OWNER'S CERTIFICATION OF COMPLIANCE DURING THE EXTENDED USE PERIOD

New Jersey Housing and Mortgage Finance Agency

Certification Dates:	From: January 1, 2022	To: December 31, 202	2
Project Name:	January 1, 2022	LITC #:	
Project Address:		City:	Zip:
		City.	zip.
Tax ID# of Ownership Entity:			
Ownership Entity			I
Address:			
Ownership Entity Phone Number:		Fax Number:	
Ownership Entity E-Mail Address:			
The undersignedhereby certifies that:		on behalf of	(the "Owner")
1. The required ap 50% or 60%, a	s irrevocably elected by the ow		to individuals or families whose income is s of the area median gross income (including Internal Revenue Code (Code).
	\square YES	□ NO	
If "NO", list the	ne applicable fraction for each	h building in the project for the	certification year on page 4.
support that cer		nant Income Certification from each	-income resident and documentation to ch low-income resident, and documentation
	If "No" please provide expla	nation on page 4.	
please attach	a copy of the TIC with backt	up documentation, recertification	nd by the tenant prior to vacating the unit notices, Notice to Cease/Quit and providuments and provide explanation on page 4.
3. Each low-incor	ne unit in the project has met th	•	
	\square YES	□ NO	
	If "No" please provide expla	anation on page 4.	
4. All low-income	e units in the project are and ha	ve been available for use by the ge	neral public:
	\square YES	□ NO	
	If "No" please provide expla	anation on page 4.	
discrimination 180.680, an ad	includes an adverse final decisi	on by the Secretary of Housing an	has occurred for this project. A finding of d Urban Development (HUD), 24 CFR housing agency 42 U.S.C. 3616a(a)(1), or
	☐ NO FINDINGS	\Box FINDINGS	
codes (or other	habitability standards), and the		account local health, safety, and building ponsible for making building code nit in the project.
	\square YES	\square NO	
If "NO", state correction.	nature of violation on page 4	and attach a copy of the violation	n report and any documentation of

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7.	<u> </u>		reas, washer/dryer hookups, and appliances were provided on a
	□ YES		l NO
	If "No" please provide explanation	on	n page 4.
8.			uring the year, reasonable attempts were or are being made to rent e any units were or will be rented to tenants not having qualifying
	□ YES		l NO
	If "No" please provide explanation	on	n page 4.
9.	If the income of tenants of a low-income unit in any baravailable unit in the building was or will be rented to		ilding increased above 140% of the applicable income limit, the next sidents having a qualifying income:
	□ YES		l NO
	If "No" please provide explanation	on	n page 4.
10.	under Section 42(h)(6)(B)(iv) that an owner cannot re	fuse	ibed in IRS Section 42(h)(6) was in effect, including the requirement se to lease a unit in the project to an applicant because the applicant n 8 of the United States Housing Act of 1937, 42 U.S.C. 1437s.
	□ YES		l NO □ N/A
	If "No" please provide explanation		
11.			sed solely on their status as a holder of Section 8 voucher and the becial provisions, as outlined in the extended low-income housing
	\square YES		1 NO
	If "No" please provide explanation	on	n page 4.
12.		ode	n of the state ceiling set-aside for a project involving "qualified non- e and its non-profit entity materially participated in the operation of of the Code.
	□ YES		l NO
13.	There has been no change in the ownership or manage	eme	nent of the project:
	□ NO CHANGE		l CHANGE
	If "Change", complete page 4 detailing the change	s in	n ownership or management of the project.
14.	4. 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	1	NO
	If "No" please provide explanation o	n pa	<u>page 4</u> .
15.	The owner has not increased the rent charged to each percent annually, including due to changes in utility a		existing tenant (excluding any rental assistance) by more than 5.00 by by more calculations.
	□ YES		1NO
	If "No" please provide explanation o	n na	nage 4.

16.	The on-site Property Management office	ce has office hours of at least 20 h	ours every week.	
	□ YES	□ NO		
	If "No" please provide e	xplanation on page 4.		
17.	The owner has registered and posted th and actively updated property informa		rce Center (https://www.nj.gov/njhrc/)	
	□ YES	□ NO		
	If "No" please provide e	xplanation on page 4.		
with pro		ndividual other than an owner o	<u>22 expiration date</u> , will result in noncomplor or general partner of the project is not pern	
			lations, the applicable State Allocation Plan, and the same made UNDER PENALTY OF PERJU	
			(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:	