

OWNER’S CERTIFICATION OF COMPLIANCE DURING THE EXTENDED USE PERIOD

New Jersey Housing and Mortgage Finance Agency

Certification Dates:	From: January 1, 2019	To: December 31, 2019	
Project Name:		LITC #:	
Project Address:		City:	Zip:
Tax ID# of Ownership Entity:			
Ownership Entity Address:			
Ownership Entity Phone Number:		Fax Number:	
Ownership Entity E-Mail Address:			

The undersigned _____ on behalf of _____ (the “Owner”), hereby certifies that:

1. The required applicable fraction has been met for each building by leasing units to individuals or families whose income is 50% or 60%, as irrevocably elected by the owner at the time of allocation, or less of the area median gross income (including adjustments for family size) as determined in accordance with Section 42 of the Internal Revenue Code (Code).

YES NO

If “NO”, list the applicable fraction for each building in the project for the certification year on page 3.

2. The owner has received an “Annual” Tenant Income Certification from each low-income resident and documentation to support that certification and/or an “Initial” Tenant Income Certification from each low-income resident, and documentation to support the certification at initial occupancy.

YES NO

If “No” please provide explanation on page 3.

(If the “Annual” Tenant Income Certification was completed but not signed by the tenant prior to vacating the unit, please attach a copy of the TIC with backup documentation, recertification notices, Notice to Cease/Quit and provide explanation on page 3. If the tenant failed to recertify, please attach court documents and provide explanation on page 3.)

3. Each low-income unit in the project has met the required rent restriction(s):

YES NO

4. All low-income units in the project are and have been available for use by the general public:

YES NO

5. No finding of discrimination under the Fair Housing Act, 42 U.S.C. 3601-3619, has occurred for this project. A finding of discrimination includes an adverse final decision by the Secretary of Housing and Urban Development (HUD), 24 CFR 180.680, an adverse final decision by a substantially equivalent state or local fair housing agency 42 U.S.C. 3616a(a)(1), or an adverse judgment from a federal court.

NO FINDINGS FINDINGS

6. Each Building in the project is and has been suitable for occupancy, taking into account local health, safety, and building codes (or other habitability standards), and the state or local government unit responsible for making building code inspections did not issue a report of a violation for any building or low income unit in the project.

YES NO

If “NO”, state nature of violation on page 3 and attach a copy of the violation report and any documentation of correction.

7. All tenant facilities included in the eligible basis under Section 42(d) of the Code of any building in the project, such as swimming pools, other recreational facilities, parking areas, washer/dryer hookups, and appliances were provided on a comparable basis to all tenants in the buildings:
- YES NO
8. If a low-income unit in the project has been vacant during the year, reasonable attempts were or are being made to rent that unit to tenants having a qualifying income before any units were or will be rented to tenants not having qualifying income:
- YES NO
9. If the income of tenants of a low-income unit in any building increased above 140% of the applicable income limit, the next available unit in the building was or will be rented to residents having a qualifying income:
- YES NO
10. An extended low-income housing commitment as described in IRS Section 42(h)(6) was in effect, including the requirement under Section 42(h)(6)(B)(iv) that an owner cannot refuse to lease a unit in the project to an applicant because the applicant holds a voucher or certificate or eligibility under Section 8 of the United States Housing Act of 1937, 42 U.S.C. 1437s.
- YES NO N/A
11. Owner has not refused to lease a unit to an applicant based solely on their status as a holder of Section 8 voucher and the project otherwise meets the provisions, including any special provisions, as outlined in the extended low-income housing commitment.
- YES NO
12. The owner received its credit allocation from the portion of the state ceiling set-aside for a project involving “qualified non-profit organizations” under Section 42(h)(5) of the Code and its non-profit entity materially participated in the operation of the development within the meaning of Section 469(h) of the Code.
- YES NO
13. There has been no change in the ownership or management of the project:
- NO CHANGE CHANGE

If “Change”, complete page 3 detailing the changes in ownership or management of the project.

14. The owner has notified each applicant and tenant, via Form HUD – 5380, of their rights under the Violence Against Women Act, Pub. L. No. 103-322, tit IV, 108 Stat. 1902 (1994), VAWA 2005, Pub. L. No. 109-162, 4402, 119 Stat. 2960, 3041-49 (2006), VAWA 2013, Pub. L. 113-4, 601, 127, Stat. 54 (2013) and if applicable VAWA 2013: Implementation in HUD Housing programs, 81 Fed. Reg. 80, 724 (Nov. 16, 2016) “HUD VAWA Final Rule” and distributed Form HUD-5382, VAWA self-certification form.
- YES NO
15. The owner has not increased the rent charged to each existing tenant (excluding any rental assistance) by more than 5.00 percent annually, including due to changes in utility allowance calculations.
- YES NO
16. The on-site Property Management office has office hours of at least 20 hours every week.
- YES NO
17. The owner has registered and posted the property on our Housing Resource Center (<https://www.nj.gov/njhrc/>) and actively updated property information.
- YES NO

Note: Failure to complete this form in its entirety will result in noncompliance with program requirements. In addition, any individual other than an owner or general partner of the project is not permitted to sign this form, unless permitted by the state agency.

The project is otherwise in compliance with the Code, including any Treasury Regulations, the applicable State Allocation Plan, and all other applicable laws, rules and regulations. This Certification and any attachments are made UNDER PENALTY OF PERJURY.

(Ownership Entity)

(Signature)

(Title)

(Date)

PLEASE EXPLAIN ANY ITEMS THAT WERE ANSWERED “NO”, “CHANGE”, “N/A” OR “FINDING” ON QUESTIONS 1-17. No Explanation required for Question #12.

Question #	Explanation

CHANGES IN OWNERSHIP OR MANAGMENT
 (to be completed ONLY if “CHANGE” marked for question 13 above)

TRANSFER OF OWNERSHIP

Date of Change:	
Taxpayer ID Number:	
Legal Owner Name:	
General Partnership:	
Status of Partnership (LLC, etc):	

CHANGE IN OWNER CONTACT

Date of Change:	
Owner Contact:	
Owner Contact Phone:	
Owner Contact Fax:	
Owner Contact Email:	

CHANGE IN MANAGEMENT CONTACT

Date of Change:	
Management Co. Name:	
Management Address:	
Management City, State, Zip:	
Management Contact:	
Management Contact Phone:	
Management Contact Fax:	
Management Contact Email:	