SECTION 42 TAX CREDIT PROPERTY QUESTIONNAIRE
INCOME QUESTIONNAIRE FOR THE 36 MONTHS FROM: 2020 TO 2022
NAME AND LOCATION OF PROPERTY
OWNER AND ADDRESS OF RECORD

PROJECT NAME ___________________________________________ OWNER ________________________________________

ADDRESS
(FOR MULTIPLE PROPERTY ACCOUNTS, PLEASE PROVIDE A LIST OF EACH ADDRESS AND TAX ACCOUNT NUMBER)

TOTAL UNITS: ______ # OF VACANT UNITS: ______ TYPE: ( ) TOWNHOUSE ( ) GARDEN ( ) MID RISE ( ) HIGH RISE ( ) MIXED
YEAR BUILT: ______ # OF STORIES: ______ CONDITION: __________________________

CHECK SERVICES & UTILITIES IN RENT: ( ) HEAT ( ) A/C ( ) GAS ( ) ELECTRICITY ( ) CARPETS ( ) DRAPES ( ) WASHER/DRYER

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<tr>
<th>RENT PER MONTH SCHEDULE</th>
<th>TOTAL UNITS</th>
<th>30% MEDIAN</th>
<th>40% MEDIAN</th>
<th>50% MEDIAN</th>
<th>60% MEDIAN</th>
<th>MARKET RATE</th>
<th>OTHER (MGR, ETC.)</th>
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PLEASE IDENTIFY ANY FORM OF TENANT SUBSIDY, OR RENTAL ASSISTANCE TYPICAL TO THIS PROJECT.

WHEN DO RENTAL RESTRICTIONS EXPIRE? _______________ IS THERE A PAYMENT IN LIEU OF TAXES? ( ) YES ( ) NO

ACTUAL INCOME AND EXPENSE INFORMATION IS REQUIRED:

FINANCING / SALES INFORMATION: PLEASE PROVIDE THE FOLLOWING DATA REGARDING THE FIRST AND SECOND MORTGAGES:

DATE PURCHASED: ____________________________ PURCHASE PRICE PAID: ____________________________
FIRST MORTGAGE LENDER ____________________________ SECOND MORTGAGE LENDER ____________________________
MORTGAGE AMOUNT ____________________________ MORTGAGE AMOUNT ____________________________
INTEREST RATE ____________________________ INTEREST RATE ____________________________
TERM OF MORTGAGE ____________________________ TERM OF MORTGAGE ____________________________
FIRST PAYMENT DATE ____________________________ FIRST PAYMENT DATE ____________________________
MONTHLY PAYMENT ____________________________ MONTHLY PAYMENT ____________________________
JAN. 1, 2023 BALANCE ____________________________ JAN. 1, 2023 BALANCE ____________________________

CURRENT DOLLAR AMOUNT IN RESERVE FOR REPLACEMENT ACCOUNT: ____________________________

TOTAL CONSTRUCTION/REHAB COST: ____________________________ AMOUNT OF TAX CREDIT AWARD: ____________________________

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 ____________________________

RP-042 (REV 1/2023)