask management to email it, pams@hsiservices.net	ACCET LIMITO. NONE	\$50/ month, no guest parking	
LEASE: Month-to-month Homeless or at risk homeless families with minor children under the age of 18. Under 50% AMI Must not be a registered sex offender or historic of violence. COME CRITERIA: ast be less than 50%AMI FURNISHED: unfurnished, major appliances unfurnished, unf		_	GENERAL INFO:
Month-to-month Under 50% AMI Must not be a registered sex offender or histo of violence. Application: Ask management to email it, pams@hsiservices.net unfurnished, major appliances		LEASE:	
Ask management to email it, pams@hsiservices.net unfurnished, major appliances		Month-to-month	Under 50% AMI Must not be a registered sex offender or histo
ust be less than 50%AMI FURNISHED: unfurnished, major appliances Ask management to email it, pams@hsiservices.net	COME CRITERIA:		Application:
Silly. No salper		unfurnished, major appliances	

		Last Compl	ete Upda	te:	10/19/2023				AREA:	Waianae
PROJECT NAME:	MA'IL	II (HPHA	-lee) -	NOT	ACCEP	TING	APPICAT	TION	PROJECT TYPE:	Family
ADDRESS:	_								PHONE: 808-697	<u>'</u> '-7171
									FAX: 697-717	' 4
CITY:	Waianae	•	STATE	: HI	ZIP:		96792		,	
MANAGER	: Mandy	Miyamoto					APPLY ADI			OUT-OF-STATE
APPLY TO		CCEPTING AP	PLICATION	ONS			Honolulu, H NOT ACCE	I 96817 PTING APPL	LICATIONS	APPLICATION ACCEPTED: NO
APPLY ATTN		pplications offic CCEPTING AP		ONS				EMAIL	.: hphaishereforyou.o	_
APPLY PHONE	: 808-832	2-5961				FAX:	832-3461		,	-9
Unit	Туре:	Number of UNITS:	REN	Γ:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:					֓֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓				
	Bdrm: Bdrm:	7	0				912	2	6	YES
Three I	Bdrm:	13	0				1394	3	8	YES
Four I	Bdrm:									
RENT INFO: RE Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.) for Fede Domestic itional she	ral Low Income Violence victir elters; involunta	e projects ns;		UTILITIES IN		O: for electricity		MINIMUM W. ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:	Q/ ?/? 016*	****							TO REMAIN ON W	00
Head of household	d must be	18 years or ol	der		WAITI	LIST FO	R PARKING:		CALL EVERY	(Months):
					PARKING INI	FO:		PET INFO	O: Fanimals ok, but only o	PETS OK: YES
,	AS	SET LIMITS:	NONE		ordada			the cate	gories listed below: (under 25 lbs) or cat	
AN OWN RESID		PROPERTY:	NO					GENERA		
ASSET LIMIT INFO		hu		F 1	LEASE: 1 year			correspo manner. applican info/hous	nts must respond to a condence from HPHA, No waitlist updates not must update any conselold composition in tatus via hpha.myhou	in a timely eeded, however, ontact fo and check
INCOME CRITER	IA:							need use	ername/password to	do so).
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4		FURNISHED Partly furnish appliances o	nedmaj		Conviction metham barred.	Fed Low Inc Pub Hs ons must be 3 yrs ago phetamine or sex offe SPONSE IN 2023	o; crystal			
1-PERSON MAXIM	IUM MON	ITHLY INCOMI	= :		4570			J.		

Printed: 4/2/2024 Page: 95

5220

		Last Com	plete Upda	te:	10/19/2023				AREA:	Waianae
PROJECT NAME:	MΔ'II	I II /HPH	ΙΔ-Ιρο) .	NOT	ACCEP	TING	ΔΡΡΙ	ICATIO	PROJECT TYPE:	
ADDRESS:			IA-ICC)	NOI	ACCE	TING	AFFL	ICATIO		1
ADDRESS.	07-100 K	ешкірі 51.							PHONE: 808-69	
CITY:	Waianae		STATE	HI	ZIP:		96792		FAX : 697-71	74
MANAGER APPLY TO	: HPHA	Miyamoto	\PPLICATIO	DNS			1002 No	ADDRESS: orth School St. J., HI 96817 CCEPTING APPL	LICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN				200						NO
APPLY PHONE		CCEPTING A 2-5961	APPLICATIO	DNS		FAX:	832-3461		: hphaishereforyou.c	org
Unit	Туре:	Number of UNITS:	REN'	Γ:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:									
	Bdrm:	12	0		<u> </u>		912	2	6	YES
Three E	Bdrm:						012			
Four E	Bdrm:	12	0				1394	4	10	YES
Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced.	for Feder Domestic itional she	ral Low Incor Violence vio lters; involur	me projects tims;		TILITIES INC			city	MINIMUM W ESTIMATE MAXIMI	(Months): 36 UM WAIT STIMATE 60
Head of household	d must be	18 years or	older		WAITL	LIST FOF	R PARKIN	IG:	CALL EVERY	(Months):
				Р	ARKING INF	FO:		PET INFO	O: I	PETS OK: YES
AN OWN RESID		SET LIMITS			ncluded			the cate	animals ok, but only gories listed below: (under 25 lbs) or ca	
ASSET LIMIT INFO		I KOI EKITI	INO						nts must respond to	any
Cannot own a hou	se on Oal	hu			ease: year			correspo manner. applican info/hous	ondence from HPHA, No waitlist updates its must update any of sehold composition in tatus via hpha.myho	in a timely needed, however, contact nfo and check
INCOME CRITERI	IA:							need use	ername/password to	do so). Funding:
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 - \$5 ons - \$68,50 ons - \$82,20	0; 0;	F	URNISHED: Partly furnish appliances or	edmajo	r	Conviction distributi	v Inc Pub Hsing 100% ons must be 3 yrs ag ng crystal methampt od sex offender are p	o; however, netamine and
1-PERSON MAXIM					570			ı		

	Last Compl	ete Update:	2/22/2022			AREA:	Aiea
PROJECT NAME:	MAKALAPA MA	ANOR (Co-	op Fee)			PROJECT TYPE:	Family
ADDRESS:	99-120 Kohomua St.	•				PHONE: 808-487	7-7114
CITY:	Aiea	STATE: HI	ZIP:	96701		FAX:	
	R: Tracy Hefferon, manager	-		APPLY AD 3165 Waial Hi. 96816	DRESS: ae Ave. #200, F	Honolulu,	OUT-OF-STATE APPLICATION
APPLY ATTN	·	,					ACCEPTED: YES
	E: 808-735-9099		ļ	F AX : 781-295-342		nttps://mdihawaii.cc racyh@mdihawaii.	om/makalapamanor com
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 18 29	0			2	2	YES
Three Four	Bdrm: 29 Bdrm: 34	0			6	8	YES
5 - Five-bdrm unit Down Payment ba year. 1 bdrm = \$^ (6/08) = \$27,105; Recording, Transf	ENT IS 30% OF INCOME is (8 min people 10 max) ased on size of unit and the 17,893; 2 bdrm = \$21,36; 4 bdrm = \$31,977 Addtlefer, and Notary can add u	time of the 5; 3 bdrm Fees:	UTILITIES INCL Water	UDED:		MINIMUM W ESTIMATE MAXIMU	(Months): 6
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
Head of househol	d must be 18 years or ol		WAITLIS PARKING INFO Parking include		PET INFO:	CALL EVERY	(Months): 6 PETS OK: YES
AN OWN RESI	ASSET LIMITS:	NONE	J		GENERAL	INFO:	
ASSET LIMIT INF	co:		LEASE: Call for info		. 1 2-bdrm 3 3-bdrm 2 4-bdrm 1 5-bdrm		
2 persons - \$61,3 4 persons - \$76,6	income: 1 person - \$53,7 50, 3 persons - \$69,000, 50, 5 persons - \$82,800, 50, 7 persons - \$95,050		FURNISHED: Partly furnished appliances only have carpet		Funding: 2 Section 23 NO RESPO	yer hookups in uni 4 units Section 8; r 6/Co-op ONSE IN 2021. MPLETED UPDATE	est of units are
I-PERSON MAXIM	JUM MONTHLY INCOMI	 E:	4475		1		
2-PERSONS MAXI	IMUM MONTHLY INCOM	ИE:	5112				

	Last Comple	ete Update:	1/24/2022				Nuuonu
DDO IFOT NAME.				NEDTING ADD	LICA	AREA: PROJECT TYPE:	Nuuanu
	MAKAMAE (HP	HA-non) -	NOT ACC	EPTING APP	LICA		Elderly
ADDRESS:	21 South Kuakini St.					PHONE: 808-586	
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 586-972	28
MANAGER	: Sol Sentons			APPLY ADI	DRESS:		
				1002 North Honolulu, H			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING APP	PLICATIONS			PTING APPLIC	CATIONS	ACCEPTED:
APPLY ATTN	l: Oahu applications offic						NO
	NOT ACCEPTING APP				EMAIL:	nphaishereforyou.o	ra
APPLY PHONE	: 808-832-5961			FAX: 832-3461		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
s	tudio: 108	0		384	1	2	YES
One I	Bdrm: 16	0		500	1	4	YES
Two I	Bdrm:		<u></u>				
Three I	Bdrm:						
Four I	Bdrm:						
1 1001	Julii.		,	,		,	
RENT INFO: RE	NT IS 30% OF INCOME:	YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 124
Minimum Rent: \$0	for Federal Low Income	projects	Water and allo	wance for electricity		MINIMUM W	AIT LIST
********CLOSED	8/2/2016*****					ESTIMATE	(Months): 24
							JM WAIT STIMATE 60
AGE CRITERIA:						TO REMAIN ON W	
	d or spouse must be 62 y	rears or	WAITL	ST FOR PARKING:		CALL EVERY	(Months):
older, or disabled			PARKING INF		PET INFO:	F	PETS OK: YES
<u> </u>			Included		Small pets	under 25 lbs. only	
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			NCES: Domestic Vin transitional shelte	
Cannot own a hou	ise on Canu		1 year		displaced.	in transitional short	515, involuntary
						s must respond to a	
INCOME CRITER	IΔ·					dence from HPHA, o waitlist updates n	
ncome Eligibility =			FURNISHED:			must update any chold composition in	
	Income: 1 person - \$53,2 00; 3 persons - \$68,500;	250;	Partly furnished		waitlist sta	tus via hpha.myhou	ısing.com (will
4 persons - \$76,10	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		appliances on	ly, no carpet		name/password to	,
8 persons - \$100,4						s, under age 62 sp ng: Fed Low Inc Pu	
1 DEDCOMMAND			4570]		
1-PEKSON MAXIN	IUM MONTHLY INCOME	::	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	IE:	5220				

	KANA HALI	<u> </u>			<u> </u>	PROJECT TYPE:	Family
ADDRESS: 95-14	1 Kipapa Dr.					PHONE: 808-623	3-3920
CITY: Mililar	ni	STATE: HI	ZIP:	96789		FAX : 623-392	20
MANAGER: Mich	ael Ramos			APPLY AD 95-141 Kipa	DRESS: apa Drive, Mililar	ni 96789	OUT-OF-STA
APPLY TO: Mak	ana Hale Coopera	ative					APPLICATION ACCEPTED
APPLY ATTN:							YES
APPLY PHONE: 808-	623-3920		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	857	NO NO	843/882	3	9	NO
vo bdrm rent is \$592-6 iree bdrm rent is \$656- our bdrm rent is \$729-8	771 maximum.		Water				(Months):
SE CRITERIA:			-		Т	O REMAIN ON W	
ead of household must			WAITLIS ⁻	T FOR PARKING:		CALL EVERY	
story.	iodi verillable res	ideritidi	PARKING INFO:		PET INFO:		PETS OK: NO
	ASSET LIMITS:	YES	Parking included stall @ \$30/mo.	i, waitiist ioi ziid	Offiny assisting	ve animals with m	edicai verilication
AN OWN RESIDENTIA					GENERAL II		
SET LIMIT INFO: operty is counted when	n determining inco	ome	LEASE:		Application: Pick up fron	: m manager's office).
gibility.			Month-to-month		*Note, waitle every 6 more	ist status inquiry n nths.	nust be in writing,
			FURNISHED:			regular waitlist up contact info update	
	ximum Annual Income: 2 persons: \$45,650; persons: \$51,350; 4 persons: \$57,050;				,		
			Partly furnished-	-maior	*Applicants must respond to any correspondence from management, in a timely manner.*		

	Last Comple	ete Update:	1/24/2022			4554	McCully
BBO JECT NAME.	MAZIIA ALII /L	IDUA han)	NOT ACC	CEDTING AD	DLIC I	AREA: PROJECT TYPE:	Elderly
	MAKUA ALII (H	PHA-non)	- NOT ACC	SEPTING AP			1
ADDRESS:	1541 Kalakaua Ave.					PHONE: 808-973	
CITY:	Honolulu	STATE: HI	ZIP:	96826		FAX : 973-019	7
MANAGER APPLY TO	: Loane Ah Sam : HPHA NOT ACCEPTING AP	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCER	School St.	ATIONS	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	l: Oahu applications offic						NO
APPLY PHONE	NOT ACCEPTING AP :: 808-832-5961	PLICATIONS	ı	FAX: 832-3461	EMAIL: h	ohaishereforyou.o	rg
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm: 210	0		522	1	4	YES
Three I							
	NT IS 30% OF INCOME) for Federal Low Income		UTILITIES INCL Electricity and w			MINIMUM W	
*************CLOSED	8/2/2016*****					ESTIMATE (MAXIMU	
AGE CRITERIA:	d or analyse must be 60 v	10070 OT			Т	O REMAIN ON W CALL EVERY (AITLIST
older, or disabled	d or spouse must be 62 y			T FOR PARKING:			
			PARKING INFO	YES	PET INFO:	Inder 25 lbs. only	ETS OK: YES
1	ASSET LIMITS:	NONE	Included		Small pels t	inder 25 lbs. only	
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL II	NFO:	
ASSET LIMIT INF			LEASE:			ICES: Domestic V	
Cannot own a hou	ise on Oahu		1 year		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;		FURNISHED: Partly furnished appliances only		corresponde manner. No applicants n info/househ waitlist statu	must respond to a ence from HPHA, i waitlist updates n nust update any coold composition in us via hpha.myhou ame/password to co	in a timely eeded, however, ontact fo and check ising.com (will
8 persons - \$100,4	IUM MONTHLY INCOME		4570			, under age 62 spc g: Fed Low Inc Pu	
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛE:	5220				

	Last Comp	lete Update:	6/14/2023				AREA:	Liliha
PROJECT NAME:	MALULANI HA	LE				PROJECT	Г ТҮРЕ:	Elderly
ADDRESS:	114 North Kuakini St.					PHONE:	524-273	1 537-1213
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	545-521	4
	: John Valledor, Reside x 10 : Urban Real Estate Co		Lee, COS 524-2		tania St. C101			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Housing Managemen	t Department						YES
APPLY PHONE	: 524-2731x3609			FAX : 545-5214	EMAIL:	slee@urba	n-hi.com	
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXI Numb Ped		CAREGIVER Allowed:
One E	Bdrm: 150	1410			1		2	YES
Three E								NO
Project has some wait, as of 2022).	NT IS 30% OF INCOMI Section 8 units (60 unit t rents - call Sunnie dire 10	s; 5 year	UTILITIES INC Electricity and			ES ⁻	MUM W	(Months): 0
AGE CRITERIA:						TO REMA	IN ON W	P .
	d 62+ or disabled; spou ; all other members of the e 62+ or disabled		PARKING INFO	ST FOR PARKING O: YES ble (45 stalls) 2	PET INFO:		Р	(Months): 6 ETS OK: YES approval
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:			st after move-in; available; other) month.	GENERAL	INFO:		
ASSET LIMIT INFO	O:		LEASE: 1 year		rent unit. Transporta Catholic C federal pre	ation to Sho harities Ha ef.	opping av Iwaii	ge 62 spouse may vailable through
Maximum annual i	income for Sec. 8 Units		FURNISHED: Partly furnishe appliances onl		SQFT of u	า:	9 units + esident m ailable fro	ngr om manager. sed stamped
1-PERSON MAXIM	IUM MONTHLY INCOM	1E:	5446					

Printed: 4/2/2024 Page: 101

6967

	Last Comp	ete Update:	2/22/2022			AREA:	Pearl City
PROJECT NAME:	MANANA GAR	DENS				PROJECT TYPE:	Family
	949 Luehu St. Pearl City	STATE: HI	ZIP:	96782		PHONE: 808-45:	
	t: Sherry Revalee : Locations LLC			APPLY ADD 949 Luehu S Pearl City, F	St.		OUT-OF-STATE APPLICATION ACCEPTED:
	I: Property Managemen	t Division	F	FAX: 455-4232	EMAIL:	Locationsrentals.co	YES om/affordable-
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Two	Bdrm: 71 Bdrm: Bdrm:	940	2.5x rent	746			YES
Has Sliding Scale RAP (rent assista	for Rent: \$940 minus nce) = \$725 minimum r te holders need not mee uirement.	\$215 max ent.	UTILITIES INCLI Water & Sewer	UDED:		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA: Head of househol	d must be 18 years or o	į	WAITLIS PARKING INFO: Parking included		PET INFO	TO REMAIN ON V CALL EVERY	
AN OWN RESIDERS ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:	NONE YES	_EASE:		application communit Visitor par	. INFO: ntion letter mailed at n. Common laundry y area. On-site res rking. Near Pearl Ci d Pearl Highlands.	area. Large sident manager.
INCOME CRITER Maximum Annual 1 person - \$49,02 2 people - \$55,98 3 people - \$63,00 4 people - \$69,96 5 people - \$75,60 6 people - \$81,18 7 people - \$80,76	Income 60% AMI: 0 0 0 0 0 0		FURNISHED: Partly Furnished appliances, viny window curtains up.	I tile floors,	2019 Upd	ate - Info from Web	osite
	MUM MONTHLY INCOM		4085				

	Last Compl	ete Update:	8/31/2023			AREA:	Manoa
PROJECT NAME:	MANOA GARD	ENS ELDI	ERLY HOUS	SING	F	ROJECT TYPE:	
	2790 Kahaloa Dr.					PHONE: 808-76	,
					·	FAX: 762-05	
CITY:	Honolulu	STATE: HI	ZIP:	96822		11211 1102 00	
MANAGER	: Resident manager - K	ahea Fong		APPLY AD	DRESS:		
APPLY TO	: Hawaii Affordable Pro	perties, Inc.			n Street, Suite 30 awaii 96814	04	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
APPLY PHONE	: 808-762-0101			FAX:	EMAIL: ka	ahealanif@hawaii	iaffordable.com
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 48	975	2xrent	390	1	2	YES
One I	Bdrm: 31	1050	2xrent	448	2	2	YES
Two I	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:						YES
RENT INFO: RE	NT IS 30% OF INCOME	i: NO	UTILITIES INCL	LUDED:		TOTA	AL UNITS: 79
Stu 60% AMI rent - \$9	udio One bedroom		Water & Sewer			MINIMUM W	/AIT LIST
80% AMI rent - \$1 Market rent - \$1	100 1200					ESTIMATE	
	olders need not meet the	e minimum	ļ				UM WAIT STIMATE 60
AGE CRITERIA:					Т	O REMAIN ON V	
of application. App	dents must be 62 or olde plicants may apply witho		_	T FOR PARKING:		CALL EVERY	`
verifiable residenti	ial history.		PARKING INFO		PET INFO:		PETS OK: NO
-	ASSET LIMITS:	NONE	parking also ava	ailable			
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INF	O:		LEASE:		Caregivers a outside hom		MD letter; can work
			1 year, then mo	onth to month	Opened 199 Transportati		vailable through
INCOME CRITER	IA:		,				
	/II \$66,024, 80%AMI \$88 MI \$75,456, 80%AMI - \$		FURNISHED: Partly furnished appliances only window shades	. Carpet and			
I-PERSON MAXIM	IUM MONTHLY INCOM	E:	5502		1		
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛF:	6288				

		Last Compl	ete Update:	10/24/2023			AREA:	Chinatown	
PROJECT NAME:	MARI	IN TOWER	?				PROJECT TYPE:	Family	
ADDRESS:	60 North	n Nimitz Hwy.					PHONE: 808-528	8-4460	
CITY:	Honolul	J	STATE: HI	ZIP:	96817		FAX: 524-000	60	
MANAGER:		sutake Affordable Pro	partica		APPLY AD 60 N. Nimi Honolulu, F	tz Hwy		OUT-OF-STATE APPLICATION	
APPLY ATTN:								ACCEPTED: YES	
APPLY PHONE:	808-52	8-4460			FAX: 524-0060		Email: marin@haw https://www.marinte	raiiaffordable.com owerapartments.com	
Unit ⁻	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
St	udio:	19	1100	2637.50	430	1	2	YES	
One B	drm:	108	1200	2825.00	655	1	3	YES	
Two B	Bdrm:	109	1330	3387.5	729	2	5	YES	
Three B	drm:								
Four B	Bdrm:							NO	
	One T 1200, 1	- 1330 400 500	INO	Water + Sewe			MINIMUM W ESTIMATE MAXIMU		
AGE CRITERIA:							TO REMAIN ON W		
Head of household	l must be	e 18 years or ol	der	WAITL	IST FOR PARKING:		CALL EVERY	(Months): 12	
				PARKING INF		PET INFO		PETS OK: YES	
J	AS	SSET LIMITS:	NONE	Rent does not	include parking.	Service ar	nimals only.		
AN OWN RESID		PROPERTY:	YES			GENERAL			
ASSET LIMIT INFO): 			LEASE:		Accepts a	ll forms of subsidy ple: Section 8)	payments	
				1 year		Most units	s have a Lanai		
INCOME CRITERIA	A:			1		Application Pick up from Email: ma	n: om Resident Manaç arin@hawaijaffordab	ger's office	
60%AMI 1 2 3 4 5 \$54,900 \$62,700 \$70,560 \$78,360 \$84,660 Units also priced at 80, 120 and 140% AMI			\$84,660	FURNISHED:			O RESPONSE IN 2023		
1-PERSON MAXIMI	UM MON	NTHLY INCOM	E:	4575					
2-PERSONS MAXIN	иим мс	NTHLY INCOM	ME:	5225					

	Last Comp	lete Update:	5/17/2023			AREA:	Chinatown
PROJECT NAME:	MAUNAKEA T	OWER (CL	OSED for a	application)		PROJECT TYPE:	Family
	1245 Maunakea St.			,		PHONE: 808-537	7-9905
CITY	Honolulu	STATE: HI	ZIP:	00047		FAX: 545-166	
CITT.	Honolulu	STATE. HI	ZIF.	96817			
MANAGER	: Terri Washam			APPLY ADI	DRESS:		OUT-OF-STATE
APPLY TO):						APPLICATION ACCEPTED:
APPLY ATTN	I: Maunakea Tower						
APPLY PHONE	808-537-9905		F	FAX: 545-1663		sandalwoodmgt.co Maunakeatower@s	m andalwoodmgt.com
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: 254	0	NO	560		2	YES
	Bdrm: 126	0	NO	742	2	4	YES
Three	120			142	2		
Four	Bdrm:						NO
	NT IS 30% OF INCOM Y ACCEPTING APPLIC		UTILITIES INCL	ODED.		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	d must be 18 years or o	older				TO REMAIN ON W CALL EVERY	
	aao. 20 .0 you.0 o. 0		WAITLIS' PARKING INFO:	T FOR PARKING:	PET INFO:	F	PETS OK: NO
	ASSET LIMITS:	NONE	Parking included parking available available for a fe	d; some guest e; other options	Assistive a	nimals only	ę -
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:			79 units Low Incon	ne Housing Tax
			1 year; then mor	nth-to-month	Confirmation application	on letter sent upon	receipt of
INCOME CRITER	IA:					on wait list will rec	eive a notice
	Income: 1 person - \$45 50; 3 persons - \$58,80 00		FURNISHED: Partly furnished- appliances only.		annually		
1-PERSON MAXIN	IUM MONTHLY INCOM	1E:	3808]		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	4354				

		Last Com	plete	Update	e: 1	10/24/2023				AREA:	Palama
PROJECT NAME:	MAY	OR WRIG	GHT	HON	MES	(HPHA-I	hon) -	NOT	ACCEP	PROJECT TYPE:	Family
ADDRESS:										PHONE: 808-832	2-3153
										FAX: 832-318	
CITY:	Honoluli	u	S	TATE:	Н	ZIP:		96817		,	
MANAGER	: Cynthia	a Yoshida - M	/lanag	er					ADDRESS: orth School St.		OUT-OF-STATE
APPLY TO	: HPHA							Honolulu	u, HI 96817 CCEPTING APPL	ICATIONS	APPLICATION
40017/4771		CCEPTING A		ICATIO	NS			NOT AC	CEPTING APPL	ICATIONS	ACCEPTED: NO
APPLY ATTN		applications o CCEPTING A		ICATIO	NS				EMAIL		
APPLY PHONE	: 808-83	2-5961					FAX:	832-3461		: hphaishereforyou.o	rg
Unit	Type:	Number	Г		_	Minimum			MINIMUM	MAXIMUM	CAREGIVER
		of UNITS:		RENT:	:	INCOME Required:		SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:				_		- h				
One I	Bdrm:	24	ĺ	0			ī	530	1	2	YES
Two I	Bdrm:	114	ĺ	0			T i	732	2	4	YES
Three I	Bdrm:	168	ĺ	0				908	3	6	YES
Four I	Bdrm:	50	ĺ	0				1203	4	8	YES
RENT INFO: RE Minimum Rent: \$0 PREFERENCES: homeless in transidisplaced.) for Fede Domesti	eral Low Inco	me pr ctims;	ojects	V	TILITIES IN Vater and ga lectricity				MINIMUM W ESTIMATE MAXIMU	(Months): 36
***********	0/2/201 <i>6</i>	*****			, e						STIMATE 60
AGE CRITERIA: Head of household	d must be	e 18 years or	older							TO REMAIN ON W CALL EVERY	
		,			P	WAITL ARKING INI		R PARKIN	NG: PET INFO): F	PETS OK: YES
]						ncluded			multiple a	nimals ok, but only o	
	AS	SSET LIMITS	s: NC	DNE	7					ories listed below: under 25 lbs) or_cat	
AN OWN RESID		PROPERTY	′: NC)					GENERA	L INFO:	
ASSET LIMIT INF		ahu			<u> LE</u>	EASE:				nts must respond to a ndence from HPHA,	
Carriot own a nou	36 011 06	anu			1	year			manner. applicant info/hous	No waitlist updates r s must update any c ehold composition ir atus via hpha.myhou	needed, however, ontact ofo, and check
INCOME CRITER					_					rname/password to Fed Low Inc Pub Hs	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 00; 3 pers 00; 5 pers 00; 7 pers	1 person - \$5 sons - \$68,50 sons - \$82,20	00; 00;);	P	URNISHED: Partly furnish ppliances or	edmaj		All convidence of the conviden	ctions must be 3 yrs ethamphetamine or PONSE IN 2023	ago, unless it's
1-PERSON MAXIM	10M MUI	NTHLY INCO	ME:		4	570			į.		

Printed: 4/2/2024 Page: 106

5220

		Last Comp	lete Update:	8/2/2023			AREA:	Mililani
PROJECT NAME:	MEHI	EULA VIS	TAI				PROJECT TYPE:	Elderly
ADDRESS:	95-1060	A Lehiwa Dr.					PHONE: 808-62	6-9162
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX : 427-85	91
MANAGER APPLY TO	Gomez	Z	ee Young; Offic	ce Assistant - Ju		Lehiwa Drive		OUT-OF-STATE APPLICATION
								ACCEPTED: YES
APPLY ATTN					FAX: 427-8591		vista/	artments/meheula-
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio: Bdrm:	75	000	0. 7	400			
	Bdrm:	75	990	2 X rent	420			
Three								
	Bdrm:							YES
Four	builli.							YES
RENT INFO: RE	NT IS 30	% OF INCOM	E: NO	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 75
30% AMGI - \$690 50% AMGI - \$990 Food Stamps & R help meet min. inc	mo, 71 uent Subs	units idy may be acc		Electricity, wa	ter, sewer			(Months): 6
AGE CRITERIA:				r			TO REMAIN ON V	12
All residents must				\^/ ^ I T I	IST FOR PARKING:		CALL EVERY	
Applicants can ap histories.	ply witho	ut verifiable res	sidential	PARKING INF		PET INFO	: 1	PETS OK: NO
	۸۵	SSET LIMITS:	NONE	\$50/month av come, first-se Once all stalls				
AN OWN RESI					ancy restricted to	GENERAL	INFO:	
ASSET LIMIT INF				LEASE:		*Along wit	h completing regula	ar waitlist updates, tact info current, as
All income from as eligibility.	ssets is c	counted to dete	rmine			well as res managem Picnic are		cation from housing nner.* n, laundry room,
INCOME CRITER		7.540		ELIBATION ISS		laundry, Onsite res	ident manager, vis	itor parking, multi-
30% AMI - Max in \$31,440 two perso 50% AMI - Max in \$52,400 two perso	ons. come -\$4	•		FURNISHED: Range/oven, grefrigerator, fr flooring, winds ceiling fan.		purpose p Funding: I Must have	avillion. _IHTC, HHFDC, RF	HTF, and DURF erences and satisfy
I 1-PERSON MAXIM	10M MUI	NTHLY INCOM	E:	4071		Į.		
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	4367				

	Last Compl	lete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME:	MEHEULA VIS	TA II				PROJECT TYPE:	Elderly
ADDRESS:	95-1060B Lehiwa Dr.					PHONE: 808-62	6-9162
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 427-85	91
	: Resident Manager - D Gomez	ee Young; Offic	e Assistant - Julio	o APPLY ADI 95-1060A L Mililani, Hav	ehiwa Drive		OUT-OF-STATE
	: Meheula Vista			,			ACCEPTED: YES
APPLY PHONE	: Management Office : 808-626-9162			FAX: 427-8591	EMAIL:	eahhousing.org/ap vista/	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:						
One E	3drm: 75	990		420			
Two E	Bdrm:						
Three E							
	NT IS 30% OF INCOME		UTILITIES INCL		_	TOTA	AL UNITS: 75
	GI=\$690; 60 units @ 50 its @ 60% AMGI = \$100		vvater, sewer a	nd electricity include	ea.		(Months): 6
AGE CRITERIA:						TO REMAIN ON V	Į 12
All tenants must be	e 55 at the time of appli	cation	WAITLIS	ST FOR PARKING:		CALL EVERY	
	bly without verifiable res	idential	PARKING INFO		PET INFO	: .	PETS OK: NO
history.	ASSET LIMITS:		once all stalls a	estricted to those			
AN OWN RESID	ENTIAL PROPERTY:	YES			GENERAL	. INFO: th completing regula	ar waitlist undates
			LEASE:		applicants well as res	must keep all cont	act info current, as ation from housing
INCOME CRITERI	Δ.				manager,	free property. On-si Meeting & multi-pu	rpose room,
Maximum annual i	ncome:	Ф24.44C	FURNISHED:			try doors, common a, community room	
50% AMI - 1 perso	n - \$27,510, 2 persons n - \$45,850; 2 person - n \$55,020; 2 person \$6	\$52,400	Major applicand disposal, vinyl fan, window cov	flooring, ceiling			
 1-PERSON MAXIM	UM MONTHLY INCOM	E:	4585]		

Printed: 4/2/2024 Page: 108

5240

	Last Com	plete Update:	8/8/2023			AREA:	Mililani
PROJECT NAME:	MEHEULA VI	STA III				PROJECT TYPE:	Elderly
ADDRESS:	95-1060C Lehiwa Dr.					PHONE: 808-626	6-9162
CITY:	Mililani	STATE: HI	ZIP:	96789		FAX : 427-859	91
	Resident Manager - Gomez Management Office	Dee Young; Offi	ce Assistant - Julio		.ehiwa Drive		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Meheula Vista I - AT	TN: Resident M	anager				ACCEL TED.
APPLY PHONE	: 808-626-9162		F	FAX: 427-8591	EMAIL:	eahhousing.org/apa vista/	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	tudio:						
One E	3drm: 75	990	2x Rent				
Two E	Bdrm:						
Three E	Bdrm:						
Four E	3drm:						
30% AMI Units - \$ 50% AMI Units - \$	NT IS 30% OF INCOM 690/month - 8 Units 990/month - 60 Units \$1000/month - 7 Units		UTILITIES INCLU Water, Sewer, an			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	· ·
submission.	e 55 at time of applicated by without verifiable re		WAITLIST PARKING INFO:	FOR PARKING:	PET INFO	CALL EVERY	(Months): 6 PETS OK: NO
history.	ASSET LIMITS:		\$50/mo. Parking once all stalls are occupancy is res	is limited and e assigned, stricted to those			
AN OWN RESID	DENTIAL PROPERTY:	YES		a volucio.	GENERAL		
AGGET ENVIT INTO	<u>o.</u>		LEASE:		applicants well as remanagem	th completing regulars must keep all controls spond to communic tent in a timely man	act info current, as ation from housing ner.*
INCOME CRITERI	A:		,		manager,	free property. On-si	ose room, locked
year., 2 persons - 50% AMI - Maximi year.; 2 person - \$	um income, 1 person - 50,400 per year um income 1 person \$	\$44,100 per	FURNISHED: Major appliances disposal, vinyl flo fan, window cove	poring, ceiling		rs, common laundry nunity room.	area, picnic area,
I 1-PERSON MAXIM	UM MONTHLY INCOI	ME:	3675				

Printed: 4/2/2024 Page: 109

4200

VISTA IV					
				PROJECT TYPE:	Elderly
a Drive				PHONE: 808-626	6-9162
STATE: Hi.	ZIP:	96789		FAX : 427-859	91
0	e Assistant - Julio	95-1060D Le	ehiwa Drive		OUT-OF-STAT APPLICATIO ACCEPTED
					YES
	FA	AX: 427-8591	EMAIL:	MVLP-managemer	nt@eahhousing.org
	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
990		420			
					NO
ICOME: NO				MINIMUM W ESTIMATE MAXIMU	(Months):
at the time of	r.			TO REMAIN ON W	/AITLIST
at the time of	PARKING INFO:		PET INFO:		PETS OK: NO
	once all stalls are occupancy is rest	assigned, ricted to those	GENERAL	INFO:	
,	LEASE:		applicants well as res managem	must keep all cont spond to communic ent in a timely man	act info current, as ation from housing ner.*
	,		laundry,	•	·
		oring, ceiling	purpose p	avillion.	
	ger - Dee Young; Office Office RENT:	ger - Dee Young; Office Assistant - Julio Office FA BENT: Minimum INCOME Required: 990 UTILITIES INCLU Electricity, water 8 WAITLIST PARKING INFO: \$50 mo. Parking once all stalls are occupancy is rest who do not own a coupancy is rest w	ger - Dee Young; Office Assistant - Julio 95-1060D Le Mililani, Haw FAX: 427-8591 FAX: 427-8591 Ger RENT: Minimum INCOME Required: SQ FT: 990 420 UTILITIES INCLUDED: Electricity, water & sewer WAITLIST FOR PARKING: PARKING INFO: \$50 mo. Parking is limited and once all stalls are assigned, occupancy is restricted to those who do not own a vehicle. WITS: NONE Who do not own a vehicle. PERSON - \$31,440 Barson - \$2,400 FURNISHED: Major appliances, garbage disposal, vinyl flooring, ceiling	ger - Dee Young; Office Assistant - Julio APPLY ADDRESS: 95-1060D Lehiwa Drive Mililani, Hawaii 96789 EMAIL: FAX: 427-8591 EMAIL: FAX: 427-8591 Minimum INCOME Required: SQ FT: of People 990 420 UTILITIES INCLUDED: Electricity, water & sewer MINS: NONE APPLY ADDRESS: 95-1060D Lehiwa Drive Mililani, Hawaii 96789 MINIMUM Number of People SQ FT: of People PET INFO: \$50 mo. Parking is limited and once all stalls are assigned, occupancy is restricted to those who do not own a vehicle. MITS: NONE Along with applicants well as res managem Picnic are landscape land	ger - Dee Young; Office Assistant - Julio ger - Dee Young; Office Assistant - Julio APPLY ADDRESS: 95-1060D Lehiwa Drive Mililani, Hawaii 96789 EMAIL: MVLP-managemer FAX: 427-8591 EMAIL: MVLP-managemer FAX: 427-8591 MINIMUM Number of People People People: Of People GENERAL INFO: AND UTILITIES INCLUDED: TOTAL Electricity, water & sewer TO REMAIN ON W CALL EVERY MITS: NONE WAITLIST FOR PARKING: PARKING INFO: S50 mo. Parking is limited and once all stalls are assigned, occupancy is restricted to those who do not own a vehicle. WITS: NONE LEASE: FURNISHED: Person - \$31,440 Major appliances, garbage disposal, vinyl flooring, ceiling FURNISHED: Purpose pavillon. Funding: LIHTC, HHFDC, RH

Printed: 4/2/2024 Page: 110

4367

		Last Comp	lete Update:	8/10/2023				AREA:	Waipahu
PROJECT NAME:	MOK	UOLA VIS	STA				PROJEC	T TYPE:	Family
ADDRESS:	94-333 [Mokuola St.					PHONE:	808-67	1-4075
CITY:	Waipahi	u	STATE: HI	ZIP:	9679	7	FAX:	671-280	07
MANAGER APPLY TO					P.O. Hono	LY ADDRESS: Box 22420 Iulu, HI 96823 or 3 Mokuola Street	t, Waipahu		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Proper	ty Managemen	t Division		9079				YES
APPLY PHONE	: 808-67	1-4075			FAX: 671-28		IL: http://www.ble-rentals		srentals.com/afforda
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT	MINIMU Numbe of Peop	r Num	IMUM ber of ople:	CAREGIVER Allowed:
One	Bdrm:	69	1320	2.5 x rent	641			5	
Three		09	1320	Z.3 X Territ	041			5	
Four	Bdrm:								YES
RENT INFO: RE 4 units @ 30% AM 65 units @ 60% AM Section 8 certificates gross income required 600+ credit score	MG for \$5 MGI for \$ ate holders uirement.	30 \$1320 s need not mee		UTILITIES INC Water and sev				IMUM W TIMATE	AIT LIST (Months): 2
Packground choo				Į.					STIMATE 3
AGE CRITERIA: Head of househol	d must be	e 18 years or o	lder	\^/^ T	ICT COD DADI	ZINC:	TO REMA CALL		(Months): 3
				PARKING INF	IST FOR PARI		FO:	F	PETS OK: NO
]	AS	SSET LIMITS:	NONE	\$50 monthly fe spaces.	ee; 105 parking	Service Reque	e Animal. Emo st	otional ne	ed. Doctor
AN OWN RESI		PROPERTY:				GENER	RAL INFO:		
ASSET LIMIT INF	·O:			LEASE:			ound, picnic a tack W/D.	rea. Eac	h unit will have
						4 Hand	dicap units ava	ailable on	site
						Fundin	ıg: RHTF		
Annual Maximum \$27,510, 2 persor persons - \$39,300 2 persons \$62,880 \$78,600	Income - ns \$31,44) 60% of	0, 3 persons \$3 AMI: 1 Persor	35,370, 4 n \$55,020,	FURNISHED:			ESPONSE SIN ocation's web); updates taken
1-PERSON MAXIN	MUM MON	NTHLY INCOM	E:	4585					
2-PERSONS MAX	IMUM MC	ONTHLY INCO	ME:	5240					

Last Complete Upda	te: 6/13/2023	AREA:	Kakaako
PROJECT NAME: NA LEI HULU KUPUI	NA	PROJECT TYPE:	Elderly
ADDRESS: 610 Cooke St.		PHONE: 808-593	3-1009
CITY: Honolulu STATE	: HI ZIP: 96813	FAX:	
MANAGER: Angela Hoan, Property manage APPLY TO: Na Lei Hulu Kupuna		ADDRESS: oke Street #114, Honolulu, HI	OUT-OF-STATE APPLICATION
APPLY ATTN:			ACCEPTED: YES
APPLY PHONE: 808-593-1009	FAX:	EMAIL: www.mdihawaii.cor angela@mdihawaii	
Unit Type: Number of UNITS: REN	T: Minimum INCOME Required: SQ FT:	MINIMUM Number of People MAXIMUM Number of People:	CAREGIVER Allowed:
Studio: 75 966 One Bdrm:	350	1 2	YES
Two Bdrm:			
Four Bdrm:			YES
RENT INFO: RENT IS 30% OF INCOME: NO	UTILITIES INCLUDED:	TOTA	AL UNITS: 75
Mark Development is management company. 20 Units @ 40% AMI - \$733.00/ month 53 Units @ 50% AMI - \$966.00/month	Electricity and water	MINIMUM W ESTIMATE	
2 Units @ 60% AMI - \$1099.00/month *No waitlist updates needed; applicants only need to			JM WAIT STIMATE 12
AGE CRITERIA: Applicants must be 62 yrs old at time of application	_	TO REMAIN ON W CALL EVERY	
submission. Applicants can apply without verifiable residential history, with letter from their case worker		PET INFO: F	PETS OK: NO
ASSET LIMITS: NONE	No parking available.	Accommodation considered for service animals	or verifiable
AN OWN RESIDENTIAL PROPERTY: YES		GENERAL INFO:	
ASSET LIMIT INFO:	LEASE:	Transportation to Shopping a Catholic Charities Hawai'i	vailable through
	1 year intial lease, then month- month after that	Open in 1992; has Air Condit Has social services on site, p coordinator Katie Hoan 5 handicap units w/ walk in sh	art-time,
INCOME CRITERIA:	_	each floor Funding: LIHTC, RAP	,
Income Limit	FURNISHED: Fully furnishedmajor appliances, bed, dresser, coffetable with chairs (which can be removed, if requested) and A/C Carpets/ Linoleum	Accepts Section 8 & Rent Su Can decline an offer of an ap and after that, will need to rea	artment 2-3 times
1-PERSON MAXIMUM MONTHLY INCOME:	4410		

	Last Comp	ete Update:	10/24/2023			AREA:	Nanakuli
PROJECT NAME:	NANA'IKEOLA	SENIOR A	PARTMEN	TS		PROJECT TYPE:	Elderly
ADDRESS:	87-122 Nanaikeola St.					PHONE: 808-668	3-4702
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX:	
MANAGER	R: Mike Klein, Compliand	ce Manager		APPLY ADD	DRESS:		OUT-OF-STATE
APPLY TO	D: Call for viewing and a	oplication.					APPLICATION ACCEPTED:
APPLY ATTN	l :						YES
APPLY PHONE	E: 808-668-4702		ı	FAX:	EMAIL: h	nalealiigroup@yaho	oo.com
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 39	0		500	1	3	
Three							NO
	:NT IS 30% OF INCOME me; maximum income n		\$75 monthly utili	UDED: d garbage included ty allowance. No A is Subject to Chan	C.	MINIMUM W ESTIMATE	
AGE CRITERIA:							STIMATE 36
Head of househol	d must be 62 years or o		WAITLIC	T FOD DADIZING.		TO REMAIN ON W CALL EVERY	
spouse/partner m members must be	ust be 18 and older; all one 62. Caregiver must be	other family 19+	PARKING INFO	T FOR PARKING:	PET INFO:	F	PETS OK: YES
]	ASSET LIMITS:	NONE		led, covered and limited (28 stalls	If under the	provisions of pet	policy.
AN OWN RESI	DENTIAL PROPERTY:	YES			GENERAL	INFO:	
ASSET LIMIT INF	⁻ O:		LEASE:			Jeanette Weinberg rtments, opened 3	
			1 year; co-signe credit score is lo			447-5991 on 202 program, Hational Community	
INCOME CRITER			=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Neinberg Foundat nanager on site.	ion
	% of Median (Very Low I 3,350 for 2; \$43,150 for 3		FURNISHED: major applicanc coverings	es, window	2 units are		essibl E OCCURRED ON
1-PERSON MAXIM	NUM MONTHLY INCOM	E:	2796		<u> </u>		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	3196				

	La	st Comple	ete Update:	10/24/2023			AREA:	Waianae
PROJECT NAME:	NANAKI	II I HO	MES (HP	-1Δ-1 <u>0</u> -0) - N	OT ACCEPTI	NG A	PROJECT TYPE:	
	87-1606 to 87			IA-ICC) - IN	OT ACCEL II		PHONE: 808-697	j,
7.2211.2001	07 1000 10 07	10121 01	illigion riwy				FAX: 697-717	
CITY:	Nanakuli		STATE: HI	ZIP:	96792		17211 007 717	-
MANAGER	: Mandy Miya	moto			APPLY ADI			OUT-OF-STATE
APPLY TO		PTING AP	PLICATIONS		Honolulu, H		CATIONS	APPLICATION ACCEPTED:
APPLY ATTN			e PLICATIONS			FMAII -	hphaishereforyou.o	NO
APPLY PHONE	: 808-832-596	51			FAX: 832-3461	LINAL	прпавлетеготуби.	· g
Unit		nber NITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							
Two	3drm:							
Three I		36	0		1024	3	8	YES
RENT INFO: RE Minimum Rent: \$0 PREFERENCES: homeless in transi displaced.	for Federal Lo Domestic Violetional shelters	ow Income ence victin	projects ns;	UTILITIES INC	CLUDED: owance for electricity		MINIMUM W. ESTIMATE MAXIMU	(Months): 36
************	Q/ ?/? 01&*****			le.				
AGE CRITERIA: Head of household	d must be 18 y	ears or old	der		IST FOR PARKING:		TO REMAIN ON W CALL EVERY	(Months):
				PARKING INF	O:	PET INFO	: Finals ok, but only o	PETS OK: YES
į.	ASSET	LIMITS:	NONE	l lac carport		the catego	ories listed below: under 25 lbs) or cat	
AN OWN RESID		PERTY:	NO			GENERAL		
ASSET LIMIT INF	O:			LEASE: 1 year		correspon manner. N applicants info/house	ts must respond to a dence from HPHA, No waitlist updates no must update any cehold composition in atus via hpha.myhou	in a timely needed, however, ontact nfo, and check
INCOME CRITER	IA:					need user	name/password to of Fed Low Inc Pub Hs	do so).
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10 6 persons - \$88,30 8 persons - \$100,4	Income: 1 pers 00; 3 persons - 00; 5 persons - 00; 7 persons -	\$68,500; \$82,200;	250;	FURNISHED: Partly furnishe appliances on		All convic	red Low life Fub 11s tions must be 3 yrs a ethamphetamine or s PONSE IN 2023	ago, unless it's
1-PERSON MAXIM	IUM MONTHL'	Y INCOME	Ē:	4570		Į.		

Printed: 4/2/2024 Page: 114

5220

		Last Comp	lete Update:	5/17/2023			ADEA	Kakaako
PROJECT NAME:	NOH		F				AREA:	·
ADDRESS:			<u> </u>				PHONE: 808-65	J. G
							FAX: (808) 4	
CITY:	Honolul	u	STATE: HI	ZIP:	96813		17211 (000) 4	00 2217
MANAGER	R: Dorene	e Young			APPLY A			
APPLY TO		a Hale lousing				e St., Honolulu, bsite: eahhousir		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	I: Leasin	g Office						YES
APPLY PHONE	: 808-65	50-3931			FAX: (808) 465-2		NH-Management@ Website: eahhous	
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	111	999	2x Rent	355	1	2	
One I	Bdrm:		0					
Two	Bdrm:		0					
Three	Bdrm:		0					
Four	Bdrm:		0					YES
**Subject to change AGE CRITERIA:	55 sq. ft. h * 355 sq. f th *	+ 75 sq. ft. lar	nai) - 30%	Water & Gas			MINIMUM W ESTIMATE MAXIM	(Months): 6 UM WAIT STIMATE 12
18+				WAITL	IST FOR PARKING	3 :	CALL EVERY	(Months): 0
				PARKING INF	1.20	PET INFO		PETS OK: NO
]	AS	SSET LIMITS:			led, but severely available. No guest r.	No pets a	llowed.	
AN OWN RESID		PROPERTY:	YES			GENERAL	. INFO:	
ASSET LIMIT INF Interest is conside		me for all asset	S.	1-year lease f month-to-mon	or first year, then thereafter.	applicants well as re managem Communi	ist updates needed s must keep contac spond to communic tent in a timely mar ty Features: Bicycle	t info updated, as cation from nner.* e, Moped &
	n/\$26,46 ns/\$34,0	20 Max.		FURNISHED:	Attached Sofa.	Communi Communi Managem On-Site la	undry facilities	inity room kitchen
60% AMI: 1 perso 2 perso	nr/\$52,92 ns/\$56,7					Outdoor la Secured e Security o	entry	
I-PERSON MAXIN	IUM MOI	NTHLY INCOM	E:	0		<u> </u>		

Printed: 4/2/2024 Page: 115

0

		Last Compl	lete Update:	10/24/2023			AREA:	Nuuanu
PROJECT NAME:	NUUA	NU YMC	<mark>A - Men's</mark>				PROJECT TYPE:	Emergency/Transi
ADDRESS:	1441 Pali	Hwy					PHONE: 808-536	6-3556
CITY:	Honolulu		STATE: HI	ZIP:	96813		FAX : 521-118	31
MANAGER APPLY TO): Alina Piu		rship Coordinat	or	APPLY ADI 1441 Pali H Honolulu, H	wy.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	≣: 808-536-	-3556			FAX: N/A	EMAIL:	cyoung@ymcahonoapiunno@ymcahor	
Unit		Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:	50	45			1	1	
One I	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE \$45/night, \$255/w Student housing a monthly \$720	eek - single	e w/ shared ba	athroom.	UTILITIES INC Access to fitne			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	Į*
Must be 18+. SR	0			WAITLI PARKING INFO No parking	ST FOR PARKING:	PET INFO	CALL EVERY : F	(Months): 0 PETS OK: NO
AN OWN RESID		SET LIMITS: PROPERTY:				GENERAL	_ INFO:	
ASSET LIMIT INF				LEASE:		Tempora	ry Residence for sin	gle men ONLY
Tto moonie require	omente.			None		Check-In Mon-Fri 1 Sat 12pm Sun 12pn	2pm - 8pm n-5pm	
INCOME CRITER	IA:			FLIDAUOLIED		Check-Ou	ut 12pm	
					sser, closet, desk,	Last Upda	ate in 2019 - Info fro	m Website
				& lamp.		LAST RE	SPONSE IN 2021.	

2-PERSONS MAXIMUM MONTHLY INCOME:

PRO IECT NAME:	Last Comp	lete Update:	10/24/2023	2		AREA:	Waipahu Family	
	94-207 Waipahu St.	IFANU AFA	AKTIVIENT	3		PHONE: 808-671		
CITY:	Waipahu	STATE: HI	STATE: HI 2IP: 96797			FAX: 676-6945		
MANAGER APPLY TO APPLY ATTN				APPLY ADI Attention: M 94-207 Wai Waipahu, H	//anagement		OUT-OF-STATE APPLICATION ACCEPTED: NO	
APPLY PHONE	: 808-671-2800			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:							
Two I	Bdrm:	1900	2.5xrent 2.5xrent	882 998	1	5		
Four I		2200					YES	
324 Units @ Mark 82 Units @ 80% A Preference given t including the 80% AGE CRITERIA: Applicant must be	MMGI to 60% of the total availa	able units,	UTILITIES INC None	LUDED: ST FOR PARKING:		MINIMUM W ESTIMATE MAXIMU	(Months): 0 JM WAIT STIMATE 0 VAITLIST	
submission. Applicants can ap history.	ply without verifiable res	sidential	PARKING INFO			2 pets allowed. \$50	PETS OK: YES	
AN OWN RESID	ASSET LIMITS: DENTIAL PROPERTY:		for extra stall		month. GENERAL	_ INFO:		
ASSET LIMIT INF	O:		LEASE:	ease agreements	*24 hr Fiti internet a *Gated co Onsite lau	es - Waipahu St. & ness room, business ccess, pool (8ft), wa ommunity w/ courtes undry anagement	s room w/ free ding pool (2ft)	
INCOME CRITER 2.5 x rent	IA:		FURNISHED: Full range, refr ceiling fans, a/disposal	igerator, blinds, c, garbage	Online pa Dog Park	yments MPLETED UPDATE	E OCCURRED ON	

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	6/13/2023			AREA:	Waianae
PROJECT NAME:	OHANA OLA C	KAHUMA	NA			PROJECT TYPE:	Emergency/Trans
ADDRESS:	86-704 Lualualei Home	estead Rd.				PHONE: 808-696	6-4095
CITY:	 Waianae	STATE: HI	ZIP:	96792		FAX: 696-714	14
MANAGER	d: Desiree Robeinson, S	ite Manager		APPLY A	DDRESS:		OUT-OF-STATE
APPLY TO	: Alternative Structures	International					APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	: 808-696-4095			FAX:	EMAIL	: Website: 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:
	tudio: 6					4	
Two I	Bdrm: 36					6-8	
Three I	Bdrm: 6					8-10	
Four	Burni.		1		,		
	NT IS 30% OF INCOME		UTILITIES INC			TOTA	AL UNITS: 48
	referrals from the state' system only for transition		Electric and w	ater		MINIMUM W ESTIMATE	
							JM WAIT STIMATE 0
AGE CRITERIA:						TO REMAIN ON W	
For families with n homelessness.	ninor children experienc	-		ST FOR PARKING	_	CALL EVERY	
			PARKING INF included, one		PET INFO); F	PETS OK:
	ASSET LIMITS:		guest parking				
	DENTIAL PROPERTY:				GENERA	L INFO:	
ASSET LIMIT INF	O:		LEASE:		Coordina	to Ohana Ola is thro ted Entry System (C nal housing only.	ugh the ES)
						o respond to commu	
INCOME CRITER	IA:		FURNISHED:		managen rejection	nent, in a timely mar of application.*	nner, will result in
			- Granierizzi		NO RESI	PONSE IN 2023	
I-PERSON MAXIN	IUM MONTHLY INCOM	E:	0				
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	0				

		Last Compl	ete Update:	10/24/2023			AREA:	Kakaako
PROJECT NAME:	OI A	KA'II IMA	ARTSPAC	CFLOFTS			PROJECT TYPE:	
ADDRESS:			711110171				PHONE: 808-439	<u> </u>
7.5511.200.	1023 V	raimana Ot.					FAX: (808) 43	
CITY:	Honolu	lu	STATE: HI	ZIP:	96814		[(808) 43	59-6402
	Office Honoli EAH I	Address: 1025 \ Juliu HI 96814 Housing-OLA KA	'ILIMA ARTSP		and submitt https://www s/artspace-l	ications can be led at: leahhousing.org	g/apartment	OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	Ū	·			FAX: N/A	EMAIL: A		EAHHOUSING.ORG
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:		1293	2.5x rent	680-721		3	
Two I	Bdrm:		1539	2.5x rent	851-1016		5	
Three I	Bdrm:		1766	2.5x rent	1265-1279		7	
Four I	Bdrm:		0					YES
RENT INFO: RE One Bedroom 30' AMI - 34 Units - \$ \$1293/mo Two Bedrooms 50 60% AMI - 6 Units	%AMI - 1067/m	9 Units - \$615/m o; 60% AMI - 7 U - 23 Units - \$120 9/mo	o; 50% Jnits - 68/mo;	UTILITIES INCL Water, Sewer, 7			MINIMUM W. ESTIMATE MAXIMU	(Months): 24
AGE CRITERIA:						-	TO REMAIN ON W	
18+				WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 6
				PARKING INFO		PET INFO:		PETS OK: YES
AN OWN RESID		SSET LIMITS:		Resident parkin	ng garage.	GENERAL	\$250 Pet Deposit. NFO:	
ASSET LIMIT INF	O:			LEASE:		*Along with	completing regula	r waitlist updates,
				1 Year		well as resp management Application	oond to communica nt in a timely manus: S: Online only, at	act info current, as ation from housing ner.*
INCOME CRITERI		2 2		FLIDAUOLIED		e-lofts/ *On-site wa	asher and dryer fac	cilities; ommunity
1 30%AMI \$25,400 50% AMI \$42,300 60%AMI \$50,760	\$29,0 \$48,3	350 \$54,400	\$60,400	FURNISHED: Major appliance refrigerator).	es only (stove and	community office; On-s	tyard with playgrou gardens; *On-site site maintenance DNSE IN 2023	
1-PERSON MAXIM	IUM MO	NTHLY INCOMI	≣:	0				

Printed: 4/2/2024 Page: 119

0

		Last Comp	lete Update:	10/24/2023			AREA:	Mililani
PROJECT NAME:	OLA	LOA RETI	REMENT (COMMUNI	TY		PROJECT TYPE:	Retirement
ADDRESS:	95-1050	0 Makaikai St.					PHONE: 808-626	6-2323
CITY:	Mililani		STATE: HI	ZIP:	96789		FAX: 626-280	00
-	Iviilliai				30703			
MANAGER	: Corne	lius Dobber			APPLY AD			
APPLY TO) :				Look in Sur realtor	nday paper or co	ontact a	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	i:				FAX: 626-2800		olaloa.info@hawaii www.olaloaretireme	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	45	900		380	1	2	YES
One I	Bdrm:	103	1100		529	1	2	YES
Two I	Bdrm:	212	1450		748	1	2	YES
Three I	Bdrm:							
Four I	Bdrm:							NO
RENT INFO: RE Additional mainter on size of unit Re Landlord to detern be purchasd or rei	nance fe ental price nine actu	e \$242 - \$527, o es based on ma ual rental price.	depending arket value.	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:	h - 55 -					•	TO REMAIN ON W CALL EVERY	
All residents must	. De 55 0	i oldei		WAITLI PARKING INF	IST FOR PARKING:	PET INFO:		PETS OK: YES
				Parking includ		One dog (2	0 inches in height	į.
	А	SSET LIMITS:	NONE			Two cats.	Up to landlord if al	lowed.
AN OWN RESID						GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE:		Call a realt 2) Olaloa D privately ov 3)There are	e no assisted living	the rental of their
INCOME CRITER	IA:					emergency	om, restaurant, cor v push button trans	mitters staffed 24
Max income - NOI	NE			FURNISHED:	al costs	4) Each un	spond (no doctors it has lanai (not inc	cluded in sq. ft.)
				Partly furnishe appliances on		waitlist upo	erty does not keep lates necessary* DNSE IN 2023	a waitlist, thus, no

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	5/19/2023			AREA:	Downtown
PROJECT NAME:	OLD VINEYARI	ס				PROJECT TYPE:	Family
ADDRESS:	265 South Vineyard St.					PHONE: 808-524	1-2731 x 3609
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 545-521	4
MANAGER	R: Myrna Chun, Resident	Mgr.; Sunnie Lee	, COS 524-2731				OUT OF STATE
APPLY TO): Urban Real Estate Co.			Honolulu, HI	nia St. C101 96813		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Housing Management	Department					YES
APPLY PHONE	E: 808-524-2731 x 3609		F	AX: 545-5214	EMAIL:	slee@urban-hi.com	1
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 14		NO				YES
	Bdrm: 14	0	NO		2	4	YES
Three		0	NO		3	6	YES
Four	Bdrm:						NO
RENT INFO: RE	ENT IS 30% OF INCOME	: YES U	TILITIES INCLU	JDED:		ТОТА	L UNITS: 32
		V	Vater			MINIMUM W	AIT LIST
						ESTIMATE	
							JM WAIT STIMATE 60
AGE CRITERIA:						TO REMAIN ON W	
Head of househol	d must be 18 years or old		_	FOR PARKING:		CALL EVERY	
		_	ARKING INFO: Parking included	NO and guest	PET INFO	; F	PETS OK: NO
	ASSET LIMITS:	p	arking is availab				
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O:		EASE:		Funding:	Section 8 100%	
		1	year		Applicatio Send requences	n: lest with self addres	ssed stamped
INCOME CRITER	IA:						
		F	URNISHED: Partly furnished- appliances only.				
-PERSON MAXIN	NUM MONTHLY INCOME	<u> </u>	288		1		
P-PERSONS MAX	IMUM MONTHLY INCOM	1E: 2	617				

	Last Compl	ete Update:	10/24/2023			AREA:	Kalaeloa
PROJECT NAME:	ONELAU'ENA	- Hope for a	New Be	eginning		PROJECT TYPE:	Emergency/Transi
ADDRESS:	50 Belleau Woods St.			7		PHONE: 808-782	2-4342
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX: 682-542	28
	t: Tanya Tehotu, Execut	ive Director		APPLY AD E 87-132 Farri Waianae, Hl	ngton Hwy		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: No action required unl	ess updating cont	act info				ACCEL TED.
	: 808-782-4342			FAX: 682-5428	EMAIL:	t.tehotu@kwohawa	ii.org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Two	Bdrm:						
Three	Bdrm:						NO
Male (single occupant) dorm; S 3ppl) Couple stud Large family unit (*All are subject to AGE CRITERIA:	30% household total inc	gle dio (1- -4ppl) ome	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMU LIST ES TO REMAIN ON W	(Months): JM WAIT STIMATE /AITLIST
Application is com Applicants must h	d must be 18 at time of a apleted upon eligibility of ave verifiable residential (6-12ppl) \$150/mo	placement. history.	WAITL PARKING INF 1 assigned pa		PET INFO	CALL EVERY	PETS OK: UNKNO
AN OWN RESIDENCE ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:		EASE:		Must be h Waianae	- INFO: jo through Kealahou nomeless - preferenc Coast, but will place amilies with minor c	ce to homeless on e from other areas
INCOME CRITER	IA:	F	URNISHED:		and single Application Pick up fr		Oahu location
1-PERSON MAXIN	MUM MONTHLY INCOME	. :			J		

Page:

123

Last Complete	Update: 10/24/2023			AREA:	Kalaeloa
PROJECT NAME: ONEMALU - Tran	nsitional shelter			PROJECT TYPE:	Transitional
ADDRESS: 48 Belleau Woods St.				PHONE: 808-682	-5868
CITY: Kapolei	STATE: HI ZIP:	96707		FAX : 682-542	8
MANAGER: Tanya Tehotu APPLY TO:		APPLY ADD P.O. Box 753 Kapolei, HI 9	49		OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN: APPLY PHONE: 682-5868		FAX: 682-5428	EMAIL:		
Unit size determined by family size. No Sing Must be family with at least one child 0 to 17 age. *All units rent based on 30% of client income Market rate: \$750/month ALL BEEEDBALS ARE ACCUIDED VIA AGE CRITERIA: Head of household must be 18 years or older of application submission.	rat time WAITLI	etric		MINIMUM WA ESTIMATE (MAXIMU LIST ES TO REMAIN ON W CALL EVERY ((Months):
Application is provided to head of household placement via CES referral. ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO: None	Must provide of check, insurar license. LEASE:	current reg, safety nce, and driver's	verified Residents Communa unit. Expre	INFO: clearance, inc verif must participate in l kitchen, but micro ess bus from Kapol akes app. 30 min F	housing plan. + minifridge in ei transit center to
INCOME CRITERIA: Must provide verification of monthly income the confirms the applicant's ability to afford the magnetism program fee while meeting basic needs of the family. No max income limits. 1-PERSON MAXIMUM MONTHLY INCOME:	onthly Yes Beds all		Handicap A homeles provided if	Units - studio (1) + 2 s verification letter referral accepts pla ONSE SINCE 2022	needs to be acement.

2-PERSONS MAXIMUM MONTHLY INCOME:

4/2/2024

Printed:

	Last Comp	olete Update:	5/8/2023			AREA:	Waianae
PROJECT NAME:	PAI'OLU KAIA	ULU (Waia	nae Civic	Center)		PROJECT TYPE:	Emergency/Transi
ADDRESS:	85-638 Farrington Hw	у				PHONE: 808-664	1-1400 808-696-
CITY:	Waianae	STATE: HI	ZIP:	96792		FAX : 696-67	11
MANAGER	t: Program Manager: C Executive Director: T			APPLY ADI	DRESS:		
APPLY TO	Preceditive Director. To the second of the s	by Service Prov	riders (see Gene	ral			OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	l:						NO
APPLY PHONE	:: 808-688-7631			FAX : 696-6711	EMAIL:	CRobinson2@us.v	ets.org
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm:						
Two	Bdrm:						
Three	Bdrm:						
Four	Bdrm:						
Small (45) - 8 ftx1 Medium (20) - 10f Large (32) - 12ftx1	NT IS 30% OF INCOM 0 ft (80 sq ft) \$120 - 1 p tx12ft (120 sq ft) \$150 12ft (144 sq ft) \$150 - 3 nits. Emergency Shelte	persons - 2 persons persons	UTILITIES INC Electricity, wate Public telephor	er, and sewer.		MINIMUM W ESTIMATE MAXIMU	(Months): JM WAIT STIMATE
0-60+, minors are	accompanied by legal	guardians	WAITLI	ST FOR PARKING:		CALL EVERY	(Months):
				nicles with valid	PET INFO	: F	PETS OK: NO
	ASSET LIMITS:	NONE	safety check, r insurance.	egistiation, &			
	DENTIAL PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF	O:		LEASE:		Service P Wajanae	roviders: Coast Comprehens	ive Health Center
None			None		(p) 696-15	559; 696-1586 Community Outread	
INCOME CRITER	IA:		-		Waikiki H	ealth Center - Care-	A-Van
None			FURNISHED: 1 bed, addition Shelving/drawe provided. No poperated W/D	er may be ower outlets. Coin		ered by US Veterans ke units. Communit ty Meals	

2-PERSONS MAXIMUM MONTHLY INCOME:

-			ete Update:	9/27/2023				AREA:	Kapolei
ROJECT NAME:			RACE PH.	1			PROJECT	ГҮРЕ:	Family
ADDRESS:	92-1074	Palahia St.					PHONE: 8		
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 6	72-564	46
MANAGER:	Angela	Akiona - Comr	munity Director			ADDRESS:	#200 Hon. HI		OUT-OF-STATI
APPLY TO:	Manage	ement Speciali	sts Co.		96814	Dorotama ot.	#200 FIGH. FII		APPLICATION ACCEPTED:
APPLY ATTN:	Affordal	ble Housing De	ept.						YES
APPLY PHONE:	808-949	9-7611 x131			FAX: 946-0572		AIL: mschousing	@hawa	aii.rr.com
Unit 1	ype:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMU Number of Peop	er Numbe	r of	CAREGIVER Allowed:
One B									
Two B	drm:	76	1294	2363	819				YES
Three B	drm:	7	1468	2700	1037				YES
Four B	drm:								
AGE CRITERIA:							M L TO REMAIN	AXIMU IST ES	
Head of household	must be	18 years or ol	der	WAITL	ST FOR PARKI	NG:	CALL E	VERY	(Months): 6
			-	PARKING INF 2 stalls per un		PET IN	NFO: ce animals ok	F	PETS OK: NO
	Δς	SET LIMITS:		z otalio per un		Corvic			
AN OWN RESIDE						GENE	RAL INFO:		
ASSET LIMIT INFO	:			EASE:		Fundi Accer	ng: RHTF ots Section 8		
				1 year			t checks through	Equifa	x
NCOME CRITERIA	۸:								
60% of AMI: 1 person \$54900 2 persons \$62700 3 persons \$70560 4 persons \$78360				FURNISHED: Partly furnishe appliances on					
-PERSON MAXIMU	JM MON	ITHLY INCOM	E: 4	1575		_			

		Last Compl	ete Update:	9/27/2023			ARE	Kapolei
PROJECT NAME:	PALE	HUA TER	RACE PH	. 2			PROJECT TYP	PE: Family
ADDRESS:	92-1074	Palahia St.					PHONE: 808-	672-5602
CITY:	Kapolei		STATE: HI	ZIP:	96707		FAX: 672-	5602
MANAGER	: Angela	Akiona - Comi	munity Director			ADDRESS: . Beretania St	. #200 Hon. HI	OUT-OF-STATE
APPLY TO	: Manag	ement Speciali	sts Co.		96814			APPLICATION ACCEPTED:
APPLY ATTN	l: Afforda	able Housing De	ept.					YES
APPLY PHONE	: 808-94	9-7611 x131			FAX: 946-057		AIL: mschousing@h	awaii.rr.com
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIM Numb of Peo	per Number of	
	tudio:						_	
	Bdrm:		1000	0.05.0		-	_	
	Bdrm:	57	1260	2.25xRent 2.25xRent			_	
Three		7	1400	Z.ZOXITCHT	340			
Four	Bdrm:							
RENT INFO: RE	NT IS 30	% OF INCOME	:: NO	UTILITIES INC	CLUDED:		ТС	OTAL UNITS: 64
7 units at 30% AM	11; 57 unit	ts at 60% AMI		Water				I WAIT LIST TE (Months): 12
								IMUM WAIT ESTIMATE 36
AGE CRITERIA: Head of househole	d must be	e 18 years or ol	der	\A/A ITI	IOT FOR RADICI	NO	TO REMAIN OF	N WAITLIST RY (Months):
				PARKING INF	IST FOR PARKII O:	NG: PET I	NFO:	PETS OK: NO
				Parking include	led	Servi	ce animals ok	·
	AS	SSET LIMITS:	NONE					
AN OWN RESIDE		PROPERTY:	NO				RAL INFO:	A
ASSET LIMIT INF	<u> </u>			LEASE:			munity Room, Picnic	
				1 year		Cred	nits have 2 bathrooms it check through Equi pts Section 8	
INCOME CRITER	IA:			-		Fund	ing: RHTF	
60% of AMI: 1 person \$54900 2 person \$62700 3 person \$70560 4 persons \$78360				FURNISHED: Partly furnishe appliances on				
1-PERSON MAXIM				4575				

Page:

127

	Last Compl	ete Update:	11/24/2021			AREA:	Palolo
PROJECT NAME:	PALOLO CHIN	ESE HOM	E			PROJECT TYPE:	Retirement
ADDRESS:	2459 10th Ave.					PHONE: 808-737	7-2555
CITY:	Honolulu	STATE: HI	ZIP:	96816		FAX : 748-491	6
			,				
MANAGER	: Darlene Nakayama Hansel Purugganan &	Jury Reguilman	-Admissions	APPLY ADI	ORESS:		OUT-OF-STATE
APPLY TO	Coordinators : Call 748-4911 during of for tour of facility.			m)			APPLICATION ACCEPTED:
APPLY ATTN	: Additional phone lines	: 564-5227; 564	-5226				
APPLY PHONE	: 808-748-4911		ı	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							NO
Adult Residential Council Plus Registration For Intermediate Care Overnight Respite Adult Day Care: \$100.000	: \$412 - \$500/day	822/month	UTILITIES INCL	UDED:		MINIMUM W ESTIMATE MAXIMU	-
AGE CRITERIA:						TO REMAIN ON W	
minimums or limits	ail edlers, but has no ag s. Admission is based o and nursing care needs nce required.	n	WAITLIS PARKING INFO	T FOR PARKING:	PET INFO	: F	PETS OK: UNKNO
AN OWN RESID	ASSET LIMITS:				GENERAL	. INFO:	
ASSET LIMIT INF	O:		LEASE:		Res.	- Intermediate/Skille residential care hor Care	
INCOME CRITER	IA:		FURNISHED:				
1-PERSON MAXIM	IUM MONTHLY INCOM	E:					

Printed: 4/2/2024

2-PERSONS MAXIMUM MONTHLY INCOME:

		=					
	Last Comple	ete Update:	12/15/2021			AREA:	Palolo
PROJECT NAME:	PALOLO VALL	EY HOME	S (HPHA-	hon) - NOT A	CCE	ROJECT TYPE:	Family
ADDRESS:	2107 Ahe St.				F	PHONE: 808-733	-9113
CITY	Honolulu	STATE: HI	ZIP:	96816		FAX:	
3.11.	lionolala	OTATE: III		90010			
MANAGER	: Kelsie Tilton			APPLY ADD 1002 North S			OUT-OF-STATE
APPLY TO	: HPHA			Honolulu, HI	I 96817	TIONO	APPLICATION
	NOT ACCEPTING API	PLICATIONS		NOT ACCE	PTING APPLICA	ATIONS	ACCEPTED: NO
APPLY ATTN	: Oahu applications office NOT ACCEPTING API						NO
		PLICATIONS		000 0404	EMAIL: hp	haishereforyou.o	g
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	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
, ,			,		,	,	,
RENT INFO: RE	NT IS 30% OF INCOME	: YES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 118
5 Bedroom Units a	also available) for Federal Low Income	projects	Water and allo	owance for electricity		MINIMUM WA	
***********CLOSED 8		Projecto	and guo			ESTIMATE (Months): 36
CLOSED	6/2/2016					MAXIMU LIST ES	
AGE CRITERIA:					T	O REMAIN ON W	
Head of household	d must be 18 years or old	der	WAITI	IST FOR PARKING:		CALL EVERY (Months):
			PARKING INF		PET INFO:	Р	ETS OK: YES
			Included		With Permit		
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL IN	NFO:	
ASSET LIMIT INFO			LEASE:			CES: Domestic V transitional shelte	
Carinot own a nou	ise on Oanu		1 year		displaced.	tranomonar orione	no, involuntary
					Funding: Fe	d Low Inc Pub Hs	ing 100%
INCOME CRITERI	IA:		,			ns must be 3 yrs a	
ncome Eligibility =	80% of AMI		FURNISHED:		crystal meth	amphetamine or s	sex offender
	Income: 1 person - \$53,2 00; 3 persons - \$68,500;	250;	Partly furnishe appliances on				
4 persons - \$76,10	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		appliances on	iy, no carper			
8 persons - \$100,4							
]							
1-PERSON MAXIM	IUM MONTHLY INCOME	≣ :	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛΕ:	5220				

	Last Comp	lete Update:	5/16/2023			AREA:	Palolo
PROJECT NAME:	PALOLO VALI	EY HOME	ES I			PROJECT TYPE:	Family
ADDRESS:	2170 Ahe St.					PHONE: 808-733	-8650
CITY.	J	STATE: HI	ZIP:	20212		FAX: 735-521	1
CITY:	Honolulu	STATE: HI	ZIP:	96816		-	
	: Wanda Samson - Pro : Mutual Housing Asso Homes, L.P.		ii dba Palolo Valley	APPLY AD 2170 Ahe S Honolulu, F	St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						
APPLY PHONE	: 808-733-8650		F	AX : 735-5211	EMAIL:	wsamson@mutual-	housing.org
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						YES
	Bdrm: 9	668		485	1	4	YES
	Bdrm: 64	849		604	2	6	YES
Three	Bdrm: 9	1068		860	3	8	NO
Palolo Homes doe	NT IS 30% OF INCOME es not have a waitlist; po taken from Section 8 w	otential	Water	DED:		MINIMUM WA ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:			p.			TO REMAIN ON W	12
Head of househole	d must be 18 years or o	lder when	WAITLIST	FOR PARKING:		CALL EVERY	
applying. Applicants must h	ave verifiable residentia	l history.	PARKING INFO:	7 01 (17) 11 (11) 11 (17)	PET INFO	; P	ETS OK: NO
			Every unit given of	only 1 stall	Service A	nimals Only - MD No	ote Required
	ASSET LIMITS:]		
AN OWN RESIDE	DENTIAL PROPERTY: O:	NO			GENERAL Funding:		
Cannot own a hou	se. Assets limited to twee for admission or three		LEASE: 1 year; then mont	th-to-month	Funding: Application	RHTF	ffice
INCOME CRITER	IA:						
2 persons - \$31,34 4 persons - \$39,16 6 persons - \$45,45	Income: 1 person - \$27 50; 3 persons - \$35,280 80; 5 persons - \$42,330 50; 7 persons - \$48,600 20; 9 persons - \$54,852	· · · ·	FURNISHED: Partly furnished appliances only	major			
1-PERSON MAXIN	IUM MONTHLY INCOM	IE:	2287		Į		

Printed: 4/2/2024 Page: 129

2612

	Last Com	plete Update:	5/16/2023			AREA:	Palolo
PROJECT NAME:	PALOLO VAL	LEY HOME	SII			PROJECT TYPE:	Family
ADDRESS:	2170 Ahe St.					PHONE: 808-733	3-8650
						FAX: 735-52°	
CITY:	Honolulu	STATE: HI	ZIP:	96816		,	
MANAGER	: Wanda Samson, P	roperty Mar		APPLY ADI			OUT OF STATE
APPLY TO	: Mutual Housing Ass Homes, L.P.	, , ,	i dba Palolo Valle	2170 Ahe S Honolulu, H			OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	:						
APPLY PHONE	: 808-733-8650			FAX: 735-5211	EMAIL:	wsamson@mutual-	housing.org
Unit	Type: Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
S	tudio: 5Bdrm 8	1511		1345	5	12	
One I	Bdrm: 16	668		478	1	4	YES
Two I	Bdrm: 64	849		647	2	6	YES
Three I	Bdrm: 76	1068		880	3	8	YES
Four I	Bdrm: 60	1286		1100	4	10	NO
Palolo Homes doe pulled from Section	NT IS 30% OF INCOI es not have a waitlist; in 8 waitlist ed units, additional par	names are	UTILITIES INCI	LUDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	P.
applying.	d must be 18 years or ave verifiable resident		PARKING INFO		PET INFO	CALL EVERY	(Months): 12 PETS OK: NO
			Every unit give	n only 1 stall	Service A	nimal ONLY - MD n	ote required
	ASSET LIMITS				J		
AN OWN RESID	DENTIAL PROPERTY O:	: NO			GENERAL Funding:		
Cannot own a hou	se. Assets limited to		LEASE: 1 year; then mo	onth-to-month	Funding:		n Section 8
INCOME CRITER	10.				NO RESE	PONSE 2021	
Maximum Annual	Income: 1 person - \$2		FURNISHED:				
4 persons - \$39,18 6 persons - \$45,48	50; 3 persons - \$35,28 80; 5 persons - \$42,33 50; 7 persons - \$48,60 20; 9 persons - \$54,88	30; 00;	Partly furnished appliances only				
I-PERSON MAXIM	IUM MONTHLY INCC	ME:	2287		Į		

Printed: 4/2/2024 Page: 130

2612

	Last Cor	mplete Update:	12/15/2021			AREA:	McCully
PROJECT NAME:	PAOAKALAN	NI (HPHA-ho	n) - NOT	ACCEPTING	APPLI	PROJECT TYPE:	Elderly
ADDRESS:	1583 Kalakaua Ave.					PHONE: 808-973	3-0193
01774	<u> </u>					FAX: 973-019	97
CITY:	Honolulu	STATE: HI	ZIP:	96826			
MANAGER	: Ioane Ah Sam			APPLY A	DDRESS:		
APPLY TO	: HPHA NOT ACCEPTING	APPLICATIONS		Honolulu,	th School St. HI 96817 CPEPTING APF	PLICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications NOT ACCCEPTING						NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL	: hphaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required	SO ET:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 90	0		315	1	2	YES
One I	Bdrm: 60	0		465	1	4	YES
Two I	Bdrm:						
Three I	Bdrm: 1						
Four I	Bdrm:						
	NT IS 30% OF INCC for Federal Low Inco 8/2/2016*****		Electricity an			MINIMUM W ESTIMATE MAXIMU	(Months): 24
AGE CRITERIA:						TO REMAIN ON W	00
Head of household	d or spouse must be	62 years or	\Λ/ΔΙΤ	LIST FOR PARKING	⊇ ∙	CALL EVERY	
older, or disabled			PARKING IN		PET INFO): F	PETS OK: YES
			Included		Small pet	ts under 25 lbs. only	
	ASSET LIMIT	S: NONE]		
AN OWN RESIDE	DENTIAL PROPERT	Y: NO			GENERA		rata a santati a santati
Cannot own a hou			LEASE:		homeless	ENCES: Domestic \ s in transitional shelt	riolence victims; ers; involuntary
			1 year		displaced		
J						ies, under age 62 sp ding: Fed Low Inc Pເ	
INCOME CRITER			FUDNICUED			ctions must be 3 yrs	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$ 00; 3 persons - \$68,5 00; 5 persons - \$82,2 00; 7 persons - \$94,3	500; 200;	Partly furnish appliances o		crystal m	ethamphetamine or	sex offender
1-PERSON MAXIM	IUM MONTHLY INCO	OME:	4570		•		
2-PERSONS MAXI	MUM MONTHLY INC	COME:	5220				

		Last Comp	lete Update:	10	0/19/2023					AREA:	Chinatown
PROJECT NAME:	PAU	AHI HALE	ı						PROJECT	TYPE:	Family
ADDRESS:	126 Noi	rth Pauahi St.							PHONE:	808-524	4-7233
CITY:	Honolul	u	STATE: HI		ZIP:		96817		FAX:		
MANAGER	R: Bill Ha	nrahan, Manag	er				APPLY AD	DDRESS: olani Blvd., Suit	te 345		OUT-OF-STATI
APPLY TO): Mental	l Health Kokua					·	·			APPLICATION ACCEPTED:
APPLY ATTN	: Melby	Albano									
APPLY PHONE	E: 808-73	37-2523				FAX:		EMAIL:	malbano@	mhkhaw	<i>r</i> aii.org
Unit	Type:	Number of UNITS:	RENT:		Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXII Numb Peo	er of	CAREGIVER Allowed:
S	tudio:	38	760			Ī	120	1	1		YES
One	Bdrm:			Ī							
Two	Bdrm:			Į		[[
Three	Bdrm:										
Four	Bdrm:			ļ]		<u></u>	J		
RENT INFO: RE Minimum rent \$30 15 units must be 6 \$300 minimum re equivalent of one	00. Maxir offered to nt payme	mum rent \$760 those eligible ent. Security de	to pay the		ILITIES INC ectricity and				ES1	MUM W FIMATE MAXIMU	AL UNITS: 38 AIT LIST (Months): 6 JM WAIT STIMATE 12
AGE CRITERIA:									TO REMAI		12
SINGLE ROOM C					WAITI	IST FO	R PARKING				(Months): 6
Must be over the	age of 18	3		PA	RKING INF			PET INFO	:	F	PETS OK: NO
	A	SSET LIMITS:	NONE		ot included. or for \$40/m		ole next				
AN OWN RESI		PROPERTY:	YES					GENERAL			
ASSET LIMIT INF	O:				ASE: /ear			Shared m	en's and wo	men's b	occupancy. pathrooms and
				L				Funding:			
INCOME CRITER Maximum Annual 50% area AMI)		1 person - \$40	,260 (below		RNISHED:			.	om Manage PONSE IN 2		е
 1-PERSON MAXIN	MUM MOI	NTHLY INCOM	IE:	33	55						
2-PERSONS MAX	ІМИМ МО	ONTHLY INCO	ME:								

	Last Comp	lete Update:	6/1/2023			AREA:	Makiki
PROJECT NAME:	PIIKOI VISTA					PROJECT TYPE:	Elderly
ADDRESS:	1326 Piikoi St.					PHONE: 808-58	5-8882
CITY:	Honolulu	STATE: HI	ZIP:	96814		FAX : 521-68	97
MANAGER	t:			APPLY ADI			OUT-OF-STATE
APPLY TO	D: Locations		Honolulu, HI 96823				APPLICATION ACCEPTED:
APPLY ATTN	I: Property Managemen	t Division					YES
APPLY PHONE	E: 808-738-3100			FAX: 735-1978		http://www.locationble-rentals.aspx	isrentals.com/afforda
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm: 47	4225	Ovront	420			
	Bdrm: 47	1225	2xrent	420			
Three							
Four	Bdrm:						YES
Food stamps can	ENT IS 30% OF INCOMI be used to meet min. in the holders need not med uirement.	come.	UTILITIES INC Electric, water			MINIMUM W ESTIMATE MAXIM	(Months): 3
AGE CRITERIA:							STIMATE 36
All residents must			\\/ \ I.T.I.	ST FOR PARKING:		TO REMAIN ON V CALL EVERY	
Does not require v	verifiable residential hist	ory	PARKING INF		PET INFO	:	PETS OK: NO
			\$40 fee for pa	rking			
AN OWN RESI	ASSET LIMITS: DENTIAL PROPERTY:				JENERAL	INFO:	
ASSET LIMIT INF	O:		LEASE:		Opened 2	/07	
eligibility.	ssets is counted to dete	rmine			Funding: I	LIHTC	
INCOME CRITER	IA:				Communi	ry garden, Locked of the room for activities undry room on 8th	s, Social Worker
	on \$45,750; 2 persons \$	52,250	FURNISHED: Partly furnishe appliances on		Ask mana Send requences	n: from website gement to mail it lest with self-addre om Manager's offic	
I-PERSON MAXIM	IUM MONTHLY INCOM	IE:	3812		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCO	ME:	4354				

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 Lun	nalilo St.					PHONE : 808-792	2-8800
CITY:	Honolul	u	STATE: HI	ZIP:	96822		FAX: 538-961	6
MANAGER	ı. Obasia	Andrade: Adm	:-:-44		ADDL V ADD	DECC.		
APPLY TO	Sasha): www.p	Nishimura: Bus	siness Office Ma	nager	APPLY ADD	JKESS:		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN		Barnoski: Sales 92-8800	s Manager		FAX: 538-9616		ashley@plazaassis uilani@plazaassiste	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
s	tudio:	38	5075		277	1	2	
One	Bdrm:	27	6400		415	1	2	
Two	Bdrm:	3	9825		833	1	2	
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE 68 Independent ui \$5125+. 20 Assis private; \$6975+ pi \$5890+ semi-private and the semi-private and t	nits: STU ted living rivate. 20 ate; \$755	JDIO: \$3990+; g units: \$5250+ 0 Memory Care 50+ private. Re	1 BD: - semi - units:	UTILITIES INC Water, trash a standard cable	and sewer, electricity,		MINIMUM WA ESTIMATE MAXIMU	(Months):
No minimum age Does not require			onv	WAITL	IST FOR PARKING:		CALL EVERY	(Months):
Does not require v	remiable	residential filst	Oly	PARKING INF		PET INFO:	P	PETS OK: YES
AN OWN RESI		SSET LIMITS:	NO	Free parking f living units	for independent	GENERAL	INFO:	
ASSET LIMIT INF				LEASE:		3 meals/da	y, weekly house cl	
				Month-to-mon	oth rental with remination notice	provided for activities. F Nurses are	ce, activities. Rout or medical appts, shall Flexible assisted lives staffed 24hr/day. In orm care insurance	nopping, other ing services.
INCOME CRITER	IA:					Nurse inter	rcom system	
None				w/freezer, car	irse call systems,		t for more details	

APPLY TO: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY ATTN: BEMAIL: jgruhler@good-sam.com EMAIL: jgruhler@good-sam.com EMAIL: jgruhler@good-sam.com FAX: 236-7828 EMAIL: jgruhler@good-sam.com EMAIL: jgruhler@good-sam.com Minimum INCOME SQ FT: MINIMUM Number of People: of Pe	
MANAGER: Patricia Camero, Executive Director www.pohainani.org On-Site OUT-CAPPLY TO: John Gruhler, Sales Manager 7835 direct APPLY TO: John Gruhler, Sales Manager 236- APPLY ATTN: APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com EMAIL: jgruhler@good-sam.com FAX: DIFFERENT: John Gruhler South Sout	nt
MANAGER: Patricia Camero, Executive Director www.pohainani.org APPLY TO: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com EMAIL: jgruhler@good-sam.com APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com AWINIMUM MAXIMUM MAXIMUM Number of People of Peo	
MANAGER: Patricia Camero, Executive Director www.pohainani.org APPLY TO: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY PHONE: 808-236-7835 Image: Patricia Camero, Executive Director www.pohainani.org APPLY ATTN: APPLY ATTN: Image: Patricia Camero, Executive Director www.pohainani.org APPLY ATTN: Image: Patricia Camero, Executive Director www.pohainani.org APPLY ADDRESS: On-Site On-Site On-Site Out-CapPl ACC APPL ACC APPL ACC APPL ACC APPL ACC APPL ACC APPLY ATTN: Image: Patricia Camero, Executive Director www.pohainani.org CARECA AII Minimum INCOME Required: SQ FT: Image: Patricia Camero, SQ FT: Image: Patricia Cappe: Patricia Ca	
APPLY TO: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com ANIMUM MAXIMUM Number of People	
APPLY TO: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-samcom EMAIL: jgruhler@good-samcom APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-samcom Minimum INCOME Required: SQ FT: of People: Allow Studio: 139 3185 One Bdrm: 35 4463 490 1 2 Two Bdrm: 10 6924 866 1 2 Three Bdrm: Four Bdrm: Four Bdrm: Four Bdrm: Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Aprtments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PETS OK: Small dog allowed in Cottages only	
APPLY 10: John Gruhler, Sales Manager 7835 direct APPLY ATTN: APPLY PHONE: 808-236-7835 FAX: 236-7828 EMAIL: jgruhler@good-sam.com FAX: 236-7828 EMAIL: jgruhler@good-sam.com Minimum inCOME Required: SQ FT: Minimum Number of People: Allou People: A	F-STATE CATION
APPLY PHONE: 808-236-7835 FAX: 236-7828 Unit Type: Number of UNITS: RENT: Minimum INCOME Required: SQ FT: Minimum Number of People: People: Allow People: Allow People: Allow People: Allow People: Pe	EPTED:
APPLY PHONE: 808-236-7835 FAX: 236-7828 Unit Type:	LO
Number of UNITS: RENT: R	
RENT INFO: RENT IS 30% OF INCOME: NO Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Apartments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older Allow SQL FIRE SQL F	IVER
One Bdrm: 35 4463 490 1 2 Two Bdrm: 10 6924 866 1 2 Three Bdrm:	
Two Bdrm: 10 6924 866 1 2 Three Bdrm:	
Three Bdrm: Four Bdrm: Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Apartments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING INFO: \$25/month TOTAL UNITS: MINIMUM WAIT LIST ESTIMATE (Months): CALL EVERY (Months): PET INFO: PET SOK: Small dog allowed in Cottages only	
RENT INFO: RENT IS 30% OF INCOME: NO Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Apartments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING: PARKING: \$25/month TOTAL UNITS: MINIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: Small dog allowed in Cottages only	
RENT INFO: RENT IS 30% OF INCOME: NO Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Apartments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING: PARKING: \$25/month TOTAL UNITS: MINIMUM WAIT LIST ESTIMATE (Months): TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: Small dog allowed in Cottages only	
Unit size range from 305-866 sft, 1 or 2 ppl. Care Home - \$7,373 Apartments/Cottages have non-refundable reservation fee \$2,300 + refundable security deposit of \$500; waitlist fee \$100 non refundable AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PETS OK: Small dog allowed in Cottages only	
AGE CRITERIA: All residents must be 55 or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PET INFO: Small dog allowed in Cottages only	2
All residents must be 55 or older WAITLIST FOR PARKING: PARKING INFO: PET INFO: PET INFO: PETS OK: Small dog allowed in Cottages only	0
PARKING INFO: PET INFO: PETS OK: \$25/month Small dog allowed in Cottages only	
	YES
ASSET LIMITS: NONE	
AN OWN RESIDENTIAL PROPERTY: YES GENERAL INFO: ASSET LIMIT INFO: Wellness, transportation and activities	
LEASE: Month-to-month Monthly fee includes three meals a day,	u o okty
housekeeping, weekly linen exchange, l	
NO RESPONSE IN 2021	
INCOME CRITERIA: Since private pay facility, must have sufficient FURNISHED:	
Since private pay facility, must have sufficient income and assets to pay monthly fees FURNISHED:	

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	lete Update:	6/1/2023			AREA:	Kakaako
PROJECT NAME:	POH	ULANI EL	DERLY.				PROJECT TYPE:	Elderly
ADDRESS:	626 Cor	al St.					PHONE: 808-744	4-6063
CITY:	Honoluli	 U	STATE: HI	ZIP:	96813		FAX: 744-658	32
	,	-						
MANAGER	R: DeAnn	Auwae, Mana	ger		626 Coral	DDRESS: St. Ste. #101		OUT-OF-STATE
APPLY TO): Hawaii	Affordable Pro	operties Inc.		Honolulu,	HI 90013		APPLICATION ACCEPTED: NO
APPLY ATTN	l:							
APPLY PHONE	: 808-74	4-6063			FAX: 744-6582	EMAIL:	http://hawaiiafforda properties/	ble.com/residential-
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	128	1350	3375	425	1	2	YES
One I	Bdrm:	135	1450	3625	454	1	2	YES
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							YES
RENT INFO: RE	NT 16 20	9/ OF INCOM	E: NO	UTILITIES INC	OLLIDED.		TOTA	LINITO DOO
Deposit=same as	rent; acc	epts section 8		Electricity and			MINIMUM W	AL UNITS: 263
No action required information or in re							ESTIMATE	
								JM WAIT STIMATE 0
AGE CRITERIA:							TO REMAIN ON W	
All household mer application. Careg				WAITL	IST FOR PARKING		CALL EVERY	` '
Does not require				PARKING INF	O: YES n-site parking; \$42	PET INFO	: F	PETS OK: NO
Į	AS	SSET LIMITS:	NONE	month; parkin Kakaako for \$	g at Kauhale 550/mo (call District			
AN OWN RESID	DENTIAL	PROPERTY:	YES	prking - 597-1	789)	GENERAL	. INFO:	
ASSET LIMIT INF		rest in resident	tial property	LEASE:			are allowed in both etter; cannot work o	
in fee simple or le unit within the san	asehold,	usuitable for a		1 year		Emerg. C elevators Services:	all system; Studio h meal site ation to Shopping a	as lanai; 3
INCOME CRITER	IA:					Catholic (Charities Hawaii State Rental Assista	-
Maximum Annual 1 person - \$70,56				FURNISHED:	nd mains	opened 1	992 with lap pool, joggir	
2 persons - \$80,64				Partly furnishe appliances on			tipurpose room	ig paili, galdell
Note: Minimum Ir minimum rent	ncome Re	equired is 2.5 x	the the					
I 1-PERSON MAXIM	NOM MUN	NTHLY INCOM	1E:	5880				
2-PERSONS MAXI	IMUM MC	ONTHLY INCO	ME:	6720				

	Last Comple	ete Update:	12/15/2021				AREA:	Kapalama
PROJECT NAME:	PUAHALA HON	MES I (HPI	HA) - NOT	ACC	EPTING	APP	PROJECT TYPE:	Family
	1638 - 1699 Ahiahi Pl.						PHONE: 808-832	2-3336
							FAX: 832-338	
CITY:	Honolulu	STATE: HI	ZIP:		96817		,	
MANAGER	: Julie Wiggett				APPLY ADD			OUT-OF-STATE
APPLY TO	: NOT ACCEPTING API	PLICATIONS	Honolulu, HI 96817 NOT ACCEPTING APPLICATIONS				PLICATIONS	APPLICATION ACCEPTED: NO
APPLY ATTN	: NOT ACCEPTING API (Oahu applications offi					EMAII.	hahaiaharafan ay a	
APPLY PHONE	: 808-832-5961			FAX:	832-3461	EWAIL:	hphaishereforyou.o	iig
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:							
Three E		0			1116	4	10	YES
14 five bdrm units. Minimum Rent: Or	ne Bdrm - \$108; Two Bdr 2; Four Bdrm - \$180		UTILITIES INC Water and allo and gas				MINIMUM W ESTIMATE MAXIMU	(Months): 36 JM WAIT
AGE CRITERIA:	∩⊂⊏\ 0/2/2∩1&*********	***	r				TO REMAIN ON W	
Head of household	d must be 18 years or old	ler	WAITL	IST FOF	PARKING:		CALL EVERY	, , , , , , ,
			PARKING INF	- O:		PET INFO	; F	PETS OK: NO
Į	ASSET LIMITS:	YES	included					
AN OWN RESID	DENTIAL PROPERTY:	NO				GENERAL	. INFO:	
ASSET LIMIT INFO	O: se on Oahu. Assets limi	tod to two	LEASE:				OUSING PREFERE derly 2.) The Displac	
times the applicab	le income for admission continued occupancy.		1 year			Veterans Families o was deter	w/ service connecte of deceased veteran mined to be service erans 6.) Families r	d disabilities 4.) as whose death connected. 5.)
INCOME CRITERI							al Shelters 7.) All of	
50% AMI: 1 person persons \$42,800;	3,050; 3	FURNISHED: Partly furnishedmajor appliances only, no carpet			Funding: State Pub Hsing 100% All convictions must be 3 yrs old.			
	IUM MONTHLY INCOME		3450]		

	Last Co	mplete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA H	OMES II (H	PHA) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
ADDRESS:	Ahiahi Pl.	•	-			PHONE: 808-832	2-3336
CITY	Honolulu	STATE: HI	710			FAX: 322-0632	
GIII.	Honolulu	STATE. HI	ZIP:	96817			
MANAGER	: Julie Wiggett			APPLY ADI		0.4710110	0117 05 07 17
APPLY TO	: NOT ACCEPTING	APPLICATIONS		1002 North Honolulu, H		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: NOT ACCEPTING (Oahu applications						NO
APPLY PHONE	: 808-832-5961			FAX : 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Type: Number		Minimum		MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	RENT:	Required:	SQ FT:	of People	People:	Allowed:
	tudio:						
	Bdrm: 12	0		676	2	6	YES
Three E	Bdrm: 8	0		940	3	8	YES
Four E	Bdrm:						
Minimum Rent: Or Three Bdrm - \$152 funding source: sta	NT IS 30% OF INCOme Bdrm - \$108; Two 2; Four Bdrm - \$180 ate	o Bdrm - \$128;	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:						TO REMAIN ON W	/AITLIST
Head of household	d must be 18 years o	or older	WAITL	IST FOR PARKING:		CALL EVERY	
			PARKING INF	0:	PET INFO	; F	PETS OK: NO
į.	ASSET LIMIT	S: YES					
	DENTIAL PROPERT				GENERAL	. INFO:	
ASSET LIMIT INFO	O: se on Oahu. Assets	c limited to two	LEASE:		1 -	OUSING PREFERE derly 2.) The Displace	
times the applicab	e in Carld. Assets le income for admis continued occupance	sion or three	1 year		Veterans Families o was deter	w/ service connected of deceased veterand imined to be service erans 6.) Families re	d disabilities 4.) s whose death connected. 5.)
INCOME CRITERI	IA:				Transition Wait	al Shelters 7.) All of	thers - Indefinate
50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550.			FURNISHED: Partly furnishe appliances on		Funding: State Pub Hsing 100% All convictions must be 3 yrs old.		
	IUM MONTHLY INC		3450]		

	Last (Complete Update:	12/15/2021			AREA:	Kapalama	
PROJECT NAME:	PUAHALA	HOMES III (H	HPHA) NOT	ACCEPTING	APP	PROJECT TYPE:	Family	
ADDRESS:	Ahiahi Pl.	-	-			PHONE: 808-832	2-3336	
CITY	Honolulu	STATE: -	II ZIP:	06947		FAX: 832-338	35	
CITT.	Honolulu	STATE.	11 217.	96817				
MANAGER	: Julie Wiggett			APPLY AD		IOATIONO	0117.05.07475	
APPLY TO	: NOT ACCEPTIN	NG APPLICATIONS	3	1002 North Honolulu, F		ICATIONS	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	: NOT ACCEPTING Oahu application	NG APPLICATIONS	5		====		NO	
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL	: hphaishereforyou.o	irg	
Unit	Type: Number of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
St	tudio:							
One E	3drm: 10	0		504	1	4	YES	
Two E	3drm: 14	0		676	2	6	YES	
Three E	3drm: 16	0		940	3	8	YES	
Four B	3drm:				J			
RENT INFO: RE Minimum Rent: Or Three Bdrm - \$152 funding source sta	ne Bdrm - \$108; T 2; Four Bdrm - \$18 ate	wo Bdrm - \$128; 80	UTILITIES IN Water and all and gas	CLUDED: lowance for electricity		MINIMUM W ESTIMATE 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): F	PETS OK: NO	
1	ASSETIIN	MITS: YES	·					
AN OWN RESID	DENTIAL PROPE				GENERA	L INFO:		
ASSET LIMIT INFO	O:		" LEASE:			OUSING PREFERE		
Cannot own a hou times the applicab times that limit for	le income for adm	nission or three	1 year		Veterans Families was dete	derly 2.) The Displac w/ service connecte of deceased veteran rmined to be service terans 6.) Families re	d disabilities 4.) s whose death connected. 5.)	
INCOME CRITERI	IA:					nal Shelters 7.) All ot		
50% AMI: 1 person \$33,300; 2 persons \$38,050; 3 persons \$42,800; 4 person \$47,550.			Partly furnish	FURNISHED: Partly furnishedmajor appliances only		Funding: State Pub Hsing 100% All convictions must be 3 yrs old.		
1-PERSON MAXIM	IUM MONTHLY IN	NCOME:	3450		<u> </u>			

	Last Con	nplete Update:	12/15/2021			AREA:	Kapalama
PROJECT NAME:	PUAHALA H	OMES IV (H	PHA) - NO	T ACCEPTING	G AP	PROJECT TYPE:	
	School St. and Lana	•				PHONE: 808-83	2-3336
OLTY	J	OTATE III	715 -			FAX: 322-06	32
CITY:	Honolulu	STATE: HI	ZIP:	96817		-	
MANAGER	: Julie Wiggett			APPLY ADI	DRESS: PTING APPLI	ICATIONS	OUT-OF-STATE
APPLY TO	: NOT ACCEPTING	APPLICATIONS		1002 North Honolulu, H	School St.		APPLICATION ACCEPTED:
	HPHA			rioriolala, ri	1 900 17		NO
APPLY ATTN	I: NOT ACCEPTING Oahu applications						
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.c	org
				-			
Unit	Type: Number	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER
	of UNITS:	KENI.	Required:	SQF1.	of People	People:	Allowed:
S	tudio:						\
	Bdrm: 4	0		519	1	4	YES
Two I	Bdrm: 32	0		662	2	6	YES
Three I	Bdrm: 4	0		808	3	8	YES
Four I	Bdrm:		<u> </u>				
Minimum Rent: Or Three Bdrm - \$152	NT IS 30% OF INCO ne Bdrm - \$108; Two 2 SED 8/2/2016*******	Bdrm - \$128;	UTILITIES INC Water and allo and gas	CLUDED: wance for electricity		MINIMUM W ESTIMATE MAXIMI	(Months): 36
AGE CRITERIA:			i.				00
	d must be 18 years o	r older	\^/^ T	IST FOR PARKING:		TO REMAIN ON V CALL EVERY	
			PARKING INF		PET INFO): F	PETS OK: NO
]			Included				
	ASSET LIMITS	S: YES]		
	DENTIAL PROPERTY	r: NO			GENERAL		
ASSET LIMIT INF	o: lse on Oahu. Assets	limited to two	LEASE:		1.)The Ele	OUSING PREFERE derly 2.) The Displa	ced 3.) Disabled
	ole income for admiss continued occupancy		1 year		Families of was deter	w/ service connected of deceased veterary mined to be service terans 6.) Families r	ns whose death e connected. 5.)
INCOME CRITER	IA:					nal Shelters 7.) All o	
50% AMI: 1 perso persons \$42,800;	n \$33,300; 2 persons 4 person \$47,550.	\$38,050; 3	Partly furnishe appliances on		Funding:	State Pub Hsing 10 tions must be 3 yrs	
1-PERSON MAXIM	IUM MONTHLY INCO	DME:	3450]		
2-PERSONS MAXI	MUM MONTHLY INC	OME:	4895				

	Last Compl	ete Update:	11/24/2021			AREA	Palama
PROJECT NAME:	PUALANI MAN	OR				PROJECT TYPE	
	1216 Pua Ln.					PHONE: 808-84	1-5657
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX:	
MANAGER APPLY TO	:			APPLY ADI Get applicat	ORESS: tion onsite; brir	ng I.D.	OUT-OF-STATE APPLICATION ACCEPTED: YES
	: 808-841-5657		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 itlist, WRITE IN, every 6		UTILITIES INCLU Water	JDED:		MINIMUM W ESTIMATE MAXIM	
AGE CRITERIA:						TO REMAIN ON V	
Head of household	d must be 18 years or ol	der	WAITLIST PARKING INFO: Parking included	FOR PARKING:	PET INFO:	CALL EVERY	PETS OK: NO
	ASSET LIMITS: DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INF	O:		LEASE: 1 year		Funding:	Section 8 100%.	
INCOME CRITER	IA:		1				
Maximum Annual	Income: 50% AMI. to new HUD guidelines		FURNISHED: Partly furnished-appliances only.	major			
]							

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Comp	olete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUMI	EHANA (I	HPHA-hon) - NOT AC	CEPTING	APPLIC	PROJECT TYPE:	Elderly
ADDRESS:	1212 Kir	nau St.					PHONE: 808-58	6-9724
CITY	Honolulu		STATE: HI	ZIP:	00044		FAX: 973-01	97
OII I.	Honoidic	ı	STATE.	211 .	96814			
MANAGER	: Sol Ser	ntous				ADDRESS: orth School St.		OUT-OF-STATE
APPLY TO	: HPHA				Honolul	lu, HI 96817 CCEPTING APPL	ICATIONS	APPLICATION
	NOT A	CCEPTING A	PPLICATIONS		NOT A	CEPTING APPL	LICATIONS	ACCEPTED: NO
APPLY ATTN			fice PPLICATIONS					140
APPLY PHONE	_		ii i Lio/thono		FAX : 832-346		.: hphaishereforyou.c	org
APPLY PHONE	. 000-03	2-3901			FAX. 002-040	1		
Unit	Type:	Number		Minimum INCOME		MINIMUM Number	MAXIMUM Number of	CAREGIVER
		of UNITS:	RENT:	Required:	SQ FT:	of People		Allowed:
Si	tudio:	98	0		454	1	2	YES
One E	Bdrm:	40	0		553	1	4	YES
Two E	Bdrm:	1	0					
Three E	Bdrm:							
Four E	Bdrm:							
RENT INFO: REI Minimum Rent: \$0 ********CLOSED 8	for Fede	ral Low Incom		UTILITIES INC	CLUDED: owance for utilitie	S	MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:							TO REMAIN ON V	
Head of household	d must be	e 62 years or o	older, or	WAITL	IST FOR PARKII	NG:	CALL EVERY	(Months): 12
disabled				PARKING INF	O:	PET INFO		PETS OK: YES
J				Included		Small pe	ets under 25 lbs. only	
	AS	SSET LIMITS:	NONE]		
AN OWN RESID		PROPERTY:	NO			GENERA	AL INFO: RENCES: Domestic \	/iolongo victims:
Cannot own a hou		ıhu		LEASE: 1 year			s in transitional shelt	
				l year				
							dies, under age 62 sp nding: Fed Low Inc P	
INCOME CRITERI				=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		All convi	ctions must be 3 yrs	ago, unless it's
INCOME CRITERIA: ncome Eligibility = 80% of AMI Maximum Annual Income: 1 person - \$53,250; 2 persons - \$60,900; 3 persons - \$68,500; 4 persons - \$76,100; 5 persons - \$82,200; 6 persons - \$88,300; 7 persons - \$94,350; 8 persons - \$100,450				FURNISHED: Partly furnishe appliances on			nethamphetamine or	
1-PERSON MAXIM				4570				

	Last Comple	ete Update:	12/15/2021			AREA:	Makiki
PROJECT NAME:	PUNCHBOWL I	HOMES (H	HPHA-hon) - NOT ACCE	PTIN	PROJECT TYPE:	Elderly
	730 Captain Cook Ave.			,		PHONE: 808-586	6-9724
						FAX: 586-972	
CITY:	Honolulu	STATE: HI	ZIP:	96813		,	
MANAGER	: Sol Sentous			APPLY ADD			
				1002 North : Honolulu, Hi			OUT-OF-STATE APPLICATION
APPLY TO	: HPHA NOT ACCEPTING API	PLICATIONS		NOT ACCE	PTING APPLIC	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications offic	e					NO
	NOT ACCEPTING API	PLICATIONS			EMAIL:	hphaishereforyou.c	org
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	TO A DE ON (ED.
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
St	tudio:		- toquiloui		0.1.000.0	Тобрю	
	3drm: 97	0		548	1	4	YES
							YES
		0		711	2	6	120
Three E		0					
Four E	Bdrm:				J		
RENT INFO: RE	NT IS 30% OF INCOME:	VES	UTILITIES INC	CLUDED:		TOTA	L UNITS: 156
-) for Federal Low Income			owance for utilities			Į.
************CLOSED 8	8/2/2016*****					MINIMUM W ESTIMATE	
	o, = , = 0 . 0					MAXIMU	JM WAIT
			ļ			LIST ES	STIMATE 60
AGE CRITERIA:	d b - CO .					TO REMAIN ON W CALL EVERY	
older, or disabled	d or spouse must be 62 y	ears or		IST FOR PARKING:			
			PARKING INF	O: NO	PET INFO:	under 25 lbs. only	PETS OK: YES
1	r		Included		Oman pers	under 25 lbs. Only	
ANI OVANI DECIE	ASSET LIMITS:				CENEDAL	INICO:	
ASSET LIMIT INF	DENTIAL PROPERTY: O:	NO	1 - 1 - 1		GENERAL PREFERE	NCES: Domestic \	/iolence victims:
Cannot own a hou	se on Oahu		LEASE:			in transitional shelt	
			l' you		'	s, under age 62 sp	auga may rant
						ing: Fed Low Inc P	
INCOME CRITERI			FURNISHED		All convict	ions must be 3 yrs	ago, unless it's
	Income: 1 person - \$53,2	250;	FURNISHED: Partly furnished	edmaior	crystal me	thamphetamine or	sex offender
4 persons - \$76,10	00; 3 persons - \$68,500; 00; 5 persons - \$82,200;		appliances on		Transporta Catholic C	ation to Shopping a harities Hawaii	vailable through
6 persons - \$88,30 8 persons - \$100,4	00; 7 persons - \$94,350; 450						
1-PERSON MAXIM	IUM MONTHLY INCOME	i:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOM	IF:	5220				

	Last Comp	lete Update:	12/15/2021			AREA:	Aiea
PROJECT NAME:	PUUWAI MOM	I (HPHA-ho	n) - NOT	ACCEPTING	APP	PROJECT TYPE:	Family
	99-132 Kohomua St.					PHONE: 808-483	B-2550
OLTY		OTATE III	- 710 F			FAX: 483-255	52
CITY:	Aiea	STATE: HI	ZIP:	96701			
MANAGER	t: Marcus Asami			APPLY ADD			
APPLY TO	D: HPHA NOT ACCEPTING AI	PPLICATIONS		1002 North S Honolulu, HI NOT ACCEF		CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications off NOT ACCEPTING A				EMAII.	hahaiaharafar iau a	NO
APPLY PHONE	E: 808-832-5961			FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One	Bdrm: 48	0		550	1	4	YES
Two	Bdrm: 86	0		724	2	6	YES
Three	Bdrm: 88	0		1080	3	8	YES
Four	Bdrm: 38	0		1158	4	10	YES
	NT IS 30% OF INCOME of or Federal Low Income 8/2/2016*****		UTILITIES INC			MINIMUM W. ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:						TO REMAIN ON W	AITLIST
Head of househol	d must be 18 years or o	lder	WAITL	IST FOR PARKING:		CALL EVERY	
	ASSET LIMITS:		PARKING INF Included	FO:	the catego	nimals ok, but only opries listed below: under 25 lbs) or cat	
AN OWN RESI	DENTIAL PROPERTY:				GENERAL		
ASSET LIMIT INF	O:		LEASE:			ENCES: Domestic V	
Cannot own a hou	ise on Oahu		1 year		displaced	in transitional shelte	ers, involuntary
						Fed Low Inc Pub Hs	
INCOME CRITER ncome Eligibility =			FURNISHED:			tions must be 3 yrs a ethamphetamine or s	
Maximum Annual 2 persons - \$60,9 4 persons - \$76,1	Income: 1 person - \$53 00; 3 persons - \$68,500 00; 5 persons - \$82,200 00; 7 persons - \$94,350	,250; ; ;	Partly furnishe appliances on	edmajor			
1-PERSON MAXIN	IUM MONTHLY INCOM	IE:	4570		į.		
2-DERSONS MAY		ME	5220				

Last Co	omplete Update:	9/30/2021			AREA:	Downtown
ROJECT NAME: QUEEN EM	MA APARTME	NTS			PROJECT TYPE:	Family
ADDRESS: 1270 Queen Emm	na St.				PHONE: 808-90	0-7149
CITY: Honolulu	STATE: HI	ZIP:	96813		FAX:	
MANAGER:			APPLY AD	DRESS:		OUT-OF-STATI
APPLY TO: Cambridge Mana	agement, Inc.					APPLICATION ACCEPTED:
APPLY ATTN:						
APPLY PHONE : 808-900-7149		ı	FAX:		Vebsite: www.queenemmaa	
Unit Type: Number of UNITS		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					
RENT INFO: RENT IS 30% OF INC LIHTC; Income restrictions apply. Section 8 vouchers accepted.	COME:	UTILITIES INCL	UDED:		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:				٦	O REMAIN ON V CALL EVERY	
	,	WAITLIS' PARKING INFO:	T FOR PARKING:	PET INFO:		PETS OK: NO
ASSET LIMI		Limited, on-site available, howev parking is unkno	parking /er, a waitlist for	Pets not allo		i i jii
AN OWN RESIDENTIAL PROPER	TY:			GENERAL I		
ASSET LIMIT INFO:		LEASE:		ceiling wind	ocial spaces, new lows, 9 ft. ceilings flooring, some uni	
NCOME CRITERIA:						
		FURNISHED:				
-PERSON MAXIMUM MONTHLY INC	COME:	0				

		Last Compl	ete Update:	8/7/2023			AREA	: Chinatown
PROJECT NAME:	RHF	PAUAHI K	UPUNA H	IALE			PROJECT TYPE	: Elderly
ADDRESS:	167 Nort	th Pauahi St.					PHONE: 808-52	24-5844
CITY:	Honolulu	ı	STATE: HI	ZIP:	96817		FAX : 949-25	554
MANAGER	t: Sue Sta	acey				ADDRESS: Studebaker Rd.		OUT-OF-STATE
APPLY TO	: Retiren	nent Housing F	oundation		Long Be (562) 25	ach, CA. 90815- 7-5100	-4900	APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-52	4-5844			FAX:	EMAIL	: www.rhf.org	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	tudio:	12	0		539	1	1	YES
One I	Bdrm:	36	0		579	1	2	YES
Two I	Bdrm:							
Three I	Bdrm:							
Four I	Bdrm:							YES
RENT INFO: RE 2023 Update: No a contact informatio	action rec			Water, sewer a			MINIMUM V ESTIMATE MAXIM	UM WAIT
AGE CRITERIA:				R.				STIMATE 120
Head of household			der, or	\^/^ T	ST FOR PARKIN	IC:	TO REMAIN ON V	
disabled (mobility	impaired))		PARKING INF		PET INFO	O:	PETS OK: YES
]				Parking not av	/ailable			
		SSET LIMITS:						
AN OWN RESIDE		PROPERTY:	NO			GENERA		MD letter; can work
				1 year		outside h	nome. If elderly tenase may rent the unit.	ant dies, under age
						Services	: meal site next doo	or
INCOME CRITER	IA:					Funding:	Section 202	
Maximum Annual persons - \$39,700		1 person - \$34,	750; 2	FURNISHED: Partly furnishe appliances on		Project v waitlist.	vill call applicant to l	seep application on
				арриалосо сл	y. Gaipoid		nagement to mail it quest with self-addre	essed stamped
1-PERSON MAXIM	MUM MON	THLY INCOME	≣:	2895				
2-PERSONS MAXI	ІМИМ МС	NTHLY INCOM	ΛE:	3308				

	Last Comple	ete Update:	8/7/2023					McCully
DDO IECT NAME.		' !	A D TMEN	TO			AREA: PROJECT TYPE:	
	RHF PHILIP ST	REET AP	AKIMEN	15]
ADDRESS:	1605 Philip St.						PHONE: 808-949	
CITY:	Honolulu	STATE: HI	ZIP:		96826		FAX : 949-255	04
MANAGER	: Sue Stacey, Manager	- Suite 200			APPLY ADI	DRESS:		
APPLY TO	: Retirement Housing Fo	oundation			911 N. Stud Long Beach (562) 257-5	n, CA. 90815-49	900	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	: 808-949-2555			FAX:	949-2554	EMAIL:	www.rhf.org	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio: 10	0	NO		550	1	1	YES
One I	Bdrm: 24	0	NO	- F	575	1	2	YES
Two I	Bdrm:			- F				
Three I	Bdrm:							
Four I	Bdrm:							NO
2023 Update: No a	NT IS 30% OF INCOME action required unless up n or in response to comn	odating	UTILITIES IN Electricity and		:		MINIMUM WA ESTIMATE MAXIMU	(Months): 96
AGE CRITERIA:							TO REMAIN ON W	120
	e household must be age		WAITI	LIST FOF	PARKING:		CALL EVERY	
household may be	ust be 18+. Other member 18+.	ers or the	PARKING IN	FO:	YES	PET INFO:	Р	ETS OK: YES
			Available			One small	pet only	
	ASSET LIMITS:							
AN OWN RESIDE	DENTIAL PROPERTY: O·	NO				GENERAL	INFO: are allowed with M	ID letter: oon work
AGGET EIMIT IN	<u>. </u>		LEASE:	month to	month	outside ho	me. If elderly tenar may rent unit.	
						Opened 19	993	
INCOME CRITER	IA:					Funding: S	ection 202 100%	
Maximum Annual Income: 1 person - \$33,550; 2 persons - \$38,350.			FURNISHED: Partly furnishedmajor appliances only.			Send requienvelope	n: gement to mail it est with self-addres m manager's office	
	IUM MONTHLY INCOME		3404			,		

	Last Compl	ete Update:	5/4/2023			AREA:	Chinatown	
PROJECT NAME:	RIVER PAUAH	l (Not takin	g applicati	ions)		PROJECT TYPE:	Family	
ADDRESS:	1155 River St.					PHONE: 808-892	2-1812	
CITY:	Honolulu	STATE: HI	ZIP:	96817		FAX: None		
	t: Luis; Ste. 111	United Horizon R	ealty, LLC	APPLY ADI	DRESS: ly taking applic	ations	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	I: Certified Occupancy S	specialist (Lv me	ssage)				YES	
	: 808-892-1812	`		FAX: 892-1801	EMAIL:			
Si One I Two I Three I	Number of UNITS: tudio: Bdrm: 41 Bdrm: 7 Bdrm: Bdrm:	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 W. ESTIMATE MAXIMU	_	
AGE CRITERIA:	d	don				TO REMAIN ON W		
Head of nousenoid	d must be 18 years or ol		WAITLIST PARKING INFO: No parking.	FOR PARKING:	PET INFO		PETS OK: NO	
AN OWN RESIE ASSET LIMIT INF	ASSET LIMITS: DENTIAL PROPERTY: O:	NO	LEASE: 1 year		.	INFO: Section 8 100% p units 2 - 1 bdrm &	1 - 2 bdrms	
2 persons - \$38,00	IA: Income: 1 person - \$33, 00; 3 persons - \$42,750; 00; 5 persons - \$51,300.		FURNISHED: Partly furnished- appliances only.					
	IUM MONTHLY INCOM		2771 3167]			

	Last Comp	lete Update:	6/29/2023				
						AREA:	Makiki
	ROYAL KINAU	APARTME	ENTS			PROJECT TYPE:	Elderly
ADDRESS:	728 Kinau St.					PHONE: 808-521	
CITY:	Honolulu	STATE: HI	ZIP:	96813		FAX : 521-293	31
l	,						
MANAGER	: Natasha James, Com	munity Manager		APPLY A	ADDRESS:		
		, -		728 Kina	au Street, Honolulu	ı, HI 96813	OUT-OF-STATE
APPLY TO	: Royal Kinau Apartmei	nts					APPLICATION ACCEPTED:
APPLY ATTN	:						YES
	-				EMAIL:	ovalkinaumanager	@royalkinauapts.co
APPLY PHONE	: 808-521-3678			FAX: 521-2931		n	
	T		Minimum		MINIMUM	MAXIMUM	
Unit	Type: Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
	tudio:		rtequireu.		or r copie	т еоріе.	
		1000	4.5	544			YES
		1032	1.5 x rent		1	2	YES
	3drm: 24	1468	1.5 x rent	741	1	4	TES
Three I	3drm:						
Four I	3drm:						NO
RENT INFO: RE	NT IS 30% OF INCOME	. NO	UTILITIES IN	CLUDED:		TOTA	L UNITS: 83
No action is requir	ed unless updating con	act	Electric, wate			MINIMUM W	
information. Long	er wait for two-bedrooor	n units.				ESTIMATE	-
Section 8 certifica	te holders need not mee	et the min					JM WAIT
aross income real		or the min	Į.			LIST ES	STIMATE 24
AGE CRITERIA: All residents must	ho 62 or older				•	TO REMAIN ON W CALL EVERY	
All residents must	be 62 of older			IST FOR PARKIN			
			PARKING INF	FO: YES ded, 57 spaces	PET INFO:		PETS OK: NO
r	ASSET LIMITS:	NONE	some covere				
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO.	
ASSET LIMIT INF			LEASE:		opened 19	98	
				month-to-month	units have Funding: L	lanais IHTC, Section 8	
					Funding: I		
J			<u> </u>		8 handicap	ped access	
INCOME CRITER	IA: n \$45,250; 2 persons \$5	52 250· 3	FURNISHED:		Application		
	4 persons \$60,250	<i>52,230</i> , 3	Partly furnish		envelope	est with self addres	
			appliances or	nly	Pick up fro Email requ	m manager's office est	•
						manager@ruoyalki	nauapts.com
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	3771				
a DEDOONO MAY		ME.	4054				

	Last C	Complete Update:	11/24/2021			AREA:	Downtown		
PROJECT NAME:	SAFE HAV	EN/MENTAL	HEALTH K	OKUA		PROJECT TYPE:	Emergency/Transi		
ADDRESS:	126 N. Pauahi St					PHONE: 808-524	1-7233		
CITY:	Honolulu	STATE: -	ZIP:	96817		FAX: 524-035	53		
	,								
MANAGER	: Bill Hanrahan			APPLY AD			011 05 07475		
APPLY TO	: Mental Health K Intake Monday -	okua Friday from 1pm -	4pm	126 N Pau Honolulu, I			OUT-OF-STATE APPLICATION ACCEPTED:		
APPLY ATTN	l:						NO		
APPLY PHONE	:: 808-524-7233			FAX : 524-0353	EMAIL	:			
Unit	Type: Numbe of UNIT		Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:		
S	tudio: 25			80	1	1			
One I	Bdrm:								
Two	Bdrm:								
Three	Bdrm:								
Includes 3 meals	ed bath and commi per day. ly ill. (bi-polar, Sch	unal dining.	UTILITIES INC	CLUDED:		MINIMUM W ESTIMATE MAXIMU			
AGE CRITERIA:						TO REMAIN ON W			
Head of household	d must be 18 year	s or older	WAITLI PARKING INF	IST FOR PARKING: O:	PET INFO	CALL EVERY D: F	PETS OK: NO		
			No parking						
AN OWN RESI	ASSET LIM DENTIAL PROPER				GENERA	L INFO:			
ASSET LIMIT INF			LEASE:			s must be homeless and severely			
			Month-to-month Funding AUW, provide			ally III. ling: HUD Continuum of Care for services, /, C & C Esg; State HPHA; other services ded: residential, Case Mgmt & Community t Services.			
INCOME CRITER			Activit reh			Center (waiting list) - o, med/psych svcs, cl	provides social nemical		
Max income limits	- None		FURNISHED: Bed, dresser	Bed, dresser Bed, dresser depe integrati servi Intake N			pendency treatment, community		

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	12/15/2021				Calt Lake
DDO JECT NAME.		· ,		CERTING AR	IDC	AREA: PROJECT TYPE:	Salt Lake
	SALT LAKE (H	IPHA-non)	- NOT AC	CEPTING AP	PS		Family
ADDRESS:	2907 Ala Ilima St.					PHONE: 808-483	
CITY:	Honolulu	STATE: HI	ZIP:	96818		FAX : 483-255	52
	,						
MANAGER	: Marcus Asami			APPLY AD	DRESS:		
				1002 North Honolulu, F			OUT-OF-STATE APPLICATION
APPLY TO): HPHA NOT ACCEPTING AF	PPLICATIONS			EPTING APPLIC	CATIONS	ACCEPTED:
APPLY ATTN	l: Oahu applications offi						NO
	NOT ACCEPTING AF				EMAIL:	nphaishereforyou.o	ra
APPLY PHONE	:: 808-832-5961			FAX : 832-3461			.9
Unit	Type: Number	$\overline{}$	Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
s	tudio:		, .,				
	Bdrm: 28	0		642	1	4	YES
		0		642		4	
	Bdrm:						
Three I	Bdrm:						
Four I	Bdrm:					J	
	NT IS 30% OF INCOME of for Federal Low Income 8/2/2016******		UTILITIES INC	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	(Months): 36 JM WAIT
AGE CRITERIA:			•				00
	d must be 18 years or o	lder				TO REMAIN ON W CALL EVERY	
			PARKING INF	IST FOR PARKING: O:	PET INFO:	F	PETS OK: YES
<u> </u>			Included		multiple an	imals ok, but only o	
	ASSET LIMITS:	NONE				ries listed below: nder 25 lbs) or cat	
AN OWN RESID	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			NCES: Domestic V	
Cannot own a hou	ise on Oahu		1 year		displaced.	in transitional shelte	ers; involuntary
					Fundina: F	ed Low Inc Pub Hs	sing 100%
J						ons must be 3 yrs	
INCOME CRITER ncome Eligibility =			FURNISHED:			thamphetamine or	
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	edmajor ly some carpets			
1-PERSON MAXIM	IUM MONTHLY INCOM	E:	4570		-		
2-PERSONS MAXI	MUM MONTHLY INCO	ME:	5220				

		Last Compl	ete Update:	3/17/20	020			AREA:	Waianae
PROJECT NAME:	SEA '	WINDS A	PARTMEN	NTS, H	& J W	einberg		PROJECT TYPE:	Emergency/Transi
ADDRESS:	85-295 H	Kauiokalani Pl.				-		PHONE: 808-696	6-0061
CITY	M/-:		STATE: HI	ZIF		00700		FAX:	
CITT.	Waiana	9	STATE. HI	ZIF	·	96792			
MANAGER	: Jesse	Smith, General	Manager			APPLY ADI			
APPLY TO		o and drop off a hurs./Sat./Sun.				Apartments,	nager, Sea Wir 85-295 Kauiol nae, Hawaii 96	kalani Pl.	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l: Jesse S	Smith							NO
APPLY PHONE	: 808-69	6-0061			F/	AX:	EMAIL: j	esse@hsiservices.	net
Unit	Type:	Number of UNITS:	RENT:	Minim	ME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER Allowed:
St	tudio:	20	975	Requi		500	of People	People:	
One E	Bdrm:								
Two E	Bdrm:	30**	1295	200	00	770	4	7	
Three E	Bdrm:								
Four B	Bdrm:			<u> </u>		J			NO
RENT INFO: RE	NT IS 30	% OF INCOME	:: NO	UTILITIE	S INCLU	DED:	_	TOTA	L UNITS: 50
20 Transtional stu- stay. Rents range			maximum	Water, se	ewer, tras	sh		MINIMUM W ESTIMATE	
**30 permanent 2 have sliding scale			s on site						JM WAIT STIMATE 30
AGE CRITERIA:								TO REMAIN ON W	
18 and older						FOR PARKING:			
				\$25 mon		NO	PET INFO:	F cal household pets	PETS OK: YES
,	AS	SSET LIMITS:		Ψ20 111011				ee pet agreement fo	
AN OWN RESID	DENTIAL						GENERAL	INFO:	
ASSET LIMIT INFO		Income Limit		LEASE:			A program Preference	of Housing Solution is given if applicant	ns, opened 2011.
HUD Urban Honolulu Low Income Limit				1 year			2 units (including handicappe	ess shelter. cludes 1 studio) are ed; 2 units (include r hearing disabled.	s 1 studio)
INCOME CRITERI	IA:						I .	•	
\$2000 minimum gross monthly income (not including food stamps) for 2 bdrm. \$1600 minimum gross monthly income for studio				FURNISHED:				i: m manager's office est to Jesse@hsis	
1-PERSON MAXIM				3665]		

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	11/24/2021			AREA:		
PROJECT NAME: S	ECTION 8 (C	ITY) - CLO	SED			PROJECT TYPE:	N/A	
ADDRESS: 84	12 Bethel St., First Fl	oor				PHONE: 808-768-7096 FAX: 768-7039		
CITY: H	onolulu	STATE: HI	ZIP:	96813				
MANAGER:				APPLY AD	DRESS:		OUT-OF-STATI	
APPLY TO:							APPLICATION ACCEPTED:	
APPLY ATTN:					EMAII :	: www.honolulu.gov/a	dce/housing htm	
APPLY PHONE: 7	768-7096		ı	FAX: 768-7039	EWAIL.	. www.nonoidid.gov/c	acs/nousing.num	
Unit Ty	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
Stud								
One Bd								
Three Bd	rm:							
Four Bd	rm:							
Provides Section 8 V rentals); participant for adjusted income of WAITLIST CLOSED pre-applicants were recovered.	ouchers (for private amily must minimally r \$50, whichever is g 6/18/21, after 2000	landlord pay 30% greater.	UTILITIES INCL	UDED:		MINIMUM WA ESTIMATE (MAXIMU	(Months):	
AGE CRITERIA:			WAITLIS	T FOR PARKING:		TO REMAIN ON W CALL EVERY		
			PARKING INFO		PET INFO): P	ETS OK: UNKNO	
AN OWN RESIDEI	ASSET LIMITS:				GENERAI	L INFO:		
ASSET LIMIT INFO:			LEASE:					
INCOME CRITERIA:			FURNISHED:					

Last Complete Update:	11/24/2021	AREA: Hawaii
PROJECT NAME: SECTION 8 (STATE) - C	LOSED	PROJECT TYPE: N/A
ADDRESS: 1002 N. School St. P.O. Box 17907		PHONE: 808-832-6040
CITY: Honolulu STATE: HI	ZIP: 96817	FAX: 832-3461
MANAGER:	APPLY ADDR	RESS:
APPLY TO:		APPLICATION ACCEPTED:
APPLY ATTN:		
APPLY PHONE : 832-6040	FAX: 832-3461	EMAIL: hphas8office@hawaii.gov
Unit Type: Number of UNITS: RENT:	Minimum INCOME Required: SQ FT:	MINIMUM Number of People MAXIMUM Number of People: CAREGIVER Allowed:
Studio: 1386		
One Bdrm: 1511		
Two Bdrm: 1991		
Three Bdrm: 2934		
Four Bdrm: 3367		
RENT INFO: RENT IS 30% OF INCOME: YES	UTILITIES INCLUDED:	TOTAL UNITS:
Provides Section 8 Vouchers (for private landlord rentals); tenant pays 30% of income (up to a max of 40% at entry.) LONG wailists Applicants must respond to communication by S8 to remain on waitlist	Utility allowace on per case basis	MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT
	Į.	LIST ESTIMATE
AGE CRITERIA: 18 and older	WAITH OT FOR RADIUNO	TO REMAIN ON WAITLIST CALL EVERY (Months): 12
*Max allowable rent for 5bdrm: \$3872; 6bdrm: \$4453	WAITLIST FOR PARKING: PARKING INFO:	PET INFO: PETS OK:
ASSET LIMITS:		
AN OWN RESIDENTIAL PROPERTY:		GENERAL INFO:
ASSET LIMIT INFO:	LEASE: 1 year initially	Online voucher choice application last opened 8/16/16 and closed 8/18/16 with preference for homeless, displaced or victim of domestic violence. Elderly and disabled persons or households paying more than 50% of their
INCOME CRITERIA:		ncome toward rent are also targeted for the program. Rents listed are the maximum
Maximum income is based on 30%AMI and vary by county. Maximum for Honolulu county is listed below.	FURNISHED:	amount allowed for that apartment size.
I-PERSON MAXIMUM MONTHLY INCOME:	2116]

	Last Complete Update	7/6/2023		AREA:	lwilei	
ROJECT NAME:	SENIOR RESIDENCE	AT IWILEI		PROJECT TYPE:	Elderly	
ADDRESS:	888 Iwilei Rd.			PHONE: 808-888	8-0876	
CITY:	Honolulu STATE:	HI ZIP:	96817	FAX : 521-1192		
	2: Indigo Real Estate 2: Senior Residence at Iwilei		APPLY ADDRESS: Manager's Office 888 Iwilei Road, Hon	olulu, Hi 96817	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	I: Manager's Office				ACCEPTED.	
	:: 808-888-0876	FAX:	ЕМ	AIL:		
	Type: Number of UNITS: RENT:	Minimum INCOME Required:	SQ FT: MINIM Numb of Peo	per Number of	CAREGIVER Allowed:	
Two I	Bdrm: 146 1317 Bdrm: 13 1550	2x rent 2x rent				
Three I	Bdrm:					
	NT IS 30% OF INCOME: NO	UTILITIES INCLUDED Water and sewer	D:	MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): 2 JM WAIT STIMATE 6	
AGE CRITERIA: 62+				TO REMAIN ON W CALL EVERY		
		WAITLIST FOI PARKING INFO:	R PARKING: NO PET I	NFO: F	PETS OK: NO	
	ASSET LIMITS: NONE	87 stalls				
AN OWN RESID	DENTIAL PROPERTY: NO O:	LEASE:	Appli Ask r	cation: management to mail it		
		One-year		up from manager's office up onsite office	đ	
INCOME CRITER		T =				
	1 person; \$52,400 2 ppl; 1 person; \$62,880 2 ppl;	FURNISHED: Partly furnishedmajor appliances only	pr			
-PERSON MAXIN	IUM MONTHLY INCOME:	3820				

		Last Comp	olete Update:	6/6/2023			AREA:	Kaneohe	
PROJECT NAME:	SENI	OR RESI	DENCE AT	KANEOH	E		PROJECT TYPE:	Elderly	
ADDRESS:	45-705	Kamehameha	Hwy.				PHONE: 808-235-2898		
CITY:	Kaneoh	ie	STATE: HI	ZIP: 96744			FAX : 235-0897		
MANAGER	R: Joshu	a Monton, Res	ident Manager		APPLY AD Mail to proj			OUT-OF-STATE	
APPLY TO): Bob Ta	anaka, Inc.						APPLICATION ACCEPTED:	
APPLY ATTN	l :							YES	
APPLY PHONE	E: 808-23	35-2898			FAX: 235-0897	EMAIL:			
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio:							VEC	
	Bdrm:	74	1025	2x rent	428			YES	
	Bdrm:				-				
Three									
Four	Bdrm:			<u> </u>	J		J	NO	
RENT INFO: RE *44 (HUD) Rents *30 (LIHTC) units Deposit same as Section 8 certifica gross income requ	are 30% are \$102 rent. Mu ite holdei	of income; wa 25; waitlist 1-3 ist be below 60 rs need not me	itlist 1-3 yrs yrs. % AMI	Water & Sewe			MINIMUM W ESTIMATE MAXIMU	(Months): 12 JM WAIT	
AGE CRITERIA:				je.			TO REMAIN ON W	STIMATE 36	
All residents must	t be 62 o	r older		\\/ \ I.T.I. I	ST FOR PARKING:		CALL EVERY		
				PARKING INF		PET INFO	: F	PETS OK:	
<u> </u>	A	SSET LIMITS:	NONE	parking stalls	DO NOT include 48 First	LIHTC - N HUD - PE			
AN OWN RESI		PROPERTY:	YES	Come First Se	erved	GENERAL	. INFO:		
ASSET LIMIT INF	O:			LEASE:		Opened 2			
				6 months		floor near Units have onsite soo	cial worker		
INCOME CRITERIA: 50% AMI: 1 person \$45,750; 2 persons \$52,250; 3 persons \$58,800 60% AMI: 1 person - \$54,900 2 persons - \$62,700; 3 persons - \$70,560			FURNISHED: Fur Partly furnishedmajor Tra			LIHTC (30 units), Si RHTF, Section 202 ation to Shopping a Charities Hawai'I	? (44 units), Home		
I 1-PERSON MAXIN	иим мо	NTHLY INCOM	ΛE:	4575		1			
2-PERSONS MAX	IMUM M	ONTHLY INCC	DME:	5040					

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	5/11/2023			AREA:	Kapolei
PROJECT NAME:	SENIOR RESID	DENCE AT	KAPOLEI	1 & 2	- 1	PROJECT TYPE:	Elderly
ADDRESS:	91-1034 Namahoe St.					PHONE: 808-67	4-2937
CITY	Kapolei	STATE: HI	ZIP:	96707		FAX: 674-29	38
OIII.	Кароје	OTATE: HI		96707			
MANAGER	: Cat Suan, Resident M	lanager		APPLY ADI	ORESS: Place Ste 103 He	onolulu, HI	OUT-OF-STATE
APPLY TO	: Bob Tanaka Inc.			96826		,	APPLICATION ACCEPTED:
APPLY ATTN	l: Ext 24						YES
APPLY PHONE	: 808-949-4111			FAX: 949-7211	EMAIL:		
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:						
One I	Bdrm: 79	0		463-500	1	3	
	Bdrm:						
Three I	Bdrm:		<u> </u>				NO
60 unit @ 30% AM Namahoe St. 20 g 91-1098 Namahoe Gross maximum r income (if qualifie	NT IS 30% OF INCOME MGI at Kapolei 1 - 91-10 units @ 50% AMGI at K e St. ent: \$725/778 month or d) Monthly amount is S	24 apolei 2 - 30% of		: \$88/ utility allowanc : \$87/utility allowance		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:					Т	O REMAIN ON V	
All residents 62+.	Caregiver allowed with	MD letter.	PARKING INF	11.14	PET INFO:	CALL EVERY	(Months): 12 PETS OK: YES
J	ASSET LIMITS:	NONE	Parking includ	ea			
AN OWN RESIDE	DENTIAL PROPERTY:	NO			GENERAL I		
Must not wholly ov	wn a majority interest in	residential	LEASE: One-year		Opened 6/2 HUD PRAC		
real estate.			0.10 / 0.01		property, or	s include: screen on bus route, laund is to the recreation	ry room, ceiling
INCOME CRITER	IA:					; about a 10 minu	
	rson \$25,400; 2 persons rson \$45,750; 2 persons		FURNISHED:		Any crimina	Il conviction = ine	ligible
 -PERSON MAXIN	IUM MONTHLY INCOM	E:	3812]		

Printed: 4/2/2024 Page: 157

4354

	Last Comp	lete Update:	5/10/2023			AREA:	Wahiawa
PROJECT NAME:	SILVERCREST	Г				PROJECT TYPE:	Elderly
ADDRESS:	520 Pine St.					PHONE: 808-622	2-2785
CITY:	 Wahiawa	STATE: HI	ZIP:	96786		FAX : 621-778	1
	,						
MANAGER	: Lisa Esteron - Propert	ty Manager		APPLY ADI			
APPLY TO	:			On-Site #11	6		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY ATTN	l:						150
APPLY PHONE	808-622-2785			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
RENT INFO: RE	NT IS 30% OF INCOME	E: YES	UTILITIES INC	LUDED:		TOTA	L UNITS: 78
30% of Adjusted In After application is sent.	ncome s received, a confirmatio	on letter is	Water, Sewer, utility allowance	Trash Removal, \$63 e.		MINIMUM W.	AIT LIST
	ERS MUST STATE THE ATION	IR NAME				_	IM WAIT STIMATE 36
AGE CRITERIA:						TO REMAIN ON W	
(companion) 18+,	d must be 62+. Spouse minor children allowed i	if HOH has		ST FOR PARKING:	5= - =	CALL EVERY	
legal custody. Adover 18 allowed.	ult children not allowed.	Caregiver	PARKING INFO		PET INFO); P	PETS OK: YES
-	ASSET LIMITS:	NONE	Limited guest parea.	parking in outside	1 animal		
AN OWN RESID	DENTIAL PROPERTY:				GENERA	L INFO:	
ASSET LIMIT INF	O:		LEASE:			riction in the last 7 ye oplicant or caregiver)	
			1 year		and sex of denial - re	offenses will result in egardless of time. accept any evictions/s	automatic
INCOME CRITER	IA:		r		Opened ²	1995; Funding: Section	on 202 PRAC
Maximum Annual	Income: changes per H	UD	FURNISHED: Refrigerator, stove, carpet, blinds Applic Send I			community room, Lar Facilities on: Ask managemen uest with self addres manager's office.	t to mail it

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comp	lete Update:	5/17/2023			AREA:	Chinatown
ROJECT NAME: SMI	TH BERET	ANIA				PROJECT TYPE:	Family
ADDRESS: 1170 N	luuanu Ave.					PHONE: 808-52	1-6486
CITY: Honolu	ılu	STATE: HI	ZIP:	96817		FAX : 531-660	05
MANAGER: Ko No	orasing-Yun			APPLY AD On-Site Ste			OUT-OF-STA
APPLY TO: Indigo	Real Estate Se	ervices, Inc.					APPLICATIO ACCEPTED
APPLY ATTN:	***WAITLIST	CLOSED SINCE	2018***				
APPLY PHONE: 808-5	21-6486			FAX: 531-6605	EMAIL:		
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One Bdrm:	82	0	NO	548	1	2	YES
Two Bdrm:	82	0	NO	719	2	4	YES
Four Bdrm:							NO
No action required unless imely response to comm			Water				(Months): 2
AGE CRITERIA:			Į.			LIST ES	AITUST
Head of household must I	oe 18 years or o	lder.	WAITLI	ST FOR PARKING:		CALL EVERY	
			PARKING INFO		PET INFO	: F	PETS OK: NO
F	ASSET LIMITS:	NONE					
AN OWN RESIDENTIA	L PROPERTY:	YES			GENERAL		
ASSET LIMIT INFO:			LEASE:		. Two week	ew applicants only is after announcemouted uted and accepted	ent, applications
			1, 1001		A lottery is	s performed to sele	
NCOME CRITERIA:					the waitlis		
Maximum Annual Income 2 persons - \$41,850; 3 pe 3 persons - \$52,300; 5 pe	rsons - \$47,100	•	FURNISHED: Partly furnishe appliances onl		Funding: \$	Section 8 100%	
5 persons - \$60,700; 7 pe 3 persons - \$69,050			Tappiiaiiloes Oili	y, σαιροίου -			
-PERSON MAXIMUM MC	ONTHLY INCOM	IE:	3517]		
PERSONS MAXIMUM M		ME.	4017				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	12/15/2021			AREA:	Makiki	
PROJECT NAME:	SPENCER HOL	JSE (HPHA	<mark>-hon) - N</mark>	IOT ACCEPTI	NG A	PROJECT TYPE:	Family	
ADDRESS:	1035 Spencer St.					PHONE: 808-586	6-9724	
CITY:	Honolulu	STATE: HI	ZIP:	96822		FAX : 586-972	28	
MANAGER	: Sol Sentous			APPLY ADI			OUT-OF-STATE	
APPLY TO	D: HPHA NOT ACCEPTING AP	PLICATIONS		1002 North Honolulu, H NOT ACCE	I 96817			
APPLY ATTN	I: Oahu applications office NOT ACCEPTING AP						NO	
APPLY PHONE	:: 808-832-5961	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:	
S	tudio:							
	Bdrm:						V50	
Three I	Bdrm: 1 16	0		798	3	8	YES	
	Bdrm:							
	NT IS 30% OF INCOME of for Federal Low Income 8/2/2016******		UTILITIES ING Water and ga electricity	CLUDED: s + allowance for		MINIMUM W ESTIMATE MAXIMU		
AGE CRITERIA:						TO REMAIN ON W	la.	
Head of household	d must be 18 years or old	der	WAITL	IST FOR PARKING:		CALL EVERY		
			PARKING INF	O: NO	PET INFO	: F nimals ok, but only o	PETS OK: YES	
r	ASSET LIMITS:	NONE			the catego	ories listed below: under 25 lbs) or cat		
	DENTIAL PROPERTY:				GENERAL	. INFO:		
ASSET LIMIT INF	-		LEASE: 1 year		homeless displaced		ers; involuntary	
						Fed Low Inc Pub Hs		
2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$53, 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250;	FURNISHED: Partly furnish appliances or	edmajor		tions must be 3 yrs ethamphetamine or		
1-PERSON MAXIN	IUM MONTHLY INCOME	≣:	4570		J.			

Printed: 4/2/2024 Page: 160

5220

APPLY TO: The Courtyards at Miliani Mauka APPLY ATTN: EMAIL: http://www.locationsrentals.com/a ble-rentals.aspx Minimum MINIMUM MAXIMUM			Last Comp	olete Update:	6/7/2023			AREA	: Mililani
MANAGER: Tiffany Gates, Resident Manager APPLY ATDRESS: ATTN: Management Office, 95-1015 APPLY ATTN: APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-628-9455 FAX: 626-9456 Walter Walter Water AGE CRITERIA: Head of household must be 18 years or older ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMITS: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE AND WAITLIST FOR PARKING: PARKING INFO: ASSET LIMIT'S: NONE I tigal included; Max 2 stalls, but old yuaranteed to have 2 and stall, guest parking available guest parking available TO REMAIN ON WAITLIST CALL EVERY (Months): PET INFO: PETS OK: NO ILHTC Accepts Section 8 & Rent Supplement Application: LEASE: I year INCOME CRITERIA: DOWN RESIDENTIAL PROPERTY: NO ASSET LIMIT'S: NONE INCOME CRITERIA: DOWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: PETS OK: NO ILHTC Accepts Section 8 & Rent Supplement Application: Applic	PROJECT NAME:	THE	COURTY	ARDS AT I	MILILANI I	MAUKA		PROJECT TYPE	Family
MANAGER: Tiffany Gates, Resident Manager APPLY ADDRESS: ATTN: Management Office, 95-1015 Koolani Dr., Mililani, Hi 96789 APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-626-9455 FAX: 626-9456 EMAIL: http://www.locationsrentals.com/able-renials.aspx	ADDRESS:	95-1015	Koolani Dr.					PHONE: 808-62	26-9455
APPLY TO: The Courtyards at Miliani Mauka APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-626-9455 FAX: 626-9456 EMAIL: http://www.locationsrentals.com/a ble-rentals.aspx EMAIL: http://www.locationsrentals.com/a ble-re	CITY:	Mililani		STATE: HI	ZIP:	96789		FAX : 626-94	56
APPLY ATTN: APPLY ATTN: APPLY PHONE: 808-626-9455 FAX: 626-9456 FAX: 626-9456 FAX: 626-9456 APPLY PHONE: 808-626-9455 FAX: 626-9456 AMAINIMUM MAXIMUM MAXIMUM Number of People: People: Allowed: Allowed: People: Allowed: People: Allowed: Al	MANAGER	R: Tiffany	Gates, Reside	ent Manager				e, 95-1015	OUT-OF-STATE
APPLY PHONE: 808-626-9455 FAX: 626-9456 EMAIL: http://www.locationsrentals.com/a ble-rentals.aspx Unit Type:	APPLY TO): The Co	ourtyards at Mi	iliani Mauka					APPLICATION ACCEPTED:
APPLY PHONE: 808-626-9455 FAX: 626-9456 ble-rentals.aspx Income	APPLY ATTN	l:							YES
Unit Type: of UNITS: RENT: NCOME Required: SQ FT: Number of People Allowed: Studio: St	APPLY PHONE	: 808-62	26-9455			FAX: 626-9456			nsrentals.com/afforda
One Bdrm: 12 979 Two Bdrm: 24 1147 Three Bdrm: 12 1319 Four Bdrm: 12 1319 Four Bdrm: 12 1319 INCOME CRITERIA: INCOME C				RENT:	INCOME	SQ FT:	Number	Number of	CAREGIVER Allowed:
Two Bdrm: 24 1147 2.25xRent 841 2.25xRent 1068 YES RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: TOTAL UNITS: 48 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST FOR PARKING: PARKING INFO: NO 1 stall included; Max 2 stalls, but not guaranteed to have 2nd stall, guest parking available generated for			12	070	2 25vPont	636			
Three Bdrm: 12 1319 2.25xRent 1068 Four Bdrm: YES RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: TOTAL UNITS: 48 MINIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE (Months): MAXIMUM WAIT LIST ESTIMATE FEARLING INFO: NO 1 stall included; Max 2 stalls, but not guaranteed to have 2nd stall, guest parking available AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a majority interest in residental properties. INCOME CRITERIA: INCOME CRITERIA: FURNISHED: Partly furnishedmajor									
RENT INFO: RENT IS 30% OF INCOME: NO UTILITIES INCLUDED: Water Water MINIMUM WAIT LIST ESTIMATE (Months): LIST ESTIMATE (Months): LIST ESTIMATE WAITLIST FOR PARKING: PARKING INFO: NO 1 stall included; Max 2 stalls, but not guaranteed to have 2nd stall, guest parking available AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a majority interest in residental properties. INCOME CRITERIA: 1 year FURNISHED: Partly furnishedmajor									
Water MINIMUM WAIT LIST			12	1319	<u> </u>				YES
WAITLIST FOR PARKING: PARKING INFO: NO 1 stall included; Max 2 stalls, but not guaranteed to have 2nd stall, guest parking available AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a majority interest in residental properties. INCOME CRITERIA: 60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 WAITLIST FOR PARKING: PARKING INFO: NO PET INFO: PET INFO		d must b	2.40 years at a	aldor.	Water			ESTIMATE MAXIM LIST E TO REMAIN ON V	UM WAIT STIMATE 36
ASSET LIMITS: NONE AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a majority interest in residental properties. INCOME CRITERIA: 60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 1 stall included; Max 2 stalls, but not guaranteed to have 2nd stall, guest parking available GENERAL INFO: LEASE: 1 year Accepts Section 8 & Rent Supplement Application: Download from website Pick up from manager's office	Head of househol	a must b	e 18 years or c	older			DET INFO		
AN OWN RESIDENTIAL PROPERTY: NO ASSET LIMIT INFO: Cannot own a majority interest in residental properties. LEASE: 1 year INCOME CRITERIA: 60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 GENERAL INFO: LEASE: 1 year Accepts Section 8 & Rent Supplement Application: Download from website Pick up from manager's office]	AS	SSET LIMITS:	NONE	1 stall include not guarantee	ed; Max 2 stalls, but ed to have 2nd stall,	PET INFO.		FETS OK. NO
Cannot own a majority interest in residental properties. 1 year Accepts Section 8 & Rent Supplement Application: Download from website Pick up from manager's office FURNISHED: Partly furnishedmajor	AN OWN RESI						GENERAL	INFO:	
INCOME CRITERIA: 60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 Accepts Section 8 & Rent Supplement Application: Download from website Pick up from manager's office Partly furnishedmajor			rest in residen	tal	LEASE:		LIHTC		
INCOME CRITERIA: 60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 Download from website Pick up from manager's office FURNISHED: Partly furnishedmajor		jointy into	root iir rooldon		1 year		'		upplement
60% of AMI: 1 person \$55,020; 2 persons \$62,880; 3 persons \$70,740; 4 persons \$78,600 Furnishedmajor	INCOME CRITER	IA:					Download	from website	e
	60% of AMI: 1 per	rson \$55,		s \$62,880; 3	Partly furnish	edmajor			
1-PERSON MAXIMUM MONTHLY INCOME: 4585	1-PERSON MAXIN	10M MUN	NTHLY INCOM	ΛE:	4585]		

	Last Comple	ete Update:	3/3/2020			AREA	: Kalihi
PROJECT NAME: THE	TOWERS	AT KUHIO	PARK			PROJECT TYPE	Family
ADDRESS: 1475 L	inapuni St.					PHONE: 808-88	88-2816
CITY: Honole	ulu	STATE: HI	ZIP:	96819		FAX: 888-06	331
MANAGER: Andre	ew Kopecky, Mar ne Colding, Manaç			APPLY AD on-site	DRESS:		OUT-OF-STAT
APPLY TO: The N	Michaels Organiza	ation					APPLICATION ACCEPTED:
APPLY ATTN:							YES
APPLY PHONE: 808-8	388-2816			FAX: 888-0631	EMAIL:	towers@tmo.com	
Unit Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
Studio:							
One Bdrm:		1356	3280	579			
Two Bdrm:		1627	3937	792			
Three Bdrm:		1880	4268	944			
Four Bdrm:							
RENT INFO: RENT IS 3	30% OF INCOME:	NO	UTILITIES INC	CLUDED:		TOTA	AL UNITS: 555
Rent listed is for Tax Cre The Towers at Kuhio Par			Water, electric	ity and gas		MINIMUM V	
Subsidized units - apply v						ESTIMATE	(Months): 0
Authority							UM WAIT STIMATE 6
AGE CRITERIA:						TO REMAIN ON V	μ ο
Head of household must	be 18 years or old	ler	WAITLI	ST FOR PARKING:		CALL EVERY	' (Months):
			PARKING INF		PET INFO:		PETS OK: NO
,	ASSET LIMITS:			ed. Each unit has stalls. Parking is			
AN OWN RESIDENTIA	L PROPERTY:	UNKNOW			GENERAL	INFO:	
ASSET LIMIT INFO: If asset generates income	e then it is counte	ed toward	LEASE:		Newly ren		
income	s, anomic ocume	a towara	One-year			rvices program for unty Section 8 okay units	
INCOME CRITERIA:			-		24-hour m	aintenance and se	ecurity
2x rent			FURNISHED:		NO RESP	ONSE IN 2021	
I-PERSON MAXIMUM MO			4220				

		Last Compl	ete Update:	12/16/2021			AREA	Downtown
ROJECT NAME:	THOI	MAS BUIL	DING				PROJECT TYPE	Family
ADDRESS:	Unknow	/n					PHONE:	
CITY:	Honolul	u	STATE: HI	ZIP:	0		FAX:	
MANAGER:	:				APPLY AD	DRESS:		OUT-OF-STAT
APPLY TO:	: Housin	ng Solutions, Inc	.					APPLICATIO ACCEPTED
APPLY ATTN:	: BUILD	ING IS NOT OF	PEN OR IN OF	PERATION				
APPLY PHONE:	:			F	AX:		Website: https://w Email: Unknown	ww.hsiservices.net/
Unit ¹	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
St	udio:		0					
One B	Bdrm:		0					
Two B	3drm:		0					
Three B			0					
Four B	Bdrm:		0					
ENT INFO: REN	11 10 30	78 OF INCOME		UTILITIES INCLU	DED.		MINIMUM W ESTIMATE MAXIM	(Months): UM WAIT STIMATE VAITLIST
					FOR PARKING:	-		
				PARKING INFO:		PET INFO		PETS OK:
	AS	SSET LIMITS:						
AN OWN RESID		PROPERTY:				GENERAL	INFO:	
SSET LIMIT INFO	D:			LEASE:		, Honolulu.	ry, century-old stru Residential floors throoms, opening 2	of 25 units with
ICOME CRITERIA	Δ-							
OOME ONTEN	Δ.			FURNISHED:				
PERSON MAXIMI	10M MU	NTHLY INCOM	E:	0				
PERSONS MAXIN	мим ма	ONTHLY INCOM	ME:	0				

		Last Compl	lete Update:	5/18/2023			AREA:	Manoa	
PROJECT NAME:	VANO	COUVER	HOUSE				PROJECT TYPE:	Permanent	
ADDRESS:	2019 Va	ancouver Dr.					PHONE: 808-947	7-7181	
CITY:	Honoluli	u	STATE: HI	ZIP:	96822		FAX : 944-397	76	
MANAGER APPLY TO): Housin	ng Solutions, Ind	.		APPLY ADD Referred by homeless sh	outreach a	gency or	OUT-OF-STATE APPLICATION ACCEPTED: NO	
APPLY PHONE					FAX : 944-3976	EMAI	L: chris@hsiservices.	net	
Unit	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUN Number of People	Number of	CAREGIVER Allowed:	
	tudio: Bdrm:	25	1100		460	2	4		
	Bdrm:	8	1400		580	5	7		
Three I	Bdrm:							NO	
RENT INFO: RE \$1100 for 1-bdrm			E: NO	UTILITIES INC Electricity, wate disposal	LUDED: er, sewer, and refuse	2	MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): 6 JM WAIT STIMATE 12	
Adult 18+ with at or at least 6 month			ind under)	WAITLI PARKING INFO	ST FOR PARKING: D: YES	PET INF	TO REMAIN ON W CALL EVERY FO: F		
AN OWN RESIE ASSET LIMIT INF	DENTIAL	SSET LIMITS: PROPERTY:	NO	Limited parking month, approx no guest parking	g at \$50 per 6-12 mon waitlist; ng on site. Street idents and guest est come first	Homele Homele under 1	AL INFO: ess or at risk ess families with at lea 8 years. f Household must be v	st one minor child	
NCOME CRITERIA: Less than 50% AMI				FURNISHED:		Homles emerge Transiti	Homless = currently unsheltered or in an emergency shelter or at risk of being home! Transitional Housing for Employed Homele: Families		

2-PERSONS MAXIMUM MONTHLY INCOME:

1-PERSON MAXIMUM MONTHLY INCOME:

	Last Con	nplete Update:	11/24/2021			4054	Ewa Beach
DDO IECT NAME:	VILLAGES O	E MON'E KU	рцаев	= 1		AREA: PROJECT TYPE:	
	,	F MOAE NO	- РПАЭБ	<u> </u>			1
ADDRESS.	91-1655 Pahika St.					PHONE: 808-681	
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		FAX: 681-300	04
		,	·				
MANAGER	: Gary Iwasaki, Mgr;		sing Agent; Be	-			
APPLY TO	Mercado, Admin As EAH - Villages of M			91-1655 P Ewa Beacl	ahika St. h HI 96706		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						YES
					EMAIL:	www.eahhousing.or	rg
APPLY PHONE	: 808-681-3000			FAX : 681-3004			
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: 6	1279	2.5x rent	674	1	3	
Two I	Bdrm: 32	1524	2.5x rent	797	2	5	
Three I	Bdrm: 25	1750	2.5x rent	1119	3	7	
Four I	Bdrm:						
DENT INFO: DE	NT IS 30% OF INCO	ME: NO		CLUDED.		TOTA	L LINITO, O4
	TSP/VLI Income Limit		UTILITIES IN Water/sewer/			MINIMUM W.	L UNITS: 64
to Change AMI % - 30/50/60						ESTIMATE	-
							IM WAIT STIMATE
AGE CRITERIA: 18+ Multi-Family F	Property					TO REMAIN ON W	
			WAITL PARKING INF	LIST FOR PARKING	: PET INFO	F	ETS OK: NO
]			Assigned on	an "As needed"	Notify mar	nagement if have a	
	ASSET LIMITS	S: YES	insurance, sa		Assistance	e animal	
	DENTIAL PROPERTY	/: <u> </u>	registration re	equired	GENERAL	INFO:	
ASSET LIMIT INF			LEASE:			king property - smole on the property, inc	
a spende on input			1 year		Playgroun	d/Totlot, Communit	y Meeting Room,
						toom, Picnic Area,	
INCOME CRITER	IA:					RHTF, LIHTC, CDE	G NSP HOME
Maximum monthly annually	income limits subjec	t to change	FURNISHED:		HMMF	IXIIII , LIIII O, ODL	o, Noi , Howle,
,			blinds	stove, rangehood,	NO RESP	ONSE IN 2021	
]		
			4220				

		Last Compl	ete Update:	11/24/2021			AREA:	Ewa Beach
PROJECT NAME:	VILL/	AGES OF	MOA'E KU	- PHASE	<u> II</u>		PROJECT TYPE:	Family
ADDRESS:	91-1655	Pahika St.					PHONE: 808-68	1-3000
CITY:	Ewa Bea	ach	STATE: HI	ZIP:	96706		FAX: 681-300)4
	Mercad	vasaki, Mgr; Ja lo, Admin Asst. Villages of Moa		sing Agent; Bet	ty APPLY AD 91-1655 Pa Ewa Beach	ahika St.		OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	ı.							YES
APPLY PHONE		1-3000			FAX: 681-3004	EMAIL:	www.eahhousing.o	rg
	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One I	Bdrm:	9 37	1222	2.5xrent		1 2	3 5	
Three I	Bdrm:	29	1671	2.5xrent		3	7	YES
Max rent is around AMI % - 30/50/55 Based on 2020 MT 2021 Update: Wai	d 55% of i TSP/VLI i tlist is pui	income. ncome limits rged annually a	and	UTILITIES INC Water/sewer/t			MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA:							TO REMAIN ON W	
				PARKING INF Assigned on a basis. Currer	an "As needed" at drivers license,	PET INFO		PETS OK: NO
AN OWN RESID	DENTIAL	PROPERTY:		insurance, sat registration re		GENERAL		. Masting Dans
Depends on inpute		е		LEASE: 1 year		Laundry R	nd/Totlot, Communit Room, Picnic Area, (d internet ng on Property	y Meeting Room, Computer with
INCOME CRITER Maximum monthly annually		limits subject to	o change	FURNISHED: Refrigerator, s blinds	stove, rangehood,	Funding:	RHTF, LIHTC, CDE	BG, HOME, HMMF
1-PERSON MAXIM 2-PERSONS MAXI				4042 4620]		

	Last Comp	olete Update:	3/5/2020				Ewa Beach
DDO IECT NAME.	VILLAGES OF		DILACE	• 111		AREA: PROJECT TYPE:	
		MOA'E KU	- PHASE	: 111			J,
ADDRESS:	91-1655 Pahika St.					PHONE: 808-681	-3000
CITY:	Ewa Beach	STATE: HI	ZIP:	96706		FAX:	
	,		,				
MANAGER	: Gary Iwasaki, Mgr; J		ing Agent; Be	etty APPLY AD	DRESS:		
	Mercado, Admin Ass	istant		91-1655 Pa Ewa Beach			OUT-OF-STATE APPLICATION
APPLY TO	: EAH - Villages of Mo	a'e Ku		Lwa Deach	, 111 90700		ACCEPTED:
APPLY ATTN	l:						YES
					EMAIL:	www.eahhousing.or	g
APPLY PHONE	± 808-681-3000			FAX: 681-3004		_	
Linia	Typol		Minimum		MINIMUM	MAXIMUM	
	Type: Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	CAREGIVER Allowed:
S	tudio:	0	i noquiloui		0.1.00p.0	. сор.с.	
	Bdrm: 4	1279	2.5x rent	674	1	3	
	20	1524	2.5x rent	797	3	7	
Three E		1750	2.5x Territ	1119	3	,	
Four B	Bdrm:	0				J	YES
RENT INFO: RE	NT IS 30% OF INCOM	E: NO I	JTILITIES INC	CLUDED:		TOTA	L UNITS: 52
Based on 2019 M	TSP/VLI Income Limits		Water/Sewer/			MINIMUM W	Į.
change AMI % - 30/50/60						ESTIMATE	_
						MAXIMU	
J		Į.					TIMATE 0
AGE CRITERIA: 18+ Multi-Family F	Property					TO REMAIN ON W CALL EVERY	
101 Walii 1 amiiy 1	Торотту	,	WAITL PARKING INF	IST FOR PARKING:	PET INFO:		ETS OK: NO
				an "As needed"		nagement if have a	
	ASSET LIMITS:			t drivers license,	Assistance		
AN OWN RESID	DENTIAL PROPERTY:		registered rec		general	INFO:	
ASSET LIMIT INFO			EASE:		Non-Smol	king property - smok	
Depends on inpute	ed income	i	LAGE.		anywhere	on the property, inc	luding inside apts
						d/Tot lot, Communition, Picnic Area, C	
J					high spee		
INCOME CRITERI	IA: v income limits subject	to change	FURNISHED:		Funding:R	HTF, LIHTC, CDBC	G, HOME, HMMF
annually				stove, rangehood,	Application		
			blinds		Download	from website	
					NO RESP	ONSE IN 2021	
1-PERSON MAXIM	IUM MONTHLY INCOM	ΛE:	4220				
o DEDOONO MAY		NAT.	4000				

		Last Comp	lete Update:	6/1/2023				AREA:	Kapolei
PROJECT NAME:	VILL	AS AT A'E	LOA					PROJECT TYPE:	Family
ADDRESS:	91-1118	3 Namahoe St.	(Mailing addres	s: 91-1130 Nam	nahoe St.)			PHONE : 808-67	4-4245
CITY:	Kapolei		STATE: HI	ZIP:	96	707		FAX : 674-42	46
	J. tapoloi		<u> </u>						
MANAGER	: Amano	da Mercado			91-	PLY ADD 1130 Nar oolei, HI 9	nahoe St.		OUT-OF-STATE APPLICATION
APPLY TO	: Location	ons LLC			r (a)	,0101, 111	,0101		ACCEPTED:
APPLY ATTN	I: Afforda	able Housing D	ept.						
APPLY PHONE	: 808-67	74-4245			FAX : 674	4246		locationsrentals.co rentals.aspx	m/affordable-
	Туре:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ	-T:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:								
	Bdrm:	19	1100	2.25x rent		7			
	Bdrm:	32	1200	2.25x rent					
Three I	Bdrm:	20	1500	2.25x rent	100	88			
Four	Bdrm:								YES
RENT INFO: RE Section 8 applicat income requireme Must be below 500 Minimum Income 1 bdrm: \$2182.500	ions are ent. % & 60% Requirer -\$2322.5	exempt from the AMI ments:		UTILITIES IN				MINIMUM W ESTIMATE MAXIM	
AGE CRITERIA:	<u></u>	n n						TO REMAIN ON V	
Head of household	d must b	e 18 years or o	lder	\A/A ITI	10T FOD DA	DIVINO		CALL EVERY	
				PARKING INF	.IST FOR PA FO:	IO	PET INFO	:	PETS OK: NO
				1 assigned pa	arking stall in	cluded			,
	A	SSET LIMITS:	NONE						
AN OWN RESID		PROPERTY:	NO				GENERAL		
ASSET LIMIT INF	O:			LEASE:			LIHTC Fu	nding	
				1 year; then r	nonth to mor	th	Accepts S	Section 8	
								or 60%AMI r 50% AMI	
INCOME CRITER 50% AMI: 1 perso persons \$58,800, 60% AMI: 1 perso persons \$70,560, \$84,660, 6 person	n \$45,75 4 persor n \$54,90 4 perso	ns \$65,300, 10, 2 persons \$ ns \$78,360, 5 p	62,700, 3	FURNISHED: Partly furnish appliances or	edmajor		AMI Applicatio Donwnloa Pick up fro	•	elow based on 60%
1-PERSON MAXIN	IUM MOI	NTHLY INCOM	IE:	4220			1	-	
2-PERSONS MAXI	MUM MO	ONTHLY INCO	ME:	4820					

	Last Comp	olete Update:	6/7/2023			AREA	Kapolei
PROJECT NAME:	VILLAS AT MA	ALU'OHAI				PROJECT TYPE	Family
ADDRESS:	91-1025 Kaiau Ave.					PHONE: 808-88	38-2377
CITY:	Kapolei	STATE: HI	ZIP:	96707		FAX:	
MANAGER	₹:			APPLY AD I 91-1025 Ka			OUT-OF-STATE
APPLY TO	: Villas at Malu'Ohai			Kapolei, HI	96707		APPLICATION ACCEPTED:
APPLY ATTN	1: Resident Manager						YES
APPLY PHONE	E: 808-943-9314			FAX: 946-0572		https://www.locationalicalicalicalicalicalicalicalicalicalic	onsrentals.com/afford
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
	Bdrm: 55	1112	2.25xrent	713			
Three	Bdrm: 16	1329	2.25xrent	940			
Four	Bdrm:						NO
Minimum income voucher. Credit et tenants. Tenants	ENT IS 30% OF INCOM requirements waived w valuation will be done for must have good landlor meet minimum criminal	ith Sec 8 or all d	water, sewer	CODED:		MINIMUM V ESTIMATE MAXIM	(Months): 12
AGE CRITERIA:			Į.			LIST E	NAITUST
Head of Househo	ld 18+		WAITL	IST FOR PARKING:		CALL EVERY	
			PARKING INF	O: NO	PET INFO:		PETS OK: NO
	ASSET LIMITS:	NONE	2 designated unit	parking stalls per			
AN OWN RESI	DENTIAL PROPERTY:				GENERAL	INFO:	
ASSET LIMIT INF	O: own a majority interest i	n residential	LEASE:			oom, air condition schools and recre	
properties			1 year		Application Pick up ou	n: itside of building n	ear entry door.
INCOME CRITER							
3 persons \$58,80 60% AMI: 1 perso 3 persons: \$70,56 5 persons: \$84,66	on \$45,750; 2 persons \$ 0; 4 persons \$65,300 on: \$54,900; 2 persons: 60; 4 persons: \$78,360 60; 6 persons: \$90,900 00; 8 persons: \$103,440	\$62,700	FURNISHED: Partly furnishe appliances on				
" 1-PERSON MAXIN	MUM MONTHLY INCOM	ΛΕ:	4575		ı		
2-PERSONS MAX	IMUM MONTHLY INCC	ME:	5225				

		Last Comp	lete Update:	7/16/2020			AREA:	Liliha
ROJECT NAME:	WAE	NA APAR	TMENTS				PROJECT TYPE:	Family
ADDRESS:	1320 A	ala St.					PHONE: 808-55	0-0440
CITY:	Honolu	lu	STATE: HI	ZIP:	96817		FAX : 525-68	11
MANAGER	: Shery	l Oschin, on-site	e manager		APPLY AD			OUT-OF-STAT
APPLY TO):				Honolulu, H			APPLICATION ACCEPTED:
APPLY ATTN	l:							
APPLY PHONE	:: 808-5	50-0440			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	ange on	a daily basis d	lue to	UTILITIES INC	ELUDED:		MINIMUM W ESTIMATE MAXIMI	(Months): 0
AGE CRITERIA:				Įt.				STIMATE 0
Head of Househol	ld 18+			\A/A T			TO REMAIN ON V CALL EVERY	
				PARKING INF		PET INFO	: '	PETS OK: NO
	А	SSET LIMITS:						
AN OWN RESID	DENTIAL	L PROPERTY:				GENERAL	. INFO:	
ASSET LIMIT INF	O:			LEASE:		NO RESE	PONSE IN 2023	
				6 or 12 month	lease			
NCOME CRITER	IA:							
Max income limits		AMI		FURNISHED:				
-PERSON MAXIN	1UM MO	NTHLY INCOM	1E:	7828		<u> </u>		
-PERSONS MAXI	MUM M	ONTHLY INCO	ME:	8948				

	Last Com	plete Update:	12/15/2021			AREA:	Wahiawa
PROJECT NAME:	WAHIAWA TE	RRACE (H	PHA-cen)	- NOT ACCEP	PTIN	PROJECT TYPE:	Family
	337 Palm St.					PHONE: 808-622	2-6360
						FAX: 622-636	
CITY:	Wahiawa	STATE: HI	ZIP:	96786		,	
MANAGER	: Jimary Quinones			APPLY ADD			
				1002 North : Honolulu, Hi			OUT-OF-STATE APPLICATION
APPLY TO	NOT ACCEPTING A	APPLICATIONS		NOT ACCE	PTING APPLI	CATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications of						NO
	NOT ACCEPTING A	APPLICATIONS			EMAIL:	hphaishereforyou.c	org
APPLY PHONE	: 808-832-5961			FAX: 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	Number of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
Si	tudio:						
One F	3drm: 12	0	,	547	1	4	YES
							YES
		0		936	3	8	YES
Three E		0					
Four B	Bdrm: 8	0		1200	4	10	YES
	NT IS 30% OF INCOM for Federal Low Incor 8/2/2016******		UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W ESTIMATE MAXIMU	(Months): 36
			į.				STIMATE 60
AGE CRITERIA:	d must be 18 years or	older				TO REMAIN ON W	
	aas. 20 .0 ,0a.0 0.	o.ac.	WAITL PARKING INF	IST FOR PARKING:	PET INFO	. г	PETS OK: YES
]	ASSET LIMITS	NONE		<u>. </u>	multiple ar	nimals ok, but only ories listed below: under 25 lbs) or caf	one from each of
	DENTIAL PROPERTY:	NO			GENERAL	. INFO:	
ASSET LIMIT INFO			LEASE:			ENCES: Domestic \ in transitional shelt	
Carmot own a noa	iso on oand		1 year		displaced.		
					Funding: f	Fed Low Inc Pub H	sing 100%
INCOME CRITERI	IA:		'			tions must be 3 yrs	
ncome Eligibility =		0.050	FURNISHED:		crystal me	ethamphetamine or	sex offender
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$5 20; 3 persons - \$68,50 20; 5 persons - \$82,20 20; 7 persons - \$94,35 450	0; 0;	Partly furnishe appliances on				
1-PERSON MAXIM	IUM MONTHLY INCOI	ME:	4570				
2-PERSONS MAXI	MUM MONTHLY INCO	OME:	5220				

	Last Comple	te Update:	12/15/2021			AREA:	Waianae
PROJECT NAME:	WAIMAHA/SUN	FLOWER	(HPHA-le	e) - CLOSED	F	PROJECT TYPE:	Family
	85-186 McArthur St.		•			PHONE: 808-697	7-7171
						FAX: 697-717	74
CITY:	Waianae	STATE: HI	ZIP:	96792		•	
MANAGER	: Mandy Miyamoto			APPLY ADD			0117 05 07475
APPLY TO	. UDUA			1002 North S Honolulu, HI	96817		OUT-OF-STATE APPLICATION
APPLITO	. HEHA			NOT ACCEF	PTING APPLICA	ATIONS	ACCEPTED:
APPLY ATTN	: Oahu applications office	Э					NO
					EMAIL: hp	ohaishereforyou.o	rg
APPLY PHONE	: 808-832-5961			FAX : 832-3461			
Unit	Type: Number		Minimum		MINIMUM	MAXIMUM	CAREGIVER
	of UNITS:	RENT:	INCOME Required:	SQ FT:	Number of People	Number of People:	Allowed:
S	tudio:						
One I	3drm: 52	0		513	1	4	YES
Two I	Bdrm : 46	0	<u> </u>	650	2	6	YES
Three I		0		991	3	8	YES
Four							
Four t	Suriii.		1			1	
RENT INFO: RE	NT IS 30% OF INCOME:	YES	JTILITIES INC	CLUDED:		TOTA	L UNITS: 130
Minimum Rent: \$5	0 for Federal Low Income	projects	Water and allo	wance for electricity		MINIMUM W	
Security Deposit is	s equal to rent amount					ESTIMATE	(Months): 36
*******WL CLOS	ED 8/2/2016*****						JM WAIT
-	o communication by project	+ ic			_		STIMATE 60
AGE CRITERIA: Head of household	d must be 18 years or olde	er			1	O REMAIN ON W CALL EVERY	
	•		WAITL PARKING INF	ST FOR PARKING:	PET INFO:	F	PETS OK: YES
			Included	0.	Subject to a		1120
	ASSET LIMITS:	NONE					
AN OWN RESID	DENTIAL PROPERTY:				GENERAL II	NFO:	
ASSET LIMIT INF	O:		_EASE:			ICES: Domestic \	
			1 year		displaced.	transitional shelt	ers, involuntary
					Funding: Fe	d Low Inc Pub Hs	sing 100%
INCOME CRITER	14.				All convictio	ns must be 3 yrs	ago, unless it's
ncome Eligibility =			FURNISHED:		crystal meth	amphetamine or	sex offender
	Income: 1 person - \$53,25 00; 3 persons - \$68,500;		Partly furnishe				
4 persons - \$76,10	00; 5 persons - \$82,200; 00; 7 persons - \$94,350;		appliances on	ly, no carpet			
8 persons - \$100,4							
]]		
1-PERSON MAXIM	IUM MONTHLY INCOME:	:	4570				
2-PERSONS MAXI	MUM MONTHLY INCOMI	E:	5220				

		Last Comp	lete Update:	10/16/2023				AREA:	Waimanalo
PROJECT NAME:	WAI	MANALO A	APARTME	NTS				PROJECT TYPE:	Family
ADDRESS:	41-545	Hihimanu St.						PHONE: 808-25	9-5649
CITY:	Waimar	nalo	STATE: HI	ZIP:		96795		FAX : 259-97	05
MANAGER	R: Linda '	Villarrreal, Resi	dent Manager			APPLY AI		Main an ala	OUT-OF-STATE
APPLY TO): Waima	analo Apartmer	ts			Hawaii 96	himanu Street, \ 795	valinanalo,	APPLICATION ACCEPTED:
APPLY ATTN	۷:								YES
APPLY PHONE	≣ : 808-25	59-5649			FAX:	259-9705	EMAIL:	waimanalo@cmi.n waimanaloapartme	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:	37	1473	2.5xrent		576		3	YES
Two	Bdrm:	28	1768	2.5xrent		720		5	YES
Three	Bdrm:	8	2043	2.5xrent	_ [864		7	YES
Four	Bdrm:	2	2280	2.5x rent		1134		9	YES
RENT INFO: RE Rent range - 1 bdrm - \$1093 - 2 bdrm - \$1312 - 3 bdrm - \$1516 - 4 bdrm - \$1691 -	\$1312 \$1575 \$1819, 2	bath	E: NO	Electricity and):		MINIMUM W ESTIMATE MAXIMI	
AGE CRITERIA:								TO REMAIN ON V	
Head of househol	d must b	e 18 years or o	lder	WAITL	JST FOF	R PARKING):	CALL EVERY	(Months):
				PARKING INF			PET INFO	: !	PETS OK: NO
J.	A	SSET LIMITS:	NONE	Parking include	ded				
AN OWN RESI		PROPERTY:	YES				GENERAL		
ASSET LIMIT INF	·O:			LEASE: 6 months			are filled o	es not maintain a von a first-come, first area, on bus line	
								v.waimanaloapartm	
INCOME CRITER Maximum Annual 2 persons - \$62,8 4 persons - \$78,6	Income: 80; 3 per			FURNISHED: Partly furnish appliances or	edmajo	or	Applicatio Ask mana Send requenvelope Pick up fro	mt by Cambridge M n: gement to mail it lest with self-addre om manager's offic hrough waimanaloa	ssed stamped
I-PERSON MAXIN	иим мо	NTHLY INCOM	E:	4585			Į.		
2-PERSONS MAX	IMUM MO	ONTHLY INCO	ME:	5240					

	Last Co	mplete Update:	10/16/2023			AREA:	Waimanalo
PROJECT NAME:	Waimanalo	Emergency	Shelter; pro	<mark>eviously Wei</mark>	<mark>nber</mark>	PROJECT TYPE:	Emergency
ADDRESS:	41-490 Saddle City	Rd.	•			PHONE: 808-204	1-0982
CITY.]	STATE: H	7ID.	00705		FAX: 744-06°	16
CITY:	Waimanalo	STATE: H	ZIP:	96795		·	
MANAGER	: Destiny, Site Mana	ager		APPLY ADI	DRESS:		
APPLY TO):						OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	l:						NO
APPLY PHONE	: 204-0982			FAX: 744-0616	EMAIL:	www.kahumana.oro	9
Unit	Type: Number	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER
s	of UNITS:	KENI.	Required:	180	of People	People:	Allowed:
				420	3	4	
	Bdrm: 7			550	5	10	
Three				950	0	10	
Four	Bdrm:			<u> </u>		J	NO
RENT INFO: RE	NT IS 30% OF INCO	OME: YES	UTILITIES INC	LUDED:		TOTA	L UNITS: 30
Emergency Shelte 30%; cap \$250/m			All utilities			MINIMUM W ESTIMATE	
			<u> </u>				JM WAIT
AGE CRITERIA:						TO REMAIN ON W	
18yo			WAITLIS	ST FOR PARKING:		CALL EVERY	(Months): 0
			PARKING INFO	D:	PET INFO): F	PETS OK: NO
					ADA certi	fied with documenta	tion
	ASSET LIMIT	rs:			J		
	DENTIAL PROPERT	Y: NO			GENERAL		
ASSET LIMIT INF	O:		LEASE:		casework		as determined by
			Program agree	ement: 90 Days	Must follo	nd on site. ow Program Rules. villing to work if not o	disabled.
INCOME CRITER	IA·		,				
None			FURNISHED:				
			Stove, refrigera				
			minatable matti	COS II HEEUEU			
					<u></u>		

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	te Update:	12/15/2021			AREA:	Waimanalo
PROJECT NAME:	WAIMANALO H	OMES I &	ІІ /НРНА.	wind) - NOT	ACC	PROJECT TYPE:	Family
	Humuniki St. & Humuna		II (HEHA	-willa) - NOT	ACC		1
ADDITEOU.	Tidilidiliki St. & Hullidila	г.				PHONE: 808-233	
CITY:	Waimanalo	STATE: HI	ZIP:	96795		FAX. 233-376	99
MANAGER APPLY TO	t: Roberta Kahele D: HPHA NOT ACCEPTING APP	PLICATIONS		APPLY AD 1002 North Honolulu, H NOT ACCE	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED: NO
APPLY ATTN	I: Oahu applications office NOT ACCEPTING APP						NO
APPLY PHONE	:: 808-832-5961	LICATIONS		FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
One	Bdrm: 19	0		877	2	6	YES
Three	Bdrm: 18	0		1017	3	8	YES
Four	Bdrm: 4	0		1171	4	10	YES
	OF INCOME: Of Federal Low Income 8/2/2016******	projects	UTILITIES INC Water and allo and gas	CLUDED: owance for electricity		MINIMUM W. ESTIMATE MAXIMU	(Months): 36 JM WAIT STIMATE 60
	d must be 18 years or old	er	\^/^ ITI	ICT FOR RADIVING		CALL EVERY	
	4005T LINUTO		PARKING INF	IST FOR PARKING:	the catego	: F nimals ok, but only o ories listed below: under 25 lbs) or cat	
AN OWN RESI	ASSET LIMITS: NOTE NOTE NOTE NOTE NOTE NOTE NOTE NOTE				GENERAL		
ASSET LIMIT INF			LEASE:		PREFERE	ENCES:(A) domest	
Cannot own a hou	use on Oahu		1 year		Displaced of income	omeless in transition (B) substandard h (C) others = indefin	sing; rent >50% nite wait.
INCOME CRITER	IA:	,				Fed Low Inc Pub Hs	
ncome Eligibility = Maximum Annual 2 persons - \$60,90 4 persons - \$76,10	= 80% of AMI Income: 1 person - \$53,2: 00; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	50;	FURNISHED: Partly furnishe appliances on		All convict	igibility=80% of AM tions must be 3 yrs a thamphetamine or s	ago, unless it's
1-PERSON MAXIM	MUM MONTHLY INCOME:	:	4570		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCOM	E:	5220				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	1/5/2022				A	REA:	Waipahu
PROJECT NAME:	WAIPAHU HAL	L ELDERI	_Y			PF	OJECT T	YPE:	Elderly
ADDRESS:	94-1060 Waipahu St.					PI	HONE: 80)8-671·	-3801
CITY:	Waipahu	STATE: HI	ZIP:	96	6797		FAX: 68	30-045	6
	: Collette Sanchez, Sen Kelsey Chalmers, Assi : Cambridge Manageme	stant Communi		W: 94	PPLY ADDRE: aipahu Hall -1060 Waipah aipahu, HI 96	nu St., Office			OUT-OF-STATE APPLICATION ACCEPTED:
									YES
APPLY ATTN APPLY PHONE				FAX: 680	-0456	EMAIL: wai	pahu@cm	iweb.n	et
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ	ET. N	INIMUM Number People	MAXIMU Number People	of	CAREGIVER Allowed:
	Bdrm: 72 Bdrm: Bdrm:	0		6:	36	1	3		YES
RENT INFO: RE Max rent is \$1465	NT IS 30% OF INCOME	YES	UTILITIES INC				MINIMU ESTIM	JM WA IATE (AXIMU	NO UNITS: 72 AIT LIST Months): 18 M WAIT TIMATE 24
AGE CRITERIA:			is.			то	REMAIN	ON W	AITLIST
disabled. Other m	d must be 62 years or old nembers of the household ldren, siblings, or friends	d may be	WAITLI PARKING INFO		YES P			P	ETS OK: NO
AN OWN PESIT	ASSET LIMITS:				J.	check require			
ASSET LIMIT INFO	O:		LEASE: 1 year, then m	onth-to-mo	nth	Pavilion center Bbq Area & Iu Recreation ro A gated common-site mana Guest interco Recycling pro	er & social ash landscape om with two nunity on beginning menters.	aping	
	IA: num annual income: 1 pe is - \$46,020; 3 persons -		FURNISHED: Partly furnishe appliances onl floor		tile	Transportation Catholic Char Application: Request by en Ask Managen Pick up from	n to Shopp ities Hawa mail waipa nent to ma	ii'l hu@ci il it	ailable through
1-PERSON MAXIM	IUM MONTHLY INCOME	Ē:	3355		Į.				

Printed: 4/2/2024 Page: 176

3835

	Last Comple	ete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIPAHU I (HF	PHA-lee) -	NOT ACC	EPTING APP	S	PROJECT TYPE:	Family
	94-111 Pupuole St.					PHONE: 808-483	R-2550
						FAX: 483-255	
CITY:	Waipahu	STATE: HI	ZIP:	96797		17211 100 200	,,,
MANAGER	: Marcus Asami			APPLY ADI	DRESS:		
APPLY TO): HPHA NOT ACCEPTING AP	PLICATIONS		1002 North Honolulu, H NOT ACCE		ATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Oahu applications office NOT ACCEPTING AP						NO
APPLY PHONE	: 808-832-5961			FAX: 832-3461	EMAIL: h	phaishereforyou.o	rg
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
	Bdrm: 13	0		650	2	6	YES
Three I		0		817	3	8	YES
Four I	Bdrm:						
	NT IS 30% OF INCOME of for Federal Low Income 8/2/2016******		Water and ele			MINIMUM W. ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:			Į.			LIST ES O REMAIN ON W	
Head of household	d must be 18 years or old	der	WAITL	IST FOR PARKING:		CALL EVERY	
			PARKING INF	O:	PET INFO:	Р	PETS OK: YES
]	ASSET LIMITS:	NONE	Included		the categor	mals ok, but only o ies listed below: nder 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL I	NFO:	
Cannot own a hou			LEASE:			NCES: Domestic V n transitional shelte	
					Funding: Fe	ed Low Inc Pub Hs	sing 100%
INCOME CRITER	IA:					ons must be 3 yrs	
2 persons - \$60,90 4 persons - \$76,10	Income: 1 person - \$53,300; 3 persons - \$68,500; 00; 5 persons - \$82,200; 00; 7 persons - \$94,350;	250;	FURNISHED: Partly furnishe appliances on		crystal met	hamphetamine or s	sex orrender
1-PERSON MAXIM	IUM MONTHLY INCOME	<u>:</u> :	4570		-		
2-PERSONS MAXI	MUM MONTHLY INCOM	ΛΕ:	5220				

	Last Comple	ete Update:	12/15/2021			AREA:	Waipahu
PROJECT NAME:	WAIPAHU II (HI	(201-2H	NOT ACC	EPTING APP	S	PROJECT TYPE:	Family
	94-132 Pupupuhi St.	TIA ICC)	HOT ACC	DEI TINO ALT		PHONE: 808-483	<u> </u>
	102 i apapani ot.					FAX: 483-255	
CITY:	Waipahu	STATE: HI	ZIP:	96797		170. 403-230	2
MANAGER	R: Marcus Asami D: HPHA NOT ACCEPTING APP	PLICATIONS		APPLY ADD 1002 North S Honolulu, HI NOT ACCE	School St.	CATIONS	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	: Oahu applications offic						NO
APPLY PHONE	NOT ACCEPTING APR 808-832-5961	PLICATIONS		FAX: 832-3461	EMAIL:	hphaishereforyou.o	rg
Unit	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	Bdrm:						
Two	Bdrm: 16	0		635	2	6	YES
Three		0		822	3	8	YES
Four	Bdrm:		ļ.				
	NT IS 30% OF INCOME: O for Federal Low Income 8/2/2016******		UTILITIES INC Electricity and			MINIMUM W ESTIMATE MAXIMU	(Months): 36
AGE CRITERIA:						TO REMAIN ON W	00
Head of househole	d must be 18 years or old	ler	WAITL	IST FOR PARKING:		CALL EVERY	(Months): 12
			PARKING INF	O:	PET INFO:		ETS OK: YES
J.	ASSET LIMITS:	NONE	Included		the catego	imals ok, but only or ries listed below: nder 25 lbs) or cat	
	DENTIAL PROPERTY:	NO			GENERAL	INFO:	
Cannot own a hou			LEASE: 1 year			NCES: Domestic V in transitional shelte	
					Funding: F	ed Low Inc Pub Hs	ing 100%
INCOME CRITER	IA:		-			ions 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	thamphetamine or	sex опепаеr
1-PERSON MAXIM	MUM MONTHLY INCOME	i:	4570		Į.		
2-PERSONS MAXI	IMUM MONTHLY INCOM	IE:	5220				

	Last Comple	ete Update:	0/16/2023			ARE	Waipahu
PROJECT NAME:	WAIPAHU TOW	/ERS				PROJECT TYP	PE: Family
ADDRESS:	94-337 Pupumomi St.					PHONE: 808-	753-9440
CITY:	Waipahu	STATE: HI	ZIP:	96797		FAX:	
MANAGER	R: Sonja Tupua				ADDRESS:	Cuito 200	OUT OF STATE
APPLY TO	D: Mark Development, Inc	o.			Vaialae Avenue, S Ilu, HI 96816	suite 200	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	N:						YES
APPLY PHONE	E: 808-735-9099			FAX: (781)29		.: https://www.mdi er	hawaii.com/waipahutov
	t Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	
	Studio: 2			100			
	Bdrm: 2	0		482 684	1 2	5	YES
Three				084	2	3	
Four	Bdrm:						YES
30% of household	d's income	E	lectricity and	water		ESTIMA [*] MAX	I WAIT LIST TE (Months): 12 IMUM WAIT
		Į.					ESTIMATE 36
AGE CRITERIA: Head of househol	ld must be 18 years or old	der	\A/A ITI I		NO.	TO REMAIN ON CALL EVER	N WAITLIST RY (Months): 6
		P	WAITLI ARKING INFO	ST FOR PARKI D:	PET INF	O:	PETS OK: NO
	ASSET LIMITS:	T	arking includ here is a cha talls.	ed rge for additiona	al		
	DENTIAL PROPERTY:	NO			GENERA		
ASSET LIMIT INF	-0:	_	EASE: year		Amenitie Laundry	es: Recreation Are Room	ea, Playground,
			year		Funding	: Project based Se	ec 8
INCOME CRITER	NA.				Credit &	Criminal checks	
2 persons - \$48,2	Income: 1 person - \$42,200; 3 persons - \$54,350; 250; 5 persons - \$65,100	P	URNISHED: artly furnishe ppliances onl			ion:https://www.mi	dihawaii.com/waipahut ager's office
I-PERSON MAXIN	MUM MONTHLY INCOME	<u> </u>	516				
2-PERSONS MAX	IMUM MONTHLY INCOM	1E: 4	016				

		Last Comp	lete Update:	12/16/2021			AREA:	Moilili
PROJECT NAME:	WEIN	BERG H	ALE				PROJECT TYPE:	Singles or Couple
ADDRESS:	2734 S.	King St.					PHONE: 808-94	6-6953
CITY:	Honolulu	I	STATE: HI	ZIP:	96826		FAX : 973-06	05
MANAGER	R: Chris G	erson				ADDRESS: from case mana	ager	OUT-OF-STATE
APPLY TO): Housing	g Solutions, In	C.					APPLICATION ACCEPTED:
APPLY ATTN	l: Chris G	erson						NO
APPLY PHONE	E: 946-695	53			FAX: 973-0605		.: chris@hsiservices	.net
Unit	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	Number of	CAREGIVER Allowed:
S	itudio:	60	1250		266	1	2	
One	Bdrm:							
Two	Bdrm:							
Three	Bdrm:							
Four	Bdrm:							
RENT INFO: RE Security Deposit 9 Section 8 accepte Shelter + Care pro or other housing v	\$1250 ed ogram			All utilities incl			MINIMUM W ESTIMATE MAXIM	(Months): 1
AGE CRITERIA:				Įt.			TO REMAIN ON V	STIMATE 6
Head of househol	d must be	18 years or o	lder	\/\AITI I	ST FOR PARKIN	IC:	CALL EVERY	
				PARKING INF		PET INF	O:	PETS OK: YES
<u> </u>	AS	SET LIMITS:		pre approved guest parking		Under 25	5 pounds; limit 1 per	unit
AN OWN RESI		PROPERTY:	NO	between 7am	to10pm.	GENERA	AL INFO:	
ASSET LIMIT INF	O:			LEASE:	th	Funding Shelter - Funding	+ CareProgram and	Section 8 100%
INCOME CRITER	IA:			FURNISHED:	size refrigerator,	Send red envelope Pick up	nagement to mail it quest with self-addre	e
				microwave, ar cabinet, kitche	nd counter top			
1-PERSON MAXIN	MUM MON	ITHLY INCOM	IE:	4230				
2-PERSONS MAX	IMUM MO	NTHLY INCO	ME:	4835				

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	ete Update:	7/16/2020			AREA:	Lanakila	
PROJECT NAME:	WEINBERG SE	NIOR RES	SIDENCE	AT MALUHIA		PROJECT TYPE:	Elderly	
ADDRESS:	1111 Hala Dr.					PHONE: 808-842	2-1082	
CITY	Honolulu	STATE: HI	ZIP: [96817		FAX: 843-015	57	
CITT.	Honolulu	STATE:		90017				
	: Canary McClinton, Res	sident Manager		APPLY ADI 1055 Kalo F Honolulu, H	Place, Suite 10	03	OUT-OF-STATE APPLICATION ACCEPTED:	
APPLY ATTN	:						YES	
APPLY PHONE	: 808-949-4111			FAX: 949-7211	EMAIL:			
	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	tudio: 39	0		400+	1	3	YES	
	39 Bdrm:			400+	<u>'</u>	3		
Three I								
Four								
Preference is no lo frail (needing help living eg: eating, d	NT IS 30% OF INCOME onger given to applicants with at least 3 activities ressing, shopping, etc.) sit equal to 1 months rener)	s who are of daily Minimum	UTILITIES IN Water, \$81 u	ICLUDED: tility allowance		MINIMUM W ESTIMATE MAXIMU	-	
AGE CRITERIA:						TO REMAIN ON W		
	d and co-tenants must be application. Caregiver m		WAITLIST FOR PARKING: PARKING INFO: YES PET Parking included but limited			CALL EVERY		
	ASSET LIMITS:	NONE						
AN OWN RESID	DENTIAL PROPERTY:	NO			GENERAL	_ INFO:		
ASSET LIMIT INFO: Must not wholly own a majority interest in residential real estate.			1 year acc sho lane allo			Walk in shower and closet, wheelchair accessible, community center. Lounge, trash shoot and laundry room on each floor. Covered lanai areas, storage lockers. Caregivers are allowed with MD letter; can work outside home		
INCOME CRITER	IA:				site mana	s there's other care tager, interior landsca	aped courtyard.	
MUST BE LESS T (Project follows HI						Full-time Activity Coordinator; Opened 1996 Funding: HUD PRAC 202		
1-PERSON MAXIM	IUM MONTHLY INCOME	≣:	3821					

Printed: 4/2/2024 Page: 181

4367

2-PERSONS MAXIMUM MONTHLY INCOME:

		Last Compl	ete Update:	8/7/2023			AREA:	Ewa	
PROJECT NAME:	WES	T LOCH E	LDERLY	VILLAGE			PROJECT TYPE:	Elderly	
ADDRESS:							PHONE: 808-68°	-0562:	
							FAX: 681-414		
CITY:	Ewa Be	ach	STATE: HI	ZIP:	96706		,		
MANAGER		DelaCruz - Residasay - Project A		t	APPLY AD	DRESS:		OUT-OF-STATE	
APPLY TO	: Hawaii	Affordable Prop	perties, Inc					APPLICATION ACCEPTED:	
APPLY ATTN	l:							YES	
APPLY PHONE	: 808-68	1-0562; 808-89	2-1253		FAX: 681-4140		locationsrentals.com rentals.aspx (click of		
Unit	Туре:	Number	RENT:	Minimum INCOME	SQ FT:	MINIMUM Number	MAXIMUM Number of	CAREGIVER	
	tudio:	of UNITS:		Required:		of People	People:	Allowed:	
		90	865	2x rent	556		2	YES	
	Bdrm:	60	940	2x rent	686	1	3	120	
Three E								YES	
RENT INFO: RE Studio: \$865 (full r Limited number of check with manag Deposit=\$865 stud	rent). Or subsidie ement co dio / \$940	ne Bdrm: \$940 es available (ma ompany. O One bdrm	x of \$170)	UTILITIES INC Gas (for stove water	CLUDED: e and water heater) a	nd	MINIMUM W ESTIMATE MAXIMU		
Moitlist purged ov	ani R ma	nthe applicants	muet	P.				Į.	
AGE CRITERIA: All residents must be 55+. Handicap age requirement.				WAITL PARKING INF	IST FOR PARKING: FO: YES	PET INFO:	TO REMAIN ON W CALL EVERY F		
]	AS	SSET LIMITS:	YES	Stalls assigne	There B parking stalls. ed on first come		s, fish, or 1 dog und gmt & vets "clean b		
AN OWN RESID	DENTIAL	PROPERTY:	NO	first serve and	d waitlist.	GENERAL	INFO:		
ASSET LIMIT INFO		nute applicant o	nvor.	LEASE:			s are allowed with Narate bedroom, with		
only if income from assets puts applicant over income. Rental unit must be primary residence.			1 year Fund Asst Recru			has a separate bedroom, with sliding door. Funding: Participating in the City Housing Rntl Asst Prgm and Sec. 8 and Rent Supplmnt Prgm Recreation hall with tv, 24/7 Security; Resident Services Coordinator; Transportation to			
INCOME CRITERI							available through C ened 1993; no elev		
Maximum Annual 1 person - \$55,000 2 persons - \$62,88 *60% AMI	0;			FURNISHED: walk-up			alk-up, lanais Handicap Accessible Units		
1-PERSON MAXIM	IOM MUI	NTHLY INCOME	≣:	4583]			

Printed: 4/2/2024 Page: 182

5240

	Last Compl	ete Update:	7/16/2020			AREA:	Salt Lake
PROJECT NAME:	WESTLAKE A	PARTMENT	ΓS			PROJECT TYPE:	Family
	3139 Ala Ilima St. Honolulu	STATE: HI	96818	PHONE: 808-839-2027 FAX: 834-7107			
	2: Dana Montero, Reside D: Hawaiian Properties L	-		APPLY ADD 1165 Bethel Honolulu, HI	St., 2nd Fl.		OUT-OF-STATE APPLICATION ACCEPTED: YES
APPLY PHONE	E: 808-839-2027			FAX: 521-2714	EMAIL:	None	
Unit	Type: Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:						
Two	Bdrm: 96	0		872	3	6	
	Bdrm:						
RENT INFO: RE section 8 (project	NT IS 30% OF INCOME	YES YES	UTILITIES INC	LUDED:		MINIMUM W ESTIMATE MAXIMU	
AGE CRITERIA: Head of househol	d must be 18 years or ol		PARKING INFO		PET INFO	TO REMAIN ON W	/AITLIST
ASSET LIMITS: AN OWN RESIDENTIAL PROPERTY: ASSET LIMIT INFO:			Funding			_ INFO: g pool, picnic area, I Section 8 100% PONSE IN 2021	aundry area
INCOME CRITER 50% AMI 5 persons - \$63,0 6 persons - \$67,6	00		FURNISHED:				

1-PERSON MAXIMUM MONTHLY INCOME:

2-PERSONS MAXIMUM MONTHLY INCOME:

	Last Comple	te Undate:	11/2/2023					
DDO IECT NAME.	WHITMORE CIF			<u> </u>			AREA: PROJECT TYPE:	Wahiawa
	111 N Circle Makai St.	CLE APAR	CIMENI	<u>5</u>				Elderly
ADDRESS.	TTT N Circle Makai St.						FAX: eFax: 3	753-8474, C: 808-7
CITY:	Wahiawa	STATE: HI	ZIP:		96786		FAX. Jerax. 3.	23-040-6212
	t: Laura Lynn Daniels - Po	, , ,			APPLY ADDR 3165 Waialae Hawaii 96816	e Ave. #200,	Honolulu,	OUT-OF-STATE APPLICATION ACCEPTED:
APPLY ATTN	I: Mark Development - 73	35-9099						YES
APPLY PHONE	E: 808-753-8474			FAX: (781)295-3427		http://www.mdihawailc	
	Number of UNITS:	RENT:	Minimum INCOME Required:		SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
	tudio:							YES
	Bdrm: 40	0			516	1	2	YES
Three I	Bdrm: 4	0		- -	645	1	3	TES
	Bdrm:							YES
Tour	Durin.			- 1				11.5
	NT IS 30% OF INCOME:		TILITIES INC			_	TOTA	L UNITS: 43
deposit \$1,155 - 1 bedroo \$1,355 - 2 bedroo			later and gas esidents are		d in rent. ible for electric	:	MINIMUM W ESTIMATE	
		Į.						JM WAIT STIMATE 24
	d must be 62 years or old		\\/ \ I T	IST EOD	PARKING:		TO REMAIN ON W CALL EVERY	
any age, including	nembers of the household g children if head of house		WAITLI ARKING INFO		N/A	PET INFO	: F	PETS OK: YES
legal guardian.		P	arking includ	led		Pets are a	llowed with restriction	ons
	ASSET LIMITS:					J		
AN OWN RESIDE	DENTIAL PROPERTY: \[\big \]	YES				GENERAL	INFO:	1D letter: oon work
AGGET ENVIT IN	<u>. </u>		EASE: year			outside ho	ome. Caregiver inco B handicapped acce	ome included in
			yeai			Built in 19		ssable utilits.
J						www.ariyo	eshiconsulting.com/vee; Coin Operated	
INCOME CRITER 50% of Honolulu N		F	JRNISHED:			Recreation	nal Room equipped and computers with	with cable
		P	artly furnishe			Education Open gaze Application	and computers with al and social activiti ebo and outside lou n:Download from m om manager's office	es nge area dihawaii.com
1-PERSON MAXIM	MUM MONTHLY INCOME	: 3	004]		
2-PERSONS MAXI	IMUM MONTHLY INCOM	E: 3	433					

		Last Comp	lete Update:	12/26/2023				AREA:	Makiki	
PROJECT NAME:	WILE	DER VISTA	4					PROJECT TYPE:	Family	
ADDRESS:	1618 Pi	unahou St.						PHONE: 808-94	7-4846	
CITY:	CITY: Honolulu STATE: H				96	822		FAX : 956-14	46	
MANAGER	R: Yvette	James, Reside	ent Manager		P.0	PLY ADD	120		OUT-OF-STATE	
APPLY TO): Location	ons			HO	nolulu, HI	96823		APPLICATION ACCEPTED: YES	
APPLY ATTN	: Prope	rty Managemen	t Division						TES	
APPLY PHONE	E: 808-73	38-3100			FAX : 735	1978	EMAIL:	http://www.location ble-rentals.aspx	srentals.com/afforda	
	t Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ	FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:	
	itudio:									
	Bdrm:	6	500	2.5x rent	52					
	Bdrm:	48	1260	2.5x rent	60	0				
Three										
Four	Bdrm:			<u> </u>				J	YES	
RENT INFO: RE LIHTC property Section 8 certifica gross income req	ate holdei	rs need not mee		Water & Sewe				MINIMUM W ESTIMATE MAXIMI		
AGE CRITERIA:								TO REMAIN ON V	P.	
Head of househol	ld must b	e 18 years or o	lder	WAITL	IST FOR PA	RKING:		CALL EVERY	(Months): 6	
				PARKING INFO: NO			PET INFO	: I	PETS OK: NO	
]	Δ	SSET LIMITS:	NONE	61 parking sta	alls					
AN OWN RESI							GENERAL	_ INFO:		
ASSET LIMIT INF	O:			LEASE:				n January 2004 nroom has linen closet and pantry in 2bdrm		
All income from assets is verified to determine eligibility.			6 months; then month-to-month units			units	LIHTC, RHTF, Sect	, ,		
INCOME CRITER	IIA:									
Food stamps accorditeria. 30% of AMI: 1 Pe	rson \$27	,510, 2 persons	\$ \$31,440	FURNISHED: Partly furnishe appliances on		t.				
I 1-PERSON MAXIN	иим мо	NTHLY INCOM	E:	3820			1			
2-PERSONS MAX	IMUM M	ONTHLY INCO	ME:	4366						

		Last Compl	ete Update:	7/16/2020			AREA:	Wahiawa
PROJECT NAME:	WILI	KINA PAR	K				PROJECT TYPE:	Elderly
ADDRESS:	298 Wil	ikina Dr.					PHONE: 808-622	2-6125
CITY:	Wahiaw	<i>l</i> a	STATE: HI	ZIP:	96786		FAX: 622-612	27
MANAGER	R: Debra	Fong			APPLY AD	DRESS:		OUT-OF-STATE
APPLY TO): Wilikin	a Park Apartme	ents		OII-OILC			APPLICATION ACCEPTED:
APPLY ATTN	l:							YES
APPLY PHONE	E: 808-62	22-6125			FAX : 622-6127	EMAIL: \	wilikinapark@sand	alwoodmgt.com
Unit	Type:	Number of UNITS:	RENT:	Minimum INCOME Required:	SQ FT:	MINIMUM Number of People	MAXIMUM Number of People:	CAREGIVER Allowed:
S	tudio:	45	800	2xrent	479	1	2	YES
One	Bdrm:	19	875	2xrent	627	1	2	YES
	Bdrm:							
Three								
Four	Bdrm:							NO
RENT INFO: RE				UTILITIES INC			TOTA	AL UNITS: 64
Market Rents: stu Longer waits for o At move in: must equivalent deposit	ne bedro pay ONE	oom. : full month's rei	nt plus	Water, trash a	nd sewer, gas		MINIMUM W ESTIMATE MAXIMI	
								STIMATE 12
AGE CRITERIA: One member mus	st be 55 c	or disabled; spo	use can be	\A/A/T/	OT FOR RADICINIO		TO REMAIN ON W CALL EVERY	
18+, roommate ca allowed over 18yr			0	PARKING INFO	ST FOR PARKING: O: YES	PET INFO:	F	PETS OK: YES w/
	A	SSET LIMITS:	NONE	Long w/l for pa	arking, but parking	Birds, fish, note.	and small dogs Ol	K with doctor's
AN OWN RESI	DENTIAL	PROPERTY:	NO			GENERAL	INFO:	
ASSET LIMIT INF	O:			LEASE: 1 year		clubhouse, maintenan	CCH shopping var , trash chute on ev- ce person lives on oped units (3 for mo	ery floor, site.
INCOME CRITER	IA:					Funding: L	ow Income Housin sistance Program	g Tax Credit &
MAXIMUM income: 1 person - \$43,980 2 people - \$50,220			FURNISHED:			ONSE IN 2021		
 1-PERSON MAXIN	IUM MOI	NTHLY INCOM	E:	3665		<u> </u>		
2-PERSONS MAXI	IMUM MO	ONTHLY INCO	ME:	4185				

		Last Comp	lete Update:	5/8/2023			AREA:	Chinatown
ROJECT NAME:	WINS	STON HAL	.E				PROJECT TYPE:	Family
ADDRESS:	1055 Ri	ver St.					PHONE: 808-744	1-1307
CITY:	Honoluli	u	STATE: HI	ZIP:	96817		FAX : 744-130	8
MANAGER	: Justin	Gonsalves, Site	e Manager		APPLY ADD	St.		OUT-OF-STA
APPLY TO	: Hawaii	Affordable Pro	perties Ltd.		Honolulu, Hl	96817		APPLICATIO ACCEPTED
APPLY ATTN	: Manag	er						
APPLY PHONE	: 808-74	4-1307			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:							
Two E								
Four E								NO
Fimely reponses to required	o commu	unication by pro	oject is	Gas, electricit	y and water			(Months):
			Į.				LIST ES	STIMATE
AGE CRITERIA: Head of household	d must be	e 18 years or o	lder	\A/A ITI	ICT FOR RADICING.		TO REMAIN ON W CALL EVERY	
				WALL PARKING INF	IST FOR PARKING: O: NO	PET INFO	; F	PETS OK: NO
				Parking not av	vailable	Per reason managem	nable accomodatior ent.	from
AN OWN RESID		SSET LIMITS: . PROPERTY:				J GENERAL	INFO:	
ASSET LIMIT INFO				LEASE:		Funding: u	unknown	
				1 year				
NCOME CRITERI	IA:							
Maximum Annual 1 person - \$54,90(2 persons - \$62,7(0;			FURNISHED: Partly furnishe allpiances onl				
-PERSON MAXIM	IUM MOI	NTHLY INCOM	E:	4220]		

		Last Comp	lete Update:	12/26/2023			AREA:	Ala Moana	
PROJECT NAME:	WIST	ERIA VIS	TA				PROJECT TYPE:	Elderly	
ADDRESS:	1239 Sc	outh King St.					PHONE: 808-808	8-597-8963	
CITY:	Honoluli	u	STATE: HI	ZIP:	96814		FAX: 589-289	97	
MANAGER	: Kayla l	Kedro, Resider	nt Manager		APPLY ADI 1239 S King			OUT-OF-STATE	
APPLY TO	: Wisteri	a Vista			Honolulu, H			APPLICATION ACCEPTED:	
APPLY ATTN	: Reside	nt Manager						YES	
APPLY PHONE	: 808-59	7-8963			FAX : 589-2897		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:	91	805	2xrent	384			YES	
Two E	Bdrm:								
Three E									
Four B	Bdrm:							YES	
Section 8 certificat gross income requ	te holder	s need not me		UTILITIES INC Water & Sewe			MINIMUM W ESTIMATE MAXIMU LIST ES	(Months): 24 JM WAIT STIMATE 36	
AGE CRITERIA: All residents must	be 62 or	older		\^/^ T	IST FOR DARKING.		TO REMAIN ON W CALL EVERY		
				WAITLIST FOR PARKING: PARKING INFO: PET IN \$40/ month; 32 stalls			· F	PETS OK: NO	
į.	AS	SSET LIMITS:		,					
AN OWN RESID		PROPERTY:	YES			GENERAL Floatric o		parato Air	
ASSET LIMIT INFO.				LEASE: 1 Year		Electric, cable and phone separate. Air conditioned units. Washer/dryer available. Multi-purpose room. Library. CCH social worker available on site 1x per week. On bus line.			
INCOME CRITERI						opened 20	gency call system 000 _IHTC - 50% AMI, F	RHTF	
Maximum annual income 50% AMI: 1 person - \$45,850 2 persons - \$52,400				Partly furnishedmajor Trans			nsportation to Shopping available through holic Charities Hawai'l		
1-PERSON MAXIM 2-PERSONS MAXI				3820 4366					