DEVELOPMENT_		
	HMFA #	

## STATE OF NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY

## MANAGING AGENT STATEMENT OF DISCLOSURE

I,	, residing at	
(name)		
of	(title)	, the proposed
Managing A	(name of entity) Agent of the New Jersey Housing and Mortg	age Finance Agency development known
as		(hereinafter referred to as the
-	ify that, to the best of my knowledge;	, New Jersey,
1.	management entity, would have in the re	that I, or any individual associated with the ferenced development is that of Managing e. interest or past interest in real property,

2. I, or any individual associated with the management entity, haver no interest financial or otherwise, in any firm or individual that supplies, has supplied, or intends to supply goods or services to the referenced development, except as hereinafter disclosed;

- 3. Should I, or any other individual associated with the management entity, acquire any interest other than as disclosed herein, notice of such acquisition will be made known to the Owners of the referenced development and the Director of Management of the New Jersey Housing and Mortgage Finance Agency immediately.
- 4. With respect to any fee earned or to be earned by the undersigned for services as Managing Agent, it is further certified that neither I, nor any individual associated with the management entity have/has agreed, directly or indirectly, to give to any other firm or individual part of said fee as a rebate, refund, or commission of any kind or nature, except as hereinafter disclosed;

## **CERTIFICATION**

I hereby represent and certify that the foregoing information to the best of my knowledge is true and complete, and if not true and complete, I recognize that I am subject to criminal prosecution under N.J.S.A. 2c: 28-2 and also that the New Jersey Housing and Mortgage Finance, at its option, may declare all contracts associated with referenced development of which I am a party, void and unenforceable.

SIGNATURE	 	 
NAME (print)		 

	VERIFICATIONS	
Individual Party		
STATE OF NEW JERSEY ) )SS:		
COUNTY OF	)	
		, BEING
DULY SWORN SAYS:		
thereof and know the same to be to be alleged on information and		scept as to the matters therein stated believe them to be true.
Sworn to before me this	day	
of	, 20	
Notary Public		
Officer of Corporate Party		
STATE OF NEW JERSEY ) )SS:		
COUNTY OF	)	
		DEING

DATE

**DULY SWORN SAYS:** 

I am the \_\_\_\_\_ of \_\_\_\_ and authorized to do business in the State of New Jersey. I have read the foregoing Managing Agent Statement of Disclosure and know it to be true to my own knowledge, except as to the matters herein stated to be alleged on information and belief, and that as to those matters, I believe it to be true.

Sworn to before me this _	(Title) day	
of	, 20	
Notary Public		