Indiana Housing and Community Development Authority

Annual Rental Housing Owner Certification Checklist

Year of Owner Certification _____

Property Name _____

Primary Building Identification Number (BIN): _____

And/or

Award Number(s) (HOME,CDBG, CDBG-D, or Development Fund):

_____

RHTC and Combined RHTC with HOME, CDBG, CDBG-D or Development Fund Developments	HOME, CDBG, CDBG-D, Development Fund Only Developments
☐ **1. Completed Certification of Compliance – signed by an authorized signatory and notarized with Exhibit A or Exhibit B attached**	☐ **1. Completed Certification of Compliance – signed by an authorized signatory and notarized with Exhibit C attached**
☐ **2. Exhibit D**	☐ **2. Exhibit D**
☐ **3. Completed Development and Building Information form *Scattered Site Addresses sheet, if applicable**	☐ **3. Completed Development and Building Information form *Scattered Site Addresses sheet, if applicable**
☐ **4. Completed Rental Housing Utilities Information form**	☐ **4. Completed Rental Housing Utilities Information form**
☐ **5. Supporting Documentation for Utility Allowance**	☐ **5. Supporting Documentation for Utility Allowance**
☐ **6. Annual Monitoring Fee-original check and a copy of the check**	☐ **6. Affirmative Fair Housing Marketing Plan (if updated)**
☐ $22.00 per TC unit, $180.00 minimum; $6,000 maximum	If this is the initial year of certification, the following information must also be submitted to IHCDA:
☐ Extended Use Policy Approved developments $10.00 per TC unit, $110.00 minimum; $2,730 maximum (No fee for Project-Based Section 8 or RD developments – **MUST** provide contract)	☐ **7. Property Directional form**
☐ **7. Affirmative Fair Housing Marketing Plan (if updated)**	☐ **8. Authorized Signatory form**
(Tax Credits First Year Reporting) If this is the initial year of certification, the following information must also be submitted to IHCDA:	For shelters and migrant farm worker housing only:
☐ **8. A Copy of Completed and Signed IRS Form 8609 for each Building *(Part II 7a – 10d of Form 8609)***	☐ **9. Annual Beneficiary Report Spreadsheet***
☐ **9. Property Directional form**	
☐ **10. Authorized Signatory form**	

***Note: Beginning with the 2010 Annual Owner Certification, it is mandatory that all Annual Owner Certification Rental Reports be submitted electronically using the Indiana Housing Online Management website for all RHTC, HOME, CDBG, CDBG-D, and Development Fund developments. Excel spreadsheets will no longer be accepted (except for CDBG funded shelters and migrant farmer housing).**

Indiana Housing and Community Development Authority

Annual Rental Housing Owner Certification of Compliance

Year of Owner Certification _____

The undersigned, having been allocated:

Rental Housing Tax Credits pursuant to Section 42 of the Internal Revenue Code of 1986, as amended (the "Code") and having executed a "Declaration of Extended Rental Housing Commitment" pursuant to the allocation with the Indiana Housing and Community Development Authority, the housing credit agency for the State of Indiana (the "Authority"); and/or

HOME Investment Partnerships Program funds (the "HOME funds") pursuant to Title II of the Cranston-Gonzalez National Affordable Housing Act, as amended, (the "Act") through the Indiana Housing and Community Development Authority, the HOME administration agency for the State of Indiana (the "IHCDA"); and/or

Community Development Block Grant funds (CDBG) pursuant to Title I of the Housing and Community Development Act of 1974, as amended, 42 U.S.C. 5301, through the Indiana Housing and Community Development Authority, the CDBG housing administration agency for the State of Indiana; and/or

Low Income Housing Development Fund (formerly Trust Fund) as created and authorized by Indiana Code 5-20-4-1 et seq and administered by the Indiana Housing and Community Development Authority, a corporate body politic of the State of Indiana.

For the purpose of purchasing, constructing, and/or improving a certain low-income rental housing development (the "Development), and pursuant to the monitoring requirements of the Code and all regulations promulgated thereunder, as applicable, and of the Authority and the requirements of the Act and all regulations promulgated thereunder, as applicable, does hereby certify as follows:

The Development consists of the following:

Total Units in Development:		**Number of Permanent Supportive Housing Units:**	
Total RHTC Units:		**Number of Homeless Units:**	
Total HOME-assisted Units:		**Number of Elderly Units:**	
Total HOME-eligible Units:		**Number of Special Needs Units:**	
Total CDBG Units:		**Number of Employee Units:**	
Total CDBG-D Units:		**Number of Vacant Units as of 12/31:**	
Total Development Fund Units:		**Number of Market Units:**	

The Development consists of the following ADA Accessible Units:

Efficiency	1-bedroom	2-bedroom	3-bedroom	4-bedroom	5-bedroom	6-bedroom

☐ Development is a RHTC only development - Exhibit A is attached.

☐ Development is a Combined RHTC with HOME, CDBG, CDBG-D, and/or Development Fund development - Exhibit B is attached.

☐ Development is a HOME, CDBG, CDBG-D, and/or Development Fund development - Exhibit C is attached.

(i) The undersigned has received an annual income certification form from each tenant occupying a RHTC, HOME-assisted, and/or HOME-eligible, CDBG, CDBG-D, or Development Fund unit in the Development and sufficient documentation to support that certification; and/or

(ii) Each RHTC, HOME-assisted and/or HOME-eligible, CDBG, CDBG-D, or Development Fund unit in the Development was restricted as provided under the Code and/or Act.

(iii) The Development is in continuing compliance with all promises, covenants, set-asides and agreed upon restrictions as set forth in the application for Credits, HOME, CDBG, CDBG-D, or Development Fund funds for the Development.

(iv) All units in the Development are for use by the general public and are used on a non-transient basis (except for units located in a building whose primary purpose is transitional housing for homeless as allowed for in the Code or the HOME, CDBG, CDBG-D, or Development Fund program, whichever program is applicable).

Also, the owner has not refused to lease a unit in the development to a Section 8 applicant because the applicant holds a Section 8 voucher or certificate.

Additionally, please mark the appropriate certification:

☐ No finding of discrimination under the Fair Housing Act, 42 U.S.C. 3501-3619, has occurred for this development. A finding of discrimination includes an adverse final decision by the Secretary of Housing and Urban Development (HUD), 24 CFR 180.680, and adverse final decision by a substantially equivalent state of local Fair Housing agency, 42 U.S.C. 3616a(a)(1), or an adverse judgment from a Federal court.

☐ A finding of discrimination under the Fair Housing Act, 42 U.S.C. 3601-3619, has occurred & the owner has **attached documentation of the findings to this certification.**

(v) Please mark the appropriate certification(s):

☐ All units in the Development are suitable for occupancy, taking into account all federal, state, and local health, safety, and building (or other habitability standards), and the state or local unit responsible for making building code inspections did not issue a report of a violation for any building or low-income unit in the Development.

☐ The state or local unit responsible for making building code inspections issued a report of a violation for any building or low-income unit in the Development during the certification year. **Documentation of the violations is attached to this certification.**

(vi) Please mark the appropriate certification::

☐ The Development includes less than five (5) RHTC, HOME-assisted, or HOME-eligible rental units under common ownership or developed by a single entity; therefore, IHCDA's HOME and/or Affirmative Marketing Procedures are not applicable.

☐ The Development includes five (5) or more RHTC, HOME-assisted, or HOME-eligible rental units under common ownership or developed by a single entity; subsequently, the owner utilized the following affirmative marketing practices in soliciting renters, determining their eligibility, and concluding all transactions:

(1) Advertising of vacant units includes the Equal Housing Opportunity logo or slogan or both. (Advertising media may include, but is not limited to, newspapers, radio, television, brochures, leaflets, or an on-site sign);

(2) Applications for vacant units are solicited from persons in the housing market who are least likely to apply for the RHTC, HOME assisted, and/or HOME-eligible housing without the benefit of special outreach efforts. (In general, persons who are not of the race/ethnicity of the residents of the neighborhood in which the RHTC and/or HOME-assisted unit is located shall be considered those least likely to apply);

(3) The local housing market has been analyzed to identify those persons who are least likely to apply and then specific marketing techniques have been formulated to reach the persons identified. (Resources for this targeted outreach may include, but are not limited to, community organizations, places of worship, employment centers, fair housing groups, housing counseling agencies, and social service centers);

(4) The housing market has been re-assessed at least annually to determine persons who are least likely to apply for housing;

(5) Each year, the marketing techniques utilized in the previous year have been analyzed to determine effectiveness in reaching those persons identified. Based on the annual analysis, marketing efforts have been modified to increase participation from those persons identified as being least likely to apply for housing.

(6) A file documenting all marketing efforts (i.e., copies of newspaper ads, memos of phone calls, copies of letters, etc.) is being maintained throughout the Development's affordability period, compliance period, and/or extended use period and is available for inspection by IHCDA, HUD, and/or the Internal Revenue Service (IRS).

(7) Each beneficiary of the HOME assistance has been given a fair housing brochure. Documentation of each beneficiary's receipt of the brochure is being maintained throughout the affordability period and is available for inspection by IHCDA or HUD.

(8) A listing is being maintained of all residents of RHTC, HOME-assisted, and/or HOME-eligible units from the time of application submittal through the end of the affordability period, compliance period, and/or extended use period. This list includes but is not limited to each resident's age, race, sex, and income and is available for inspection by IHCDA, HUD or the IRS.

(vii) Please mark the appropriate certification:

☐ No RHTC, HOME-assisted and/or HOME-eligible, CDBG, CDBG-D, or Development Fund units in the Development became vacant during the applicable reporting period.

☐ One or more RHTC, floating HOME-assisted and/or floating HOME-eligible CDBG, CDBG-D, or Development Fund units in the Development became vacant during the applicable reporting period. Reasonable efforts were or are being made to rent such units or the next available (if HOME units are floating) unit or units of comparable size in the building to tenants having qualifying income.

(viii) The Development has at least on (1) smoke detector on each level of the rental dwelling unit.

(ix) **For RHTC with HOME, CDBG, CDBG-D, and Development Fund Developments,** the lease between the tenant and the owner of the HOME-assisted or HOME-eligible rental housing is not for less than one year, unless by mutual agreement between the tenant and the owner.

(x) **For RHTC Developments only,** the initial lease between the tenant and the owner of the RHTC rental housing is not for less than six months, unless the building's primary use is transitional housing or the unit is single room occupancy.

(xi) **For HOME, CDBG, CDBG-D, and Development Fund Developments only,** the lease between the tenant and the owner of the HOME-assisted or HOME-eligible rental housing is not for less than one year, unless by mutual agreement between the tenant and the owner.

(xii) **For HOME, CDBG, CDBG-D, and Development Fund Developments only,** the lease between the tenant and the owner of the HOME-assisted or HOME-eligible rental housing does not contain any of the prohibited lease terms as set forth in 24 CFR 92.253(b).

(xiii) **For HOME, CDBG, CDBG-D, and Development Fund Developments only,** the owner of the HOME-assisted or HOME-eligible rental housing has adopted written tenant selection policies in accordance with 24 CFR 92.253(d).

(xiv) **For HOME, CDBG, CDBG-D, and Development Fund Developments only,** the owner has not terminated the tenancy or refused to renew the lease of a tenant of HOME-assisted or HOME-eligible rental units except for serious or repeated violations of the terms and conditions of the lease; for violation of applicable Federal, State, or local law; for completion of the tenancy period for transitional housing; or for other good cause.

(xv) **For HOME, CDBG, CDBG-D, and Development Fund Developments only,** when terminating or refusing to renew tenancy, the owner has served written notice upon the tenant specifying the grounds for the action at least 30 days before the termination of the tenancy.

(xvi) **HOME, CDBG, CDBG-D, and Development Fund only,** Fair housing, equal employment opportunity, and lead-based paint informational posters, as required by IHCDA, are conspicuously displayed at the Development. Additionally, each beneficiary of the CDBG and HOME assistance has been given lead-based paint and fair housing brochures as required by IHCDA. Documentation of each beneficiary's receipt of the brochures is being maintained throughout the affordability period and is available for inspection by IHCDA and/or HUD.

(xvii) The Development is otherwise in compliance with the Code and/or the Act, including any IRS and/or HUD Regulations pursuant thereto, and applicable laws, rules, regulations, and ordinances.

(xv) The Development is in continuing compliance with the Declaration of Extended Rental Housing Commitment applicable to the Development and filed in the office of the Recorder of the applicable County in the State of Indiana; and

(xvi) There have been no changes in the ownership entity or if there have been, IHCDA has been provided with all details and all necessary documentation.

Each person signing on behalf of the undersigned entity certifies that (a) he/she, personally, is fully empowered and duly authorized by any and all necessary action or consent required under any applicable articles of incorporation, bylaws, partnership agreement, articles of organization, operating agreement or other agreement applicable to the owner to execute and deliver this certification for and on behalf of the undersigned; (b) the undersigned entity has full capacity, power and authority to enter into and execute this certification for and on behalf of the owner; (c) this certification has been duly authorized, executed and delivered; (d) this certification and any attachments, including the Development Compliance Tenant Report (may be submitted through IHCDA's automated compliance reporting system) are true, accurate, complete, and made under penalty of perjury.

The undersigned has executed this certification this _____ day or _____, 20_____.

_____
(Printed/typed name Chief Executive Officer)

By: _____
(Signature of Chief Executive Officer

Title: _____
(Title of the Chief Executive Officer within the Ownership entity)

Attest:

_____

STATE OF INDIANA)
) SS:
COUNTY OF_____)

Before me, a Notary Public in a for said County and State, appeared _____ the _____ of _____, and who being duly sworn acknowledged the execution of the foregoing Certification of Compliance as his/her free and voluntary act and deed.

Witness my hand and Notarial Seal the _____day of _____ 20___.

My Commission expires:

_____
Notary Public

_____

My County of Residence

_____
Printed Name

Indiana Housing and Community Development Authority

Exhibit A
RHTC Certification of Compliance

Year of Owner Certification _____

(i) Meets the Minimum Set Aside requirements of the (mark appropriate box): ☐ 20/50 test; ☐ 40/60 test; or ☐ 15/40 test under Section 42 of the Code. This election should be the same as that which is elected by the owner set forth on IRS Form 8609.

(ii) ☐ There was no change in the applicable fraction as defined in the Code of any building in the Development; or ☐ there was a change, in the applicable fraction and a description of that change is attached to this certification.

(iii) Please mark the appropriate certification(s) regarding eligible basis:

☐ There has been no change in the eligible basis of any building in the Development (as defined by the Code);

☐ There has been a change in the eligible basis of the building in the Development (as defined by the Code). **Documentation setting forth the nature and amount of such a change (i.e. a common area has become commercial space, or a fee is now charged for a tenant facility formerly provided without charge) is attached to this certification.**

☐ All tenant facilities included in the eligible basis of the Development under the Code, such as swimming pools, recreational facilities, and parking areas, are provided on a comparable basis without charge to all tenants of the Development.

(iv) Please mark the appropriate certification regarding the Available Unit / 140% Rule:

☐ No tenant of any RHTC unit experienced an increase in income above the limit allowed in Section 42(g)(2)(D)(ii).

☐ Income of tenants of an RHTC unit in the Development increased above the limit allowed in Section 42(g)(2)(D)(ii) of the Code, and the next available unit of comparable or smaller size in the Development was or will be rented to tenants having a qualifying income.

☐ Project is 100% tax credit and not subject to annual recertification of income.

Indiana Housing and Community Development Authority

Exhibit B

Combined RHTC with HOME, CDBG, CDBG-D, or Development Fund Certification of Compliance

Year of Owner Certification _____

Please mark the appropriate certification for each funding source

Rental Housing Tax Credits:

(i) Meets the Minimum Set Aside requirements of the (mark appropriate box): ☐ 20/50 test; ☐ 40/60 test; or ☐ 15/40 test under Section 42 of the Code. This election should be the same as that which is elected by the owner set forth on IRS Form 8609.

(ii) ☐ There was no change in the applicable fraction as defined in the Code of any building in the Development; or ☐ there was a change, in the applicable fraction and a description of that change is attached to this certification.

(iii) Please mark the appropriate certification(s) regarding eligible basis:

☐ There has been no change in the eligible basis of any building in the Development (as defined by the Code);

☐ There has been a change in the eligible basis of the building in the Development (as defined by the Code). **Documentation setting forth the nature and amount of such a change (i.e. a common area has become commercial space, or a fee is now charged for a tenant facility formerly provided without charge) is attached to this certification.**

☐ All tenant facilities included in the eligible basis of the Development under the Code, such as swimming pools, recreational facilities, and parking areas, are provided on a comparable basis without charge to all tenants of the Development.

(iv) Please mark the appropriate certification regarding the Available Unit / 140% Rule.

☐ No household of any RHTC unit experienced an increase in income above the limit allowed in Section 42(g)(2)(D)(ii).

☐ Income of household of an RHTC unit in the Development increased above the limit allowed in Section 42(g)(2)(D)(ii) of the Code, and the next available unit of comparable or smaller size in the Development was or will be rented to a household having a qualifying income.

☐ Project is 100% tax credit and not subject to annual recertification of income.

HOME, CDBG, CDBG-D, and Development Fund:

(v) ☐ No household of any assisted unit in the Development has experienced an increase in income above Sixty percent (60%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period.

☐ No household of any assisted unit in the Development have experienced an increase in income above Eighty percent (80%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period.

☐ One or more households occupying assisted units in the Development have experienced an increase in income above Eighty percent (80%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period. Such units are in temporary noncompliance with program requirements. Household is paying 30% of adjusted household income in rent, not to exceed market rent for a comparable unit in the area. When the over-income household vacates the unit, the unit will once again be occupied by an income-qualified household.

Indiana Housing and Community Development Authority

Exhibit C
HOME, CDBG, CDBG-D, and/or Development Fund Certification of Compliance

Year of Owner Certification _____

Please mark the appropriate certification:

HOME, CDBG, CDBG-D, and Development Fund:

(i) ☐ No household of any assisted unit in the Development has experienced an increase in income above Sixty percent (60%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period.

☐ No household of any assisted unit in the Development have experienced an increase in income above Eighty percent (80%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period.

☐ One or more households occupying assisted units in the Development have experienced an increase in income above Eighty percent (80%) of Area Median Income, as defined by the U.S. Department of Housing and Urban Development, during the applicable reporting period. Such units are in temporary noncompliance with program requirements. Household is paying 30% of adjusted household income in rent, not to exceed market rent for a comparable unit in the area. When the over-income household vacates the unit, the unit will once again be occupied by an income-qualified household.

Indiana Housing and Community Development Authority

Exhibit D
Asset Management

Year of Owner Certification _____

Please provide the following information effective as of December 31st of the certification year:

(i) Physical vacancy rate of development _____

(ii) Amount in operating reserves _____

(iii) Amount in replacement reserves _____

(iv) Debt coverage ratio _____
(net operating income ÷ total debt service)

(v) Total accounts payable _____

(vi) Total accounts receivable _____

Please mark the appropriate certification:

(vii) Property Taxes

☐ Property taxes are paid up-to-date.

☐ Property taxes are not paid up-to-date. A narrative explanation is attached.

(viii) Property Insurance

☐ Property insurance is up-to-date.

☐ Property insurance is not paid up-to-date or there is no property insurance coverage. A narrative explanation is attached.

(ix) Changes in Ownership

☐ No anticipated change in property ownership over the next twelve months.

☐ There is an anticipated change in property ownership over the next twelve months. The mandatory IHCDA form entitled "Property Ownership Change Form" along with all support documents will be submitted when change is finalized.

(viii) Changes in Management

☐ No anticipated change in property management over the next twelve months.

☐ There is an anticipated change in property management over the next twelve months. The mandatory IHCDA form entitled "Property Management Change Form" will be submitted when change is finalized.

(ix) Status with other funding sources

☐ Development is in good standing with other funding sources, investors, etc.

☐ Development is on a watch-list or considered out of compliance with requirements of other funding sources, investors, etc. A narrative explanation is attached.

(x) Program Noncompliance

☐ Owner/management did not identify any noncompliance for the previous year.

☐ Owner/management identified issues of noncompliance and has made appropriate corrections. A narrative explanation is attached.

☐ Owner/management identified issues of noncompliance, but has not yet made appropriate corrections. A narrative explanation is attached.

Provide any comments on additional financial or noncompliance issues of which you would like to make IHCDA aware. Attach additional documentation as necessary.

-

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Indiana Housing and Community Development Authority

Rental Housing Development and Building Information

Year of Owner Certification _____

Development Information:

BIN or Award #:_____

***If Scattered Site, please supply the office address here and complete scattered site address on next page.**

Development Name: _____

Development Address: _____

Development City/State/Zip: _____

Development Telephone Number: _____

Development County: _____

Property Manager Name: _____

Property Manager E-mail: _____

Has any Building or Address information changed since last submission, ☐ **Yes,** ☐ **No**, If yes please attach a description of changes.

Owner Information:

Development Ownership Entity: _____

Ownership Tax ID Number (TIN): _____ (must coorespond with TIN on IRS Form 8609)

Primary Owner Contact : _____
(must be owner, partner, or member of the partnership)

Owner Address: _____

Owner City/State/Zip: _____

Owner Telephone Number: _____

Owner Fax Number: _____

Owner E-mail: _____

Management Information:

Management Company: _____

Primary Management Contact: _____

Management Address: _____

Management City/State/Zip: _____

Management Telephone Number: _____

Management Fax Number: _____

Management E-mail: _____

Scattered Site Addresses (attach additional page if needed):

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____

8) _____

9) _____

10) _____

11) _____

12) _____

13) _____

14) _____

15) _____

16) _____

17) _____

18) _____

19) _____

20) _____

21) _____

22) _____

23) _____

24) _____

25) _____

Indiana Housing and Community Development Authority

Rental Housing Utilities Form

Development Name: _____

Building Identification Number(s) (BIN):

_____

HOME, CDBG, CDGBD, and/or Development Fund Award #:

_____

1. Utilities

	Gas	Electric	Oil	L.P.	Other	Owner Paid	Tenant Paid
Unit Heat							
Water Heating							
Cooking							
Unit Electric							
Water Service							
Sewer							
Trash Removal							

*Please mark the appropriate boxes.
** If this is a scattered site development, please complete one form for each different mix of utilities.
*** If the development has multiple bedroom units but the utilities are the same for each unit, there is no need to complete multiple forms.

1. Utility Allowance Documentation

The maximum allowable rent calculations include costs to be paid by the tenant for utilities including: heat, lights, water, sewer, oil, gas, or trash removal where applicable. Utilities do not include telephone or cable television.

Utility allowances should be calculated as follows:

1. Rural Development (RD) regulated buildings must use RD approved utility allowances.
2. HUD regulated buildings must use HUD approved utility allowances.
3. HUD and RD buildings must use RD approved utility allowances.
4. Units with Section 8 subsidy through certificates or vouchers must use the Public Housing Authority) PHA Section 8 existing utility allowances for those tenants. Non-Section 8 units must follow number 5 below.
5. All other buildings may use the PHA local utility allowances or local utility company data if it is requested. If local utility company data is obtained, the Owner must use the information, provided it is not a RD or HUD regulated building.
6. Buildings without RD or HUD assistance and units without Section 8 assistance may use an IHCDA Estimate, a HUD Utility Schedule Model, or an Energy Consumption Model.

Utility allowances need to be updated when area median incomes are revised since they are included in the maximum allowable rent calculations. Any changes in the utility allowance impacts the net chargeable rent to the tenant.

When a new utility allowance is used, rents must be recalculated within ninety (90) days of the effective date.

NOTE: This form must be submitted every year with the Owner Certification of Compliance. If information on this form changes during the compliance period of the project, then the owner must submit a revised form. However, documentation supporting the utility allowance used to calculate rent must be submitted every year with the Owner Certification of Compliance to IHCDA.

Indiana Housing and Community Development Authority

Authorized Signatory Form

Only owners, partners, or members of the partnership of RHTC, HOME, CDBG, CDBG-D, and/or Development Fund developments may sign documentation submitted to IHCDA regarding specific developments. This documentation may include final application, IRS form 8609, owner re-certifications, etc.

Below is (are) the authorized signatory (signatories) for the RHTC, HOME, CDBG, CDBG-D, and/or Development Fund development located in _____, IN.

Building Identification Number(s) (BIN):

_____

HOME, CDBG, CDGB-D, and/or Development Fund Award #:

_____

	Name, Title	Signature
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

The undersigned has executed this certification this ____ day of _____, 20_____.

_____

(Printed/typed name Chief Executive Officer)

By: _____

(Signature of Chief Executive Officer

(If more lines are needed, please attach a separate sheet with the name, title, and signature of the owner, partner, or member.)

This form is for IHCDA use only and will be used to verify signatures on documentation submitted to IHCDA.

*Note: If someone other than the owner, partner, or member will be signing the above mentioned documentation, then documentation verifying Power of Attorney or Authorization of Representation must be submitted with this form.

Property Directional Form

Please complete one directional form for each property or single family home.

Building Identification Number(s) (BIN):

_____

HOME, CDBG, CDGBD, and/or Development Fund Award #:

_____

Name of Property: _____ Contact Person at Property: _____

Address of Property: _____

City: _____ County: _____ Phone Number of Property: _____

Please provide written directions from Indianapolis to the above property:

_____

_____

_____

_____

_____

_____

_____

Please provide a simple map to the property according to the directions given above: * Yahoo maps, Google maps, or Map quest directions are acceptable. You must verify the directions are correct.

Any additional directional information can be placed on the back of this form. Thank you for your cooperation.