

## HOME PROGRAM ANNUAL DEVELOPMENT CERTIFICATION REPORT

Compl	iance Period:	From:			То:		
Develo	pment Name:				1		
Develo	pment Address:				City:		Zip:
Curren	t Owner:			Phone #			
Owner	's Address:				City:		Zip:
OCCUF	PANCY INFORMAT	ION (Rent Re	estricted HOM	E Units Only for	compliar	nce period):	
				e 50% ( <u>LOW HC</u>		)	
				% ( <u>HIGH HOME</u> % ( <u>HIGH HOME</u>		80%)	
		Number of m	oderate incor	ne (greater tha		,	
		IOTAL NUMB	ER OF HOME	UNITS			
		Identify HO		units below by	unit desig		11 (000)
Low HO	OME units (50%)		High HOME	units (60%)		High HOME u	nits (80%)
<u>CERTI</u>	<u>FICATION</u>						
This O	wner also certifie	s that for the	compliance p	period the follow	ving appli	es:	
1.	An annual inco			HOME resider	nt was re	eceived, and t	he documentation
	☐ YES	□ NO	□ N/A	If "No," explain	n on page	e 5	
2.	Each HOME res			opment was re	nt restric	ted as require	ed in the executed
	□ YES	□ NO	□ N/A	If "No," explain	n on page	e 5	



პ.	80% of the a	rea median inc	ome, their	rent was adjusted to equal 30% of the family adjusted unless development funded the Low-Income Housing Tax
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
4.	allowed under		gulatory Agr	essisted unit in the development increased above the limit reement, the next available unit in the development was come:
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
5.		pasis and the ini	-	ment were for use by the general public and used on a for all of the units in the development were for a term of at
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
6.	_	eement used for de any prohibite		ncludes all provisions required by the HOME program, and s:
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
7.	Were any HOME assisted units of the development leased to the development 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	□ N/A	If "No," explain on page 5
8.	Physical Cond		(UPCS) or S	pment is suitable for occupancy and meets all Uniform Section 8 Housing Quality Standards (HQS) as identified in code:
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
9.				esidents without regard to their status as holders of rental under 24 CFR 882.887,or 92.211:
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
10.				g Marketing Plan (AFHMP) form HUD-935.2A is in the MP has been submitted to AHFC with this report.
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
11.	' <del>-</del> '			ogo or statement was used in all advertisements, public and informational mailings:
	☐ YES	□ NO	□ N/A	If "No," explain on page 5



12.		e Owner pe sident's exp		ts to make	handicapped accessibility adaptations to the units at the
		YES	□ NO	□ N/A	If "No," explain on page 5
13.			llowing method yment and contr		d to outreach to low-income residents for Development ortunities?
		YES	□ NO	□ N/A	If "No," explain on page 5
	•	displayed	at the developm	nent site, co	ents through local advertising media, signs prominently ntracts with community organization and public or private which the development is located, or similar methods.
	•	-	e in a HUD prog e residents.	ram or othe	r program, which promotes the training or employment of
	•				ner program, which promotes the award of contracts to efinition of Section 3 business concerns.
	•	Other (Plea	ase explain)		
14.	and use	d Greater C e in the calc	pportunities for	Affordable for this dev	nat I have adhered to the requirements of the AHFC HOME Living programs to obtain accurate utility allowances for elopment. The following selected utility allowance method old's gross rent:
		changes to allowed ur	o HOME gross r	ents within old's lease	IFC PHA utility allowance for the area and implemented 90 days of the release of the PHA utility allowance or as agreement. (This option is only allowed for developments
		through a	HUD Multi-fam	nily program	rental assistance through the USDA RD 515 program, or and utilizes the development based utility allowance, the rental assistance-governing agency.
		HUD Utility Program D	y Schedule Mo Development De	del (HUSM) partment fo	alculations specific to the HOME development using the provided this data to Alaska Housing's Planning and rapproval, and implemented approved changes to HOME or as allowed under the household's lease agreement.
		Or			
		Alaska Heimplement	ousing's Plann	ing and P nanges to HO	tual per unit utility allowance costs, provided this data to Program Development Department for approval and DME gross rents within 90 days of approval or as allowed nt.



	In addition, I a	acknowledge th	is process to	be an <u>annual</u> requirement of the AHFC HOME program.
	☐ YES	□ NO	□ N/A	If "No," explain on page 5
15.	protections fo stalking, and mandated by	or residents and any other situ	d applicants uation or in e, but are r	ne Violence Against Women Act (VAWA), which provides who are victims of domestic violence, dating violence of acidence mandated by VAWA. Compliance requirements not limited to, honoring civil protection orders, eviction necessary.
	☐ YES	□ NO	□ N/A	If "No." explain on page 5



l,	(Print Name of C	Owner/Authorized Signer)	
development is applicable state information containereto, are true, authority to executify there has been minutes from the	otherwise in cor Qualified Alloca ained in this stat correct and comp ute this Owner's A	mpliance with the U.S. Tax Cod ation Plan, and all other applicatement and answers to the above plete to the best of my knowledge. Annual Certification.  signing authority, please attach an eeting, showing the undersigned	ertify under penalty of perjury that the e, any Treasury/IRS Regulations, the ble laws, rules, and regulations. The e questions, including any attachments I further certify that I have the requisite a copy of the corporate resolutions or d has the authority to execute these
	•	- /	
PRINTED NAME		TITLE	OWNER ENTITY
SIGNATURE		·	
		Date	
			ritten explanation below and attach
		tions, 1-16 please provide a w	
documentation s	upporting any cor	tions, 1-16 please provide a w	
documentation s	upporting any cor	tions, 1-16 please provide a w	
documentation s	upporting any cor	tions, 1-16 please provide a w	
documentation s	upporting any cor	tions, 1-16 please provide a w	
documentation s	upporting any cor	tions, 1-16 please provide a w	