



**AFFORDABLE HOUSING ASSISTANCE PROGRAM**

**AHAP-355**

**OWNER'S CERTIFICATE OF CONTINUING COMPLIANCE**

TO: Missouri Housing Development Commission:

Tax Credit Compliance; 505 N 7<sup>th</sup> St., Suite 2000, St. Louis, MO 63101

<b>Certification Dates</b>	<b>From:</b>	<b>To:</b>		
<b>Project Name</b>			<b>Project AHAP No:</b>	
<b>Project Address</b>			<b>City:</b>	<b>Zip:</b>
<b>Owner Tax ID #</b>				

The undersigned \_\_\_\_\_ on

behalf of \_\_\_\_\_ hereby certifies that:

1. The project meets the requirements of:

(a) One hundred percent (100%) of the AHAP-assisted units were rented to persons whose income is fifty percent (50%) or less of the median income, as defined in the Act and Regulations, adjusted for family size:

**YES**  **NO**

(b) Gross unit rent(s) did not exceed thirty percent (30%) of the maximum eligible household income of the AHAP-assisted Tenant as defined in the Act and Regulations:

**YES**  **NO**

2. The Owner has received an annual income certification and supporting documentation, and a unit certification

from each AHAP-assisted Tenant:

**YES**  **NO**

3. Each AHAP-assisted unit in the Development was rent restricted under the Act and Regulations:

**YES**  **NO**

4. All units in the Development were for use by the general public and were used on a non-transient basis:

**YES**  **NO**

5. Each building in the Development was suitable for occupancy, taking into account local health, safety and building codes:

**YES**  **NO**

6. Has the state or local government unit responsible for making building code inspections issued a report of a violation for any building(s) or AHAP-assisted unit(s) in the project:

**YES**  **NO**

If "Yes", state nature of violation in a memo attached as "Exhibit A" and attach a copy of the violation reported and any documentation of correction.



7. If an AHAP-assisted unit in the Development became vacant during the year, was the next AHAP designated unit rented to an income qualified AHAP tenant:

YES  NO

8. The rent collected during the period of this certification for the AHAP unit(s) was either approved by Missouri Housing Development Commission during the application period or approved as a result of a rent increase request from the Owner per the provisions of the declaration of land use restriction covenants for AHAP tax credits which was filed of record in the County Recorder's office for the referenced Development.

YES  NO

9. There has been no change in the ownership or management of the project during the current year:

NO CHANGE  CHANGE

If "Change", list the new changes in ownership or management and contact information of the project.

10. How many units were created through AHAP-related donations? \_\_\_\_\_

11. The owner has complied with the Violence Against Women Act (VAWA), which provides protections for residents and applicants who are victims of domestic violence, dating violence or stalking, and any other situation or incidence mandated by VAWA. Compliance requirements mandated include, but are not limited to honoring civil protection orders, eviction protection and bifurcation of lease when necessary.

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 Land Use Restriction Agreement and all other applicable laws, rules and regulations. This Certification and any attachments are made UNDER PENALTY OF PERJURY.

By: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_  
(Ownership Entity)

STATE OF MISSOURI  
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_.

My commission expires \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(SEAL)