

HOME ANNUAL CERTIFICATE OF COMPLIANCE

(NOTE: Owner/property managers of HOME-assisted developments which do not have Low-Income Housing Tax Credits must complete and submit this certification along with Schedule II (A) - Low-Income Determination Compliance Report by February 15 of each year.)

The undersigned, as duly authorized representative of the residential property, _____

located at _____

hereby certifies to the Louisiana Housing Finance Agency that to the best of my knowledge, understanding, and belief, the aforementioned property complies with the tenant income restrictions required by the regulatory documents and the applicable HOME program regulations and that the tenant income information attached to this Certificate is true and correct.

Current records supporting this certification are maintained by the development's owner/property manager and will be available for inspection by Agency personnel.

SIGNATURE:

(Owner's Name, printed)

(Date)

(Signature of Owner or Authorized Representative)

(Date)

CONTACT NAME: _____

CONTACT ADDRESS: _____

PHONE: _____ **FAX:** _____ **E-MAIL:** _____

PLEASE INCLUDE DOCUMENTATION AND SOURCE TO SUPPORT UTILITY ALLOWANCE

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.