MaineHousing Rent Restricted Multifamily Programs
OWNER CERTIFICATION OF OCCUPANCY

Part I

Project Information	**Unit Mix**
Project Name ________________	
Project Number ________________	Rent Restricted Mix
Address ________________	0BR________ 1BR________ 2BR________
City ________________	3BR________ 4BR________ Other________
County ________________	
Placed in Service Date ________________	Market Unit Mix
	0BR________ 1BR________ 2BR________
	3BR________ 4BR________ Other________

Part II

Owner Information	**Manager Information**
Owner Name________________	Name________________
Address________________	Address________________
City________________	City________________
Telephone No.________ Fax________	Telephone No.________ Fax________
Email________________	Email________________

Part III

Total # of Rent Restricted units in property set aside for tenants @ **80%** of median income ________

Total # of Rent Restricted units in property set aside for tenants @ **60%** of median income ________

Total # of Rent Restricted units in property set aside for tenants @ **50%** of median income ________

Total # of Rent Restricted units in property set aside for tenants @ **40%** of median income ________

Total # of Rent Restricted units in property set aside for tenants @ **30%** of median income ________Other Units________

Total # of **market rate** units in property ________

TOTAL UNITS IN MaineHousing-FINANCED PROPERTY ________

On the basis of the Tenant Income Certification completed for each low-income tenant and attached to this or to prior owner certifications, I CERTIFY THAT, as of ____________ (date):

1) I am maintaining occupancy in units at the above address by households whose income was at or below the income levels as indicated above; and
2) all units in the property, on a continuous basis, were rented or available on a non-transient basis for rental to members of the General Public; and
3) Each building and all FedHome (HOME) assisted units are suitable for occupancy, taking into account State and local health, safety, and other applicable codes, ordinances, and requirements, and the ongoing property standards established by the participating jurisdiction (MaineHousing) to meet the requirements of 24 CFR, Part 92, HOME Investment Partnership Program, Section 92.251; and
4) Each building and all Housing Trust Fund (HTF) assisted units are suitable for occupancy, taking into account State and local health, safety, and other applicable codes, ordinances, and requirements, and the ongoing property standards established by MaineHousing to meet the requirements of 24 CFR, Part 93, Housing Trust Fund, Interim Rule, Section 93.301.
5) Each building and all HOME Investment Partnerships American Rescue Plan (HOME-ARP) assisted units are suitable for occupancy, taking into account State and local health, safety, and other applicable codes, ordinances, and requirements, and the ongoing property standards established by the participating jurisdiction (MaineHousing) to meet the requirements of 24 CFR, Part 92, HOME Investment Partnership Program, Section 92.251

Attached is a COMPLETE LIST of all tenants occupying units in this project as of the date of this Certification and corresponding income (optional for non-low income tenants).

I am aware that all information obtained from the tenants is confidential. No information will be released to anyone but MaineHousing unless prior written permission has been obtained from the tenant.

Date ____________________________ Owner ____________________________________

List of Tenants and Income

Place a √ if a Sec 8 Holder	Place an F if FedHome Unit	Apt No	# of BR	Total #Of Persons In Household	Tenant Name	Move-In Dates	Gross Annual Income	Indicate Income Targeting per FAA (30, 40, 50, 60, 80%) or Market?	Tenant Rent Amount	Section 8 Subsidy Amount	Utility Allowance Amount	Gross Rent

Instructions for completing Owner Certification of Occupancy

Owners of property financed under the MaineHousing programs must meet certain rent and income restrictions during the qualified project period as defined in the Financial Assistance Agreement (FAA) or Declaration of Covenants. In order to monitor this, tenant income certification forms are required.

MaineHousing requires yearly third party verifications of income supported by documentation for all applicants applying for rent-restricted units for all funding sources except FedHome funds. If a project has FedHome funds the project will need to obtain third party verification at initial certification with five years of self-certification and on the sixth year full verification.

The FAA states the number of rent-restricted units, which must meet the low-income eligibility requirement for the qualified project period. The qualified project period is the period of time that the owner must maintain the rent-restricted units.

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Part One – Project Information

Complete project general information. The county line is to be completed with the county you are using to calculate the income eligibility and rent levels. Placed in Service Date (Tax Credit projects only) is the date that the project started its' compliance period.

Unit Mix

List in the appropriate box how many rent restricted units and bedroom sizes are located in the building. Complete the Market Unit Mix with the same information if the project contains market units. The total number in both sections should equal the number of units in the project.

Part Two – Owner/Manager Information

Please complete with the appropriate information requested.

Part Three – Rent-Restricted Unit Information

Place number of units under the appropriate percentage of area median income.

List how many market units in the project.

Total – number of rent-restricted units plus market units.

Certification Date – This is the month, day, year that the report is representing.

Signature – The owner or owner's representative must sign.

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Column 1 Enter a ✓ (check mark) in this box if the tenant receives a Section 8 voucher

Column 2 Place an "F" in this column if your project received FedHome funds and only if you are claiming this unit as a FedHome unit

Column 3 Enter the apartment numbers

Column 4 Enter the number of bedrooms in the unit

Column 5 Enter the number of family members in the household

Column 6 Enter tenant's names

Column 7 Enter move-in date

Column 8 Enter gross annual income amount. If the tenant is a new move-in list income at the time of move-in. If tenant is existing list current income.

Column 9 Enter income targeting. If a market unit project only needs to indicate market and do not need to provide income or rent information.

Column 10 Enter the portion of the rent the tenant is responsible to pay.

Column 11 Enter Section 8 – subsidy amount only.

Column 12 Enter the utility allowance. If the owner pays all utilities, enter zero. Projects must use most recent applicable utility chart.

Column 13 Enter gross rent amount by adding columns 10 to 12.

- **If there are new move-ins listed on the report a COPY of the Tenant Income Certification Form must be submitted with this report.**