

FDIC MULTIFAMILY AFFORDABLE HOUSING PROGRAM COMPLIANCE REPORT

Part A – Compliance Report Summary

Date: _____

Period: _____ / _____ to _____ / _____
mo. yr. mo. yr.

Property Name: _____

Property ID # _____

Street Address: _____

City, State, Zip _____

Owner: _____

Phone: () - _____
(area)

Manager/Contact: _____

Phone: () - _____
(area)

PROPERTY SUMMARY						<i>Agency Use Only</i>
UNIT TYPE	Number of Units					Compliance Status (Total ≥ Req)
	Occupied	Vacant	Over Income	Total	Required	
1. Lower Income – QUs						
2. Very Low-Income – QUs						<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Total Qualifying Units						<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Unrestricted Units						
5. TOTAL ALL UNITS						
Percent				100%		

I/We (owner) relied in good faith upon information supplied by the occupants and verified the information provided. I/We certify that data presented in this report is accurate to the best of our knowledge.

Signature (Preparer)

Signature (Managing Owner)

Date

of pages attached

Attachments: Part B – Unit Status Report Forms _____

Tenant Income Certifications (TICs) _____

