



**HOME PROGRAM
ANNUAL DEVELOPMENT CERTIFICATION REPORT**

Compliance Period:	From:	To:	
Development Name:			
Development Address:		City:	Zip:
Current Owner:		Phone #	
Owner's Address:		City:	Zip:

OCCUPANCY INFORMATION (Rent Restricted HOME Units Only for compliance period):

Identify HOME Assisted units below by unit designation					
Low HOME units (50% AMI or lower)		High HOME units (60% AMI or lower)		High HOME units (60%-80% AMI)	

CERTIFICATION

This Owner certifies that for the compliance period the following applies:

- An annual income certification for each HOME resident was received, and the documentation supporting that certification is on file:
 YES **NO** If "No," explain on page 5
- Each HOME assisted unit in the development was rent restricted as required in the executed HOME Regulatory Agreement:
 YES **NO** If "No," explain on page 5
- If the annual income of a household in a HOME assisted unit increased above 80% (or 140% if the development is also funded with Low-Income Housing Tax Credits) of the area median income, the households rent was increased to either the lessor of 30% of the household's adjusted income or fair market rent for the area (or the maximum LIHTC rent if a LIHTC development):
 YES **NO** **N/A** If "No or N/A", explain on page 5

4. If the income of a household in a HOME assisted unit increased above the limit allowed under the HOME Regulatory Agreement, was the next available unit rented to a household with a qualifying income:
- YES NO N/A If “No or N/A”, explain on page 5
5. All HOME restricted units were for use by the general public and used on a nontransient basis and the initial leases for all of the units were for a term of at least one year:
- YES NO If “No,” explain on page 5
6. The lease agreement used for each unit includes all provisions required by the HOME program, and does not include any prohibited provisions:
- YES NO If “No,” explain on page 5
7. None of the HOME assisted units were leased to the development’s Owner or developer (including an officer, employee, an agent elected or appointed official, or consultant of the Owner, developer or sponsor) during the compliance period?
- YES NO If “No,” explain on page 5
8. Each HOME assisted unit is suitable for occupancy and meets all National Standards for the Physical Inspection of Real Estate (NSPIRE) inspection standards and all applicable housing codes:
- YES NO If “No,” explain on page 5
9. All HOME assisted units were leased to households without regard to their status as holders of rental vouchers or certificates that are available under 24 CFR 882.887, or 92.211:
- YES NO If “No,” explain on page 5
10. An up-to-date Affirmative Fair Housing Marketing Plan (AFHMP) form HUD-935.2A is in the development files, and a copy of the AFHMP has been submitted to AHFC.
- YES NO If “No,” explain on page 5
11. The Equal Housing Opportunity slogan, logo or statement was used in all advertisements, public service announcements, press releases and informational mailings:
- YES NO If “No,” explain on page 5
12. The Owner permitted residents to make handicapped accessibility adaptations to the units at the resident’s expense:
- YES NO N/A If “No or N/A”, explain on page 5

13. One of the following methods were used to reach out to low-income residents for development related employment and contracting opportunities?

YES NO N/A If "No or N/A", explain on page 5

- Attempt to recruit low-income residents through local advertising media, signs prominently displayed at the development site, contracts with community organization and public or private agencies operating within the area in which the development is located, or similar methods.
- Participate in a HUD program or other program, which promotes the training or employment of low-income residents.
- Participate in a HUD program or other program, which promotes the award of contracts to business concerns, which meet the definition of Section 3 business concerns.
- Other (Please explain) _____

14. Owner certifies under penalty of perjury that I have adhered to the requirements of the AHFC HOME and Greater Opportunities for Affordable Living programs to obtain accurate utility allowances for use in the calculation of rents for this development. The following selected utility allowance method was used in the determination of household's gross rent:

- Owner has obtained the effective AHFC PHA utility allowance for the area and implemented changes to HOME gross rents within 90 days of the release of the PHA utility allowance or as allowed under the household's lease agreement. ***(This option is only allowed for developments funded prior to August 23, 2013)***
- Owner operates a development with rental assistance through the USDA RD 515 program, or through a HUD Multi-family program and utilizes the development-based utility allowance, which was reviewed and approved by the rental assistance-governing agency.
- Owner completed utility allowance calculations specific to the HOME program using the HUD Utility Schedule Model (HUSM), provided this data to Alaska Housing's Planning and Program Development Department for approval, and implemented approved changes to HOME gross rents within 90 days of approval or as allowed under the household's lease agreement.

Or

- Owner has completed a review of actual per unit utility allowance costs, provided this data to Alaska Housing's Planning and Program Development Department for approval and implemented approved changes to HOME gross rents within 90 days of completion or as allowed under the household's lease agreement.

In addition, I acknowledge this process to be an annual requirement of the AHFC HOME program.

YES NO N/A If "No or N/A", explain on page 5



15. 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 by VAWA include, but are not limited to, honoring civil protection orders, eviction protection and bifurcation of lease when necessary.

YES NO N/A If "No or N/A", explain on page 5

I, _____
(Print Name of Owner/Authorized Signer)

The understood Owner, being duly sworn, hereby represent and certify under penalty of perjury that the development is otherwise in compliance with the U.S. Tax Code, any Treasury/IRS Regulations, the applicable state Qualified Allocation Plan, and all other applicable laws, rules, and regulations. The information contained in this statement and answers to the above questions, including any attachments hereto, are true, correct and complete to the best of my knowledge. I further certify that I have the requisite authority to execute this *Owner's Annual Certification*.

(If there has been a change in signing authority, please attach a copy of the corporate resolutions or minutes from the partnership meeting, showing the undersigned has the authority to execute these documents for the ownership entity.)

_____ PRINTED NAME	_____ TITLE	_____ OWNER ENTITY
_____ SIGNATURE	_____ DATE	

If you selected "NO or N/A" for questions, 1-15 please provide a written explanation below and attach documentation supporting any corrective action taken as necessary.

Question #	Explanation