MISSOURI HOUSING DEVELOPMENT COMMISSION

AHAP ANNUAL OCCUPANCY REPORT

Report Covering Period  to

Project Number  Owner Name

Project Name  Owner Address

Project Address

Mgmt. Agent

County  Phone Number

Total Number of Units  Mgmt. Tax ID #

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| Building  ID Number | Unit  No | Unit Sq  Ft | # Bdrms | Move  In  Date | Move  Out  Date | Head of  Household  Social  Security  Number | Head of  Household  Full Name | Date of  Last  Cert | Initial  Cert  Y  or  N | Race/Ethnicity \* | Age Head of Hshld  DOB | Gross Annual Income at  **Recert** | Gross Annual Income at  **Move-in** | Monthly  Tenant Paid  Rent | Amount of  Rental Subsidy | Util  Allow | **Rent**  **Assist**  **Type**  **PBA**  **TBA\*\*** | # in Hshld  at Recrt |
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