



**CLASS 9
INCENTIVE
ELIGIBILITY APPLICATION
Part II**

Control Number

The Assessor's Office will not accept Part II unless it has received Part I of the application and subsequently issued the applicant a Control Number.

The Class 9 Eligibility Application is comprised of two (2) parts and applicable filing fees. Part II is filed upon the completion of new construction or rehabilitation. As mentioned above: **The Assessor's Office will not accept Part II unless it has received Part I of the application and subsequently issued the applicant a control number.** In conjunction with the filing of Part II of the application, you must also file an Incentive Appeal Form requesting a change in the classification for the property. Please note that if the proposed Class 9 project involves multiple buildings, you must provide a separate Class 9 Eligibility Application (Part I and Part II) for each of that proposed project. For assistance in preparing this Application, an applicant may contact the Assessor's Office, 312-603-6914 or 312-603-4137.

The Class 9 Incentive will not be approved until all requested documents and information are provided and incentive appeal form received by the Cook County Assessor.

Applicant Information

Name: _____ Telephone: (_____) _____

Federal Employer Identification Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email information: _____

***Note:** *If title to the property is held or will be held in trust or by a corporation or a partnership, attach additional pages with the names, addresses and telephone numbers of all of the trust beneficiaries, corporate officers and/or general partners.*

Contact Person (if different from the Applicant)

Name: _____ Telephone: (_____) _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email information: _____

Property Description (per Permanent Index Number {PIN})

If you are applying for more than three different PINs, please submit the additional PIN information in an attachment.

Street Address: (1) _____

Permanent Index Number: _____

(2) _____

Permanent Index Number: _____

(3) _____

Permanent Index Number: _____

City: _____ State: _____ Zip Code: _____

Township: _____

Basis for Incentive

Indicate whether the basis for the Class 9 Incentive is new construction or major rehabilitation.

(Circle One) **NEW CONSTRUCTION** **MAJOR REHABILITATION**

If the basis for the incentive is new construction, skip the next section and proceed directly to the Proposed Dates and Projected Costs.

Description of Property After New Construction or Rehabilitation

Gross area of the building in square feet: _____ s/f

Gross living area of the building in square feet: _____ s/f

Number of dwelling units in building: _____

Number of dwelling units in building designated as Senior Housing: _____

Number of dwelling units in building designated as Section 8 Housing:: _ _____

Number of dwelling units in building designated as Class 9 Rentals: _____

If building has used other than residential, describe such uses and the approximate square footage of each use:

Post Construction / Rehabilitation Dates & Costs

Actual date new construction or rehabilitation commenced: _____

Actual date new construction or rehabilitation completed: _____

Total cost of the dollars spent for new construction/rehabilitation of the project: _____

Major Rehabilitation Cost Per System or Components

If the basis for the incentive is new construction, skip this Section. If the basis for the incentive is major rehabilitation, list the building systems or components that were rehabilitated as required by the Class 9 Eligibility Bulletin. Include the total cost and the cost per square foot for each system.

<i>System/Component</i>	<i>Total Cost</i>	<i>Cost/SF</i>

If more space is needed for additional System or Components, please list them on a separate sheet of paper. Be sure to include attachment when filing this application.

I. REQUIRED DOCUMENTATION

The documents referenced in item number five (5) below do not need to be included with the application; however, it does need to be available for inspection.

1. If the basis for the incentive is rehabilitation, the applicant must submit proof of rehabilitation cost including copies of building permits and contractor's sworn affidavits, notarized.
2. The applicant must submit documentation from appropriate municipal agency that the property is in compliance with all applicable local building, safety, health codes and requirements and is fit for occupancy. (e.g. Certificate of Occupancy/Certificate of Inspection).
3. The applicant must submit photographs of the interior and exterior of the building after the completion of new construction or major rehabilitation.
4. The applicant must submit Class 9 Rental Information/Tenant Household Income Report Form. **This form must be signed and notarized.** (Class 9 Rental Information/Household Income Report Form is attached).
5. For each designated Class 9 unit, the applicant must obtain a Class 9 Certification of Tenant Household Income. The applicant must retain these documents for the entire period the property is eligible and receives the Class 9 designation. Also, the applicant must make such documents available for inspection and review by members of the Assessor's Office upon request. Do not submit Class 9 Certification of Tenant Household Income with this renewal application (Class 9 Tenant Household Income is attached).
6. The applicant must provide written notice to Class 9 tenants of the maximum rents allowable under the Class 9 program and provide Assessor with an example of that written notice (sample notice To Tenants From Owners attached/maximum rents are published in the Class 9 Eligibility Bulletin).
7. If any tenants or units participate in other government programs that have rent and/or income limitations, such as Section 8, the applicant must submit documentation from the applicable government agency confirming such participation.
8. Applicant must provide an affidavit to confirm compliance with the COOK COUNTY LIVING WAGE ORDINANCE as approved and amended by the Board of Cook County Commissioners.

Cook County Living Wage Ordinance

Applicant confirms that it has reviewed a copy of Chapter 34, Article IV, Division 1, of the COOK COUNTY LIVING WAGE ORDINANCE, Sec. 34-123, as amended.

Please mark the appropriate blank below to indicate which statement applies to the applicant:

___ Applicant acknowledges that during the appeal process it must provide an affidavit to the Cook County Assessor’s Office stipulating it is in compliance with the above Referenced Living Wage Ordinance because applicant is currently paying a living wage to its employees.

OR

___ Applicant acknowledges that during the appeal process it must provide an affidavit to the Cook County Assessor’s Office stipulating it is in compliance with the above referenced Living Wage Ordinance because applicant is not required to pay a living wage.

The COOK COUNTY LIVING WAGE ORDINANCE, Section 34-123, is available upon request and online at www.municode.com and/or on the Cook County Clerk’s website at www.cookctyclerk.com.

Stipulation Pursuant to Section 2 of the Real Property Assessment Classification Ordinance

In return for receiving the Class 9 incentive classification for the subject property, the undersigned owner(s) hereby stipulates and agrees that in the event the undersigned, or any successor in interest in the subject property, fails to comply with the requirement that during the ten-year incentive period at least 35% of the dwelling units of the subject property be leased to tenants at rents which do not exceed rents affordable to low- and moderate-income persons or households, the Class 9 classification shall be deemed null and void from its inception as to the subject property, and that the undersigned shall be personally liable for and shall reimburse to the County Collector an amount equal to the difference, if any, in the amount of taxes that would have been collected had the subject property been assessed without the Class 9 classification and the amount of taxes actually billed and collected upon the subject property for the period during which it was being assessed with the Class 9 classification. Failure of the undersigned to make such a reimbursement to the County Collector shall not constitute a lien upon the subject property but shall constitute an in personam liability, which may be enforced against the owners.

Further, the undersigned certifies that he/she has read this Application and that the statements set forth in this Application and in the attachments hereto are true and correct, except as to those matters stated to be on information and belief and as to such matters the undersigned certifies that he/she believes the same to be true.

The undersigned further certifies that he/she has received and reviewed a copy of the COOK COUNTY LIVING WAGE ORDINANCE as amended by the Board of Cook County Commissioners.

_____	_____
Name of Owner(s)*	Title
_____	_____
Signature of Owner(s)*	Date

*Note: If title to the property is held in trust or by a corporation or a partnership, this Class 9 Eligibility Application must be signed by a beneficiary, officer or general partner.

Subscribed before me this _____ day of _____ 20_____

**COOK COUNTY ASSESSOR'S OFFICE
APPLICATION FOR CLASS 9 INCENTIVE PART II**

SAMPLE NOTICE TO TENANTS FROM OWNERS

Dear (tenant):

Once a year, we are required to notify you of the rent limits under the Cook County Assessor's Office Class 9 Affordable Housing Tax Incentive Program. The purpose of this notice is to inform you of the new maximum rent levels so you will know that your rent is within the allowable limits.

Attached is the Cook County Assessor's Office Class 9 Incentive Rent Schedule showing the maximum gross rents and allowance for utilities. Your gross rent is your monthly rent plus the allowance for any utilities paid directly by you.

This notice is for your information and will not affect your rent.

If you have any questions, please contact *(insert the name of the landlord or building manager)*.

(Note: The Above Sample Notice Should Be Placed On Your Official Stationery and submitted to the Cook County Assessor's Office.)

**COOK COUNTY ASSESSOR'S OFFICE
APPLICATION FOR CLASS 9 INCENTIVE PART II**

CLASS 9 INCENTIVE CERTIFICATION OF TENANT HOUSEHOLD INCOME

Your apartment is a unit under the Cook County Assessor's Office Class 9 Affordable Housing Tax Incentive Program. Class 9 units must be occupied by households whose incomes are within the limits set by the Class 9 Program. The income limits vary by the number of persons in the household. In order to qualify for the Class 9 Incentive, the owner or manager of the building must collect a completed and signed certification of household income each year from each Class 9 unit. The information will be treated as confidential by the Cook County Assessor's Office and will not be disclosed to the public. The information submitted to the Cook County Assessor's Office may be used for verification of other data submitted to the Cook County Assessor's Office.

Address of Building: _____ Unit Number: _____

Date lease begins: _____ Date lease ends: _____

List person in household and attach an additional sheet , if necessary.

Name	Source of Income*
_____	_____
_____	_____
_____	_____
_____	_____

** Some income sources should NOT be included in your Total Household Income. Please refer to the attached Class 9 Tenant Household Income Information Sheet On Income Declarations list so that you will know what to include and exclude.*

Total Number of Persons in my household: _____

Total Household Income: \$ _____

I declare and certify under penalty of perjury that the foregoing is true, correct and complete. I consent to and authorize the disclosure of the information above to the Cook County Assessor's Office and consent to and authorize it use for verification purposes.

_____ day of _____, 20 ____

Signature of Tenant

Signature of Owner

COOK COUNTY ASSESSOR'S OFFICE APPLICATION FOR CLASS 9 INCENTIVE PART II

Class 9 Incentive Tenant Household Income Information Sheet on Income Declarations

What is included in the household income?

Income that must be included in your total household income:

- Wages, salaries, and tips,
- Net business income,
- Interest, and Dividends,
- Social Security income, including lump sum payments,
- Payments from insurance policies, annuities, pensions, disability benefits and other types of periodic payments,
- Unemployment and worker's compensation and severance pay,
- Alimony, child support, and other regular monetary contributions,
- Public assistance,

What is not included in the household income?

Income you should not include in your total household income:

- Earning of children under age 18,
- Temporary income such as cash gifts,
- Reimbursements for medical expense,
- Lump sum distributions from inheritance, insurance payments, settlements for personal or property losses,
- Scholarships,
- Foster Child Support,
- Receipts from government – funded training programs,
- Earned income tax credit payments,

**COOK COUNTY ASSESSOR'S OFFICE
APPLICATION FOR CLASS 9 INCENTIVE PART II**

**CLASS 9 INCENTIVE RENT AND TENANT
INCOME SCHEDULE**

EFFECTIVE APRIL 2019

At least 35% of the apartments in a building having the Class 9 Incentive must be leased to low and moderate income households at affordable rents, The Class 9 allowable month rents and tenants household are listed below.

CLASS 9 ALLOWABLE MONTHLY RENTS

<u>Size of Unit</u>	<u>Class 9 Rents</u>
Single Room Occupancy (SRO)	\$686
0 Bedroom	\$915
1 Bedroom	\$1,044
2 Bedroom	\$1,212
3 Bedroom	\$1,542
4 Bedroom	\$1,844

UTILITY ALLOWANCES FOR LIGHTING AND GAS COOKING

Monthly utility allowance for electrical lighting and cooking gas are as follows:

<u>Size of Unit</u>	<u>Class 9 Rents</u>
0 Bedroom	\$33
1 Bedroom	\$42
2 Bedroom	\$51
3 Bedroom	\$60
4 Bedroom	\$74

INCOME LIMITS

Income limits have historically been defined as “low-income” by United States Department of Housing and Urban Development (HUD), at 80% of the MSA median income.

<u>Number in Household</u>	<u>Class 9 Income Limit</u>
1	\$49,950
2	\$57,050
3	\$64,200
4	\$71,300
5	\$77,050
6	\$82,750

**COOK COUNTY ASSESSOR'S OFFICE
APPLICATION FOR CLASS 9 INCENTIVE PART II**

Control # _____

CLASS 9 INCENTIVE RENTAL INFORMATION /TENANT HOUSEHOLD INCOME REPORT FORM Page _____ of _____

Name of Owner

Signature

Date

Property Address

Permanent Number(s)

Tenant Paid Utilities

**You must complete items (1) through (9) for all dwelling units, Class 9 and non-Class 9 units.
Complete items (10) and (11) for only those dwelling units designated Class 9.
Make additional copies of this page if necessary.**

(1) Unit #	(2) Class 9 Unit Yes / No	(3) Name of Tenant	(4) No. of BR's	(5) Lease Term	(6) ^a Contract Rent	(7) ^b Utility Allowance	(8) ^c Gross Rent	(9) Section 8 Yes / No	(10) # Persons in household	(11) ^d Household Income

20 _____
Name of Owner (Authorized Agent/Representative)

Title

Subscribed before me this _____ day of _____ ,

Signature

Date

_____ My commission expires on:

Notary

(6)^a Contract rent per month (rent paid by tenant plus any tenant and/or unit based government subsidy); (7)^b Monthly allowance for applicable utilities paid by tenant (except telephone)
(8)^c Gross Rent is contract rent plus any applicable utility allowance; (11)^d Monthly household income

