

What can be funded, up to \$1,000 (Apr-June) and up to \$2,000 (beginning July 1, 2020):

- Mortgage payment
- Rent payment
- Utility payment (electric and/or gas)
 - Internet and phone services are not covered.
- Licensed eldercare services

What can be funded, up to \$500:

- Licensed childcare services or DHS provider

Eligibility:

- Honolulu County resident
- 18 years of age or older
- Demonstrated loss of income and/or increased financial need directly resulting from the COVID-19 pandemic.
- Meet liquid asset limit of less than \$10,000
- Meet income limit of 100% AMI or below

DEPARTMENT OF PLANNING AND PERMITTING										
CITY AND COUNTY OF HONOLULU										
INCOME GUIDELINES AND MAXIMUM RENTS - 100% OF MEDIAN INCOME										
Family Size	1	2	3	4	5	6	7	8	9	10
Annual Income	\$84,400	\$96,400	\$108,500	\$120,500	\$130,200	\$139,800	\$149,500	\$161,500	\$173,500	\$185,500

Applicant information needed:

- Full Name (Last, First, and Middle initial)
- Physical address (residence)
- Mailing address if different from physical address
- Telephone/cellphone numbers
- Email address
- Social Security number
- Date of birth
- Number of adults in household
- Number of children in household
- If applicable, number of other adults and children living in the home (separate economic household from applicant)

Household member #2:

- Full Name (Last, First, and Middle initial)
- Address (residence)
- Telephone/cellphone numbers
- Email address
- Social Security number
- Date of birth
- Relationship

Household member #3:

- Full Name (Last, First, and Middle initial)
- Address (residence)
- Telephone/cellphone numbers
- Email address
- Social Security number
- Date of birth
- Relationship

(Additional household member information added as needed, including those in separate economic household.)

Applicant income Source(s):

- Source
- Phone number associated with source
- Amount
- Interval

Household member #2 income source(s):

- Source
- Phone number associated with source
- Amount
- Interval

Household member #3 income source(s):

- Source
- Phone number associated with source
- Amount
- Interval

(Additional household member income source(s) information added as needed. Do not include any income source(s) from separate economic household members.)

Applicant expenses:

- Expense
- Type of expense (if not apparent)
- Address where payment is sent
- Phone number associated
- Account number
- Amount
- Interval

Household member #2 expenses:

- Expense
- Type of expense (if not apparent)
- Address where payment is sent
- Phone number associated
- Account number

- Amount
- Interval

(Additional household member expenses information added as needed. Do not add any expenses from separate economic household members.)

Certification of Agency:

- Copy of valid Hawai'i state ID of applicant
- Proof of residency (Hawai'i driver's license or state ID, other official documents showing proof of O'ahu residency, two months utility, bank, and/or medical statements showing applicant's name and address)
- Last two most recent paystub(s)
- Last two income returns (may be waived based on availability to substantiate income loss or affidavit certifying)
- Copy of public benefits statement(s) and/or pension/retirement benefit statements
- Two months most recent bank statements for all accounts
- Proof validating emergency (notice from employer indicating loss in wages), etc.
- Proof of increased expenses caused by COVID-19 job loss or health issues
- Proof of licensed childcare provider (if applicable)
- Copy of rental lease or screenshot of rental management agency's payment portal proving rental amount
- Copy of most recent mortgage statement
- Copy of most recent utilities bills (electric and/or gas)
- Copy of most recent childcare invoice (if applicable)