

SUBSIDIZED HOUSING INCOME QUESTIONNAIRE

FOR THE 36 MONTHS FROM: 2023 TO 2025

PROPERTY AND OWNERSHIP INFORMATION:

- Name and Location of Property:

- Owner and Address of Record:

SERVICES & UTILITIES INCLUDED IN RENT: *(Check next to each if included in rent)*

Heat A/C Gas Electric Internet Washer/Dryer
 Parking Pool Exercise Room Security Furnishings

RENT SCHEDULES:	# UNITS	2023 Base Monthly Rent	2023 Market Monthly Rent	2024 Base Monthly Rent	2024 Market Monthly Rent	2025 Base Monthly Rent	2025 Market Monthly Rent
EFFICIENCY							
1 BEDROOM							
2 BEDROOM							
2 BEDROOM/DEN							
3 BEDROOM							
3 BEDROOM/DEN							
OTHER (LIST)							

	# of Spaces	2023 Monthly Rent	2024 Monthly Rent	2025 Monthly Rent
Parking:				

ACTUAL INCOME AND EXPENSE INFORMATION IS REQUIRED (PLEASE ATTACH COPIES OF THE LAST THREE YEARS' PROFIT AND LOSS STATEMENTS AS FILED WITH THE REGULATORY AGENCY).

FINANCIAL/SALES INFORMATION:

1. ARE LOW INCOME HOUSING TAX CREDITS APPLICABLE FOR THIS PROPERTY? () YES () NO
2. IS THERE A CURRENT MORTGAGE ON THIS PROPERTY? () YES () NO IF YES, PLEASE PROVIDE THE FOLLOWING DATA:

NAME OF MORTGAGEE _____	MORTGAGE AMOUNT _____
MARKET INTEREST RATE _____	SUBSIDIZED INTEREST RATE _____
ORIGINAL LOAN / VALUE RATIO _____	ORIGINAL EQUITY INVESTMENT (\$) _____
TERM OF MORTGAGE _____	DATE OF FIRST PAYMENT _____
MONTHLY PAYMENT _____	REGULATORY LIMIT ON EQUITY RETURN _____
MORTGAGE INSURANCE PREMIUM _____	
MORTGAGE BALANCE AS OF JANUARY 1, 2024 (IF KNOWN) _____	

3. CURRENT DOLLAR AMOUNT IN RESIDUAL RECEIPTS / SURPLUS CASH ACCOUNT: _____
4. CURRENT DOLLAR AMOUNT IN RESERVE FOR REPLACEMENT ACCOUNT: _____
5. IS THERE AN ANNUAL TRUSTEE FEE? () YES () NO IF YES, ENTER AMOUNT: _____
6. PLEASE PROVIDE: DATE PURCHASED: _____ CONSIDERATION: _____

I DECLARE, UNDER THE PENALTIES OF PERJURY, THAT THE CONTENTS OF THIS FORM AND ALL THE ACCOMPANYING SCHEDULES AND STATEMENTS HAVE BEEN EXAMINED BY ME AND ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Owner's Signature

Title of Signer

Date

Print/Type Name of Signer

Phone Number

Email