

HIF/FCF/CBH/HPSTF COMPLIANCE AFFIDAVIT

Project Name:	Project Number:
Property Address:	
Developer Sponsor Name:	
Contact Person:	Title:
Email Address:	Phone Number:

Please make any edits to the information below. For projects with multiple sources of funding check the certification for each funding source.

Total # of Units in Project: ___

HIF CERTIFICATION

Total Number of HIF Units ___

- Number of Extremely Low-Income Units (30% AMI) ___
- Number of Very Low-Income Units (50% or 60% AMI) ___
- Number of Low-Income Units (80% AMI) ___
- Number of Moderate-Market Income Units (\geq 120% AMI) ___

I certify that the number and use of HIF units and their respective affordability meet the project requirements as specified in Section 2 of the HIF Loan Agreement and (if applicable) Sections 2 & 3 and Exhibit C of the Affordable Housing or Land Use Restriction.

FCF CERTIFICATION

Total Number of FCF Units ___

I certify that the number and use of FCF units meet the project requirements as specified in Section 2 of the FCF Loan Agreement and Sections 2 through 4 (and Exhibit C if applicable) of the Affordable Housing or Land Use Restriction.

CBH CERTIFICATION

Total Number of CBH Units ___

I certify that the number and use of CBH units meet the project requirements as specified in Section 2 of the CBH Loan Agreement and Sections 2 & 3 and Exhibit C of the Affordable Housing or Land Use Restriction.

HPSTF CERTIFICATION

Total Number of HPSTF Units ___

- Number of Extremely Low-Income Units (30% AMI) ___
- Number of Very Low-Income Units (50% or 60% AMI) ___
- Number of Low-Income Units (80% AMI) ___
- Number of Moderate-Market Income Units (\geq 120% AMI) ___

I certify that the number and use of HPSTF units and their respective affordability meet the project requirements as specified in the Loan Agreement and the Affordable Housing or Land Use Restriction.

Authorized signature required below. The signatory must be a person authorized by the board of directors to execute documents on behalf of the organization:

Signature

Title

Print Name

Date