

Mississippi Development Authority Small Rental Assistance Program Application

The Small Rental Assistance Program is federally funded. The information collected below will be used to determine whether your application qualifies under the Small Rental Assistance Program. It will not be disclosed other than to the State of Mississippi or its agents without your consent, except for verification of information, or as required and permitted by law. You do not have to provide this information, but if you do not, your application for assistance may be delayed or rejected.

In addition to the application, you must provide:

1. A Consent for Non-Public Personal Information Release form (included in the application), signed by each owner, co-owner, director, or principal officer listed in the application.
2. A copy of the warranty deed, or other documents establishing site control for the property.
3. A copy of the current mortgage statement.
4. A description of the repair work needed on the property, and a contractor's estimate for the expected cost.
5. Utility bills or other documentation that show the property on your application **currently** has access to electricity, water, and sewer/septic (as required by local code).
6. Copies of all Deeds of Trust and/or loan agreements for loans on the rental property.

Individual owners and all Co-Owners must provide:

7. A personal financial statement (for individual owners and co-owners).

Business interests and non-profit organizations must provide:

8. A business plan (for corporations, LLCs, and partnerships).
9. Organizational Documents for corporations, LLCs, and partnerships. These are Articles of Incorporation, LLC Agreements, or Partnership Agreements.
10. Evidence that the business entity is in good standing to transact business in Mississippi

Complete the Small Rental Assistance Program Application accurately, to the best of your ability. ***You must also enclose a check for the \$50 application fee, payable to Mississippi Development Authority.*** The application fee is refundable on loan award. Return the documents to the address below:

Mississippi Development Authority
Small Rental Assistance Program
Post Office Box 66
Clinton, MS 39060-0066

Section 1 - Eligibility Information

These questions are used to gauge your eligibility for the program:

1. Is the property located in Hancock, Harrison, Jackson, or Pearl River Counties, Mississippi? Yes No
2. Does/Did/Will the property contain between one (1) and four (4) units? Yes No
3. Are all units of a qualified construction type (i.e. **not** manufactured housing or mobile homes)? Yes No
4. Do all units currently have access to electricity, water, and sewer/septic (as required by local code)? Yes No
5. Do you and/or the ownership entity you represent, **currently** have site control on this property? Yes No
6. Was a grant paid by the Homeowner Assistance Program (HAP) for the unit(s) in question? Yes No
7. Were all existing units offered as residential rental units on August 29, 2005? N/A Yes No

Section 5- Individual/Primary Owner Information

If you are the only owner of this property, and you do not own it through a corporation, complete this section. If you are the primary owner of a group of individuals that own this property, complete this section and also complete the information section on all co-owners on the next page. If you are a corporation, LLC, or non-profit organization, skip to Section 6.

Information about race, ethnicity, gender, and household size is *not* required and will never affect your scoring or the amount of funding you receive. The Small Rental Assistance Program is federally funded and, as such, is required to report demographic information to the Department of Housing and Urban Development (HUD). You are not required to provide this information, but are encouraged to do so.

Prefix: <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		First Name		Middle Name		Last Name	
Suffix: <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> Other _____							
Current Address			City		State		ZIP Code
Mailing Address (same as Current Address <input type="checkbox"/>)			City		State		ZIP Code
Daytime Phone/TTY:				Evening Phone/TTY:			
Social Security No		Date of Birth	Current Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (single, divorced, or widowed) <input type="checkbox"/> Legally Separated				
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			Household Size:	

If you have co-owner(s), please proceed to Section 7 on page 4. Otherwise, please continue to Section 8 on page 5.

Section 6 - Business Entity Information

Organization Name					
Legal Status <input type="checkbox"/> Partnership <input type="checkbox"/> Non-profit Organization <input type="checkbox"/> Corporation <input type="checkbox"/> Limited-liability Company LLC			Minority Business Information <input type="checkbox"/> Minority Business Enterprise <input type="checkbox"/> Women's Business Enterprise		
Federal Tax ID		Mississippi Tax ID		DUNS Number	
Physical Address		City	State	ZIP Code	County
Mailing Address (same as Physical <input type="checkbox"/>)		City	State	ZIP Code	County

Please attach a page to your application listing the corporation's officers. If the entity is a managed LLC, please list the manager(s). If the entity is a limited partnership, please list the general partner(s). *You must also provide Social Security Numbers for all directors and principal officers.* Then, continue to Section 8 on page 5.

Section 7 - Co-Owner Information

This information must be provided for all co-owners of the rental property. If you have more than three (3) co-owners, please make as many copies of this page as necessary to complete the information for all co-owners.

Co-Owner # _____

Prefix: <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		First Name:		Middle Name:		Last Name:	
Suffix: <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> Other _____							
Street Address							
City		State	ZIP Code	Social Security No		Date of Birth	
Daytime Phone/TTY:				Evening Phone/TTY:			
Email Address							

Co-Owner # _____

Prefix: <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		First Name:		Middle Name:		Last Name:	
Suffix: <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> Other _____							
Street Address							
City		State	ZIP Code	Social Security No		Date of Birth	
Daytime Phone/TTY:				Evening Phone/TTY:			
Email Address							

Co-Owner # _____

Prefix: <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		First Name:		Middle Name:		Last Name:	
Suffix: <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> Other _____							
Street Address							
City		State	ZIP Code	Social Security No		Date of Birth	
Daytime Phone/TTY:				Evening Phone/TTY:			
Email Address							

Section 8 - Information for Rental Unit 1

Street Address			
City	State	ZIP Code	County
		Year Built	Date Purchased

General unit information. If this is new construction, answer these questions based upon your plans/blueprints.

Program Option(s): You may combine Option A with Options B, C, or D <input type="checkbox"/> A. Rental Income Subsidy <input type="checkbox"/> C. Reconstruction/conversion of non-Katrina damage <input type="checkbox"/> B. Repair of Katrina damage <input type="checkbox"/> D. New Construction				
No. of Bedrooms <input type="checkbox"/> Efficiency <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 4+	Sq. Footage	Currently Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rental on 8/29/05? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Last Rent \$

Last tenant(s). Provide as much info as known for all tenants age 18 & over. If the unit is new construction, skip this section.

	Tenant Name	Move-In Date	Move-Out Date	Current Mailing Address
Tenant 1				
Tenant 2				
Tenant 3				
Tenant 4				

Repair/Construction information. Only answer these questions if you are performing repairs or new construction on this unit. If you have begun construction, provide the amount of remaining construction/repair cost as of the date you apply.

Repair/Construction Cost	SRA Loan Amount	Add'l Financing Needed	Source of Add'l Financing <input type="checkbox"/> Savings/Personal Funds <input type="checkbox"/> SBA Loan <input type="checkbox"/> None needed <input type="checkbox"/> Other _____
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Construction Status and Intent. If you *have not* begun construction and/or have not entered into a contract for construction, you are *prohibited* from beginning the construction until you receive your SRAP loan. If you have already begun construction, you may continue but with the risk that your actions may have had an adverse environmental effect. If you are already under contract you may continue the work but only what is specified in the existing contract.

Construction Status <input type="checkbox"/> Construction not started yet <input type="checkbox"/> Construction in progress, but not complete <input type="checkbox"/> Construction complete	Actual/Expected Start Date	Actual/Expected Finish Date
Construction Intent (check all that apply) <input type="checkbox"/> Repair/Rebuild the structure on the <i>exact same location</i> it was pre-Katrina <input type="checkbox"/> Rebuild the structure with a larger floor plan than the original structure <input type="checkbox"/> Rebuild on a <i>different location</i> within the parcel of property the original structure was on	Sq. Footage Before	Sq. Footage After

Section 9 - Information for Rental Unit 2

Street Address			
City	State	ZIP Code	County
		Year Built	Date Purchased

General unit information. If this is new construction, answer these questions based upon your plans/blueprints.

Program Option(s): You may combine Option A with Options B, C, or D <input type="checkbox"/> A. Rental Income Subsidy <input type="checkbox"/> C. Reconstruction/conversion of non-Katrina damage <input type="checkbox"/> B. Repair of Katrina damage <input type="checkbox"/> D. New Construction				
No. of Bedrooms <input type="checkbox"/> Efficiency <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 4+	Sq. Footage	Currently Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rental on 8/29/05? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Last Rent \$

Last tenant(s). Provide as much info as known for all tenants age 18 & over. If the unit is new construction, skip this section.

	Tenant Name	Move-In Date	Move-Out Date	Current Mailing Address
Tenant 1				
Tenant 2				
Tenant 3				
Tenant 4				

Repair/Construction information. Only answer these questions if you are performing repairs or new construction on this unit. If you have begun construction, provide the amount of remaining construction/repair cost as of the date you apply.

Repair/Construction Cost	SRA Loan Amount	Add'l Financing Needed	Source of Add'l Financing <input type="checkbox"/> Savings/Personal Funds <input type="checkbox"/> SBA Loan <input type="checkbox"/> None needed <input type="checkbox"/> Other _____
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Construction Status and Intent. If you *have not* begun construction and/or have not entered into a contract for construction, you are *prohibited* from beginning the construction until you receive your SRAP loan. If you have already begun construction, you may continue but with the risk that your actions may have had an adverse environmental effect. If you are already under contract you may continue the work but only what is specified in the existing contract.

Construction Status <input type="checkbox"/> Construction not started yet <input type="checkbox"/> Construction in progress, but not complete <input type="checkbox"/> Construction complete	Actual/Expected Start Date	Actual/Expected Finish Date				
Construction Intent (check all that apply) <input type="checkbox"/> Repair/Rebuild the structure on the <i>exact same location</i> it was pre-Katrina <input type="checkbox"/> Rebuild the structure with a larger floor plan than the original structure <input type="checkbox"/> Rebuild on a <i>different location</i> within the parcel of property the original structure was on		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Sq. Footage Before</td> <td style="width: 50%; border: none;">Sq. Footage After</td> </tr> <tr> <td style="border: none; height: 40px;"></td> <td style="border: none; height: 40px;"></td> </tr> </table>	Sq. Footage Before	Sq. Footage After		
Sq. Footage Before	Sq. Footage After					

Section 10 - Information for Rental Unit 3

Street Address			
City	State	ZIP Code	County
[REDACTED]		Year Built	Date Purchased

General unit information. If this is new construction, answer these questions based upon your plans/blueprints.

Program Option(s): You may combine Option A with Options B, C, or D <input type="checkbox"/> A. Rental Income Subsidy <input type="checkbox"/> C. Reconstruction/conversion of non-Katrina damage <input type="checkbox"/> B. Repair of Katrina damage <input type="checkbox"/> D. New Construction				
No. of Bedrooms <input type="checkbox"/> Efficiency <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 4+	Sq. Footage	Currently Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rental on 8/29/05? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Last Rent \$

Last tenant(s). Provide as much info as known for all tenants age 18 & over. If the unit is new construction, skip this section.

	Tenant Name	Move-In Date	Move-Out Date	Current Mailing Address
Tenant 1				
Tenant 2				
Tenant 3				
Tenant 4				

Repair/Construction information. Only answer these questions if you are performing repairs or new construction on this unit. If you have begun construction, provide the amount of remaining construction/repair cost as of the date you apply.

Repair/Construction Cost	SRA Loan Amount	Add'l Financing Needed	Source of Add'l Financing <input type="checkbox"/> Savings/Personal Funds <input type="checkbox"/> SBA Loan <input type="checkbox"/> None needed <input type="checkbox"/> Other _____
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Construction Status and Intent. If you *have not* begun construction and/or have not entered into a contract for construction, you are *prohibited* from beginning the construction until you receive your SRAP loan. If you have already begun construction, you may continue but with the risk that your actions may have had an adverse environmental effect. If you are already under contract you may continue the work but only what is specified in the existing contract.

Construction Status <input type="checkbox"/> Construction not started yet <input type="checkbox"/> Construction in progress, but not complete <input type="checkbox"/> Construction complete	Actual/Expected Start Date	Actual/Expected Finish Date		
Construction Intent (check all that apply) <input type="checkbox"/> Repair/Rebuild the structure on the <i>exact same location</i> it was pre-Katrina <input type="checkbox"/> Rebuild the structure with a larger floor plan than the original structure <input type="checkbox"/> Rebuild on a <i>different location</i> within the parcel of property the original structure was on		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Sq. Footage Before</td> <td style="width: 50%; border: none;">Sq. Footage After</td> </tr> </table>	Sq. Footage Before	Sq. Footage After
Sq. Footage Before	Sq. Footage After			

Section 11 - Information for Rental Unit 4

Street Address			
City	State	ZIP Code	County
		Year Built	Date Purchased

General unit information. If this is new construction, answer these questions based upon your plans/blueprints.

Program Option(s): You may combine Option A with Options B, C, or D <input type="checkbox"/> A. Rental Income Subsidy <input type="checkbox"/> C. Reconstruction/conversion of non-Katrina damage <input type="checkbox"/> B. Repair of Katrina damage <input type="checkbox"/> D. New Construction				
No. of Bedrooms <input type="checkbox"/> Efficiency <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 4+	Sq. Footage	Currently Occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Rental on 8/29/05? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Last Rent \$

Last tenant(s). Provide as much info as known for all tenants age 18 & over. If the unit is new construction, skip this section.

	Tenant Name	Move-In Date	Move-Out Date	Current Mailing Address
Tenant 1				
Tenant 2				
Tenant 3				
Tenant 4				

Repair/Construction information. Only answer these questions if you are performing repairs or new construction on this unit. If you have begun construction, provide the amount of remaining construction/repair cost as of the date you apply.

Repair/Construction Cost	SRA Loan Amount	Add'l Financing Needed	Source of Add'l Financing <input type="checkbox"/> Savings/Personal Funds <input type="checkbox"/> SBA Loan <input type="checkbox"/> None needed <input type="checkbox"/> Other _____
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Construction Status and Intent. If you *have not* begun construction and/or have not entered into a contract for construction, you are *prohibited* from beginning the construction until you receive your SRAP loan. If you have already begun construction, you may continue but with the risk that your actions may have had an adverse environmental effect. If you are already under contract you may continue the work but only what is specified in the existing contract.

Construction Status <input type="checkbox"/> Construction not started yet <input type="checkbox"/> Construction in progress, but not complete <input type="checkbox"/> Construction complete	Actual/Expected Start Date	Actual/Expected Finish Date				
Construction Intent (check all that apply) <input type="checkbox"/> Repair/Rebuild the structure on the <i>exact same location</i> it was pre-Katrina <input type="checkbox"/> Rebuild the structure with a larger floor plan than the original structure <input type="checkbox"/> Rebuild on a <i>different location</i> within the parcel of property the original structure was on		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Sq. Footage Before</td> <td style="width: 50%; border: none;">Sq. Footage After</td> </tr> <tr> <td style="border: none; height: 40px;"></td> <td style="border: none; height: 40px;"></td> </tr> </table>	Sq. Footage Before	Sq. Footage After		
Sq. Footage Before	Sq. Footage After					

Priority Scoring Questions

The following selection criteria were developed by the Mississippi Development Authority for use in Round 1 of the Small Rental Assistance program. These will be used to score your application, if and only if the Round you have applied to is over-subscribed. Please *only* check the statements that apply to this rental property, property owner(s), or to your repair or reconstruction plans. MDA will verify the responses you provide.

- Applicant must have satisfactory prior owner/manager experience
 - Prior participation in federal, state and local rental programs with no compliance issues
 - No below average REAC scores on other rental property owned without satisfactory explanation
 - Prior Section 8 program participation with no compliance issues
 - No building code violations without acceptable explanation
 - No property liens without acceptable explanation
- Applicant must have satisfactory credit history
 - Acceptable credit score from a nationally recognized credit reporting company
 - No bankruptcies without acceptable explanations
 - No failure to pay in accordance with terms, without acceptable explanations
 - References from lenders for other rental properties owned by applicant
- Applicant must have satisfactory financial capacity
 - Sufficient income to pay projected monthly and annual operating expenses
 - Satisfactory current and long-term debt ratios
 - Sufficient sources of funds to complete the proposed project
 - No unpaid tax liabilities
- Outside funding commitments (if applicable) have been obtained at the date of application.
- Applicant was a Mississippi state resident on August 29, 2005.
- Applicant is currently a Mississippi state resident.
- Applicant's primary residence is located in the state of Mississippi, within 75 miles of the rental property.
- Property is located in an MDA Preferred Development location.
- Property will contain ENERGY STAR® refrigerators.
- Property will contain ENERGY STAR® dishwashers.
- Property will contain ENERGY STAR® clothes washers.
- Property will contain ENERGY STAR® clothes dryers.
- Property will contain ENERGY STAR® water heaters.
- Property will contain central heating or air conditioning in excess of 14 SEER or 95% AFUE.
- Property will incorporate other design features designed to reduce ongoing operational and maintenance costs
- Property will be built in excess of the following total-unit dimensions:
 - 600 SF for efficiencies*
 - 720 SF for one-bedroom units*
 - 960 SF for two-bedroom units*
 - 1080 SF for three-bedroom units*
 - 1,440 SF for four- bedroom units*

MISSISSIPPI DEVELOPMENT AUTHORITY PRIVACY POLICY

MDA is obligated by law, specifically the Right to Financial Privacy Act of 1978, and the Privacy Act of 1974 (collectively the "Acts"), to inform you of your right to privacy as it relates to all Nonpublic Personal Information ("NPI") used in the process of your application. Keeping your NPI secure, and using it only as necessary to administer the Small Rental Assistance Program and process your application, is MDA's top priority.

The Acts provide that we may access your financial records when considering or administering government loan or loan guaranty assistance to you. We must give a financial institution a certificate of our compliance with the Acts when we first request access to your financial records. No other certification is required for later access. Our access rights continue for the term of any approved assistance program. We do not have to give you any additional notice of our access rights during the term of the assistance.

As part of your application you will be required to consent to MDA accessing information about you from various sources as well as sharing any information obtained about you with various third parties.

Types Of Nonpublic Personal Information We Collect

We collect NPI about you that is provided to us by you or obtained by us from third parties with your authorization or otherwise. We will access, among other things, financial records held by financial institutions, insurance companies and their agents and information available from other state and federal governmental authorities. The necessary NPI includes your social security number, loan balances and information, information about your residence, insurance and claims information, governmental assistance received and any other information MDA needs to evaluate and process your application.

Parties To Whom We Disclose Information

We will not disclose any NPI obtained in the course of the assistance except as required or permitted by law and except pursuant to your consent. Whenever we share information, we stress the confidential nature of information being shared. We may transfer to another government authority any information, including financial records, included in an application or about an approved application as necessary to process that application. We will not permit any transfer of your financial records to another government authority except as required or permitted by law or except pursuant to your consent.

Protecting The Confidentiality And Security Of Your Information

We will retain records relating to the assistance and your application as necessary to assist you in the future and as required by law. In order to guard your nonpublic personal information, we maintain physical, electronic, and procedural safeguards that comply with all applicable laws and regulations.

MISSISSIPPI SMALL RENTAL ASSISTANCE PROGRAM

Consent and Release Form, Nonpublic Personal Information Form

I (Applicant/Owner/Occupant) do hereby consent to and authorize the Mississippi Development Authority, its partners, affiliates, agents, contractors and their respective assigns (collectively "MDA"), as part of my application for the Mississippi Small Rental Assistance Program (the "Program"), to request, access, review, disclose, release and share any and all Nonpublic Personal Information ("NPI"), whether provided by me in this application or by additional outside third parties with whom I may or may not have a relationship, as necessary for final determination of my eligibility for and the amount of assistance under the Program. I understand and acknowledge that any party disclosing information to the MDA on my behalf is not responsible for any negligent misrepresentation or omission, and I agree to hold such disclosing parties harmless from and against all claims, actions, suits or other proceedings, and any and all losses, judgments, damages, expenses or other costs (including reasonable counsel fees and disbursements), arising from or in any way relating to their disclosure.

As part of this consent, I further authorize MDA and any other financial institution, lender, insurer, government agency (federal or state), credit bureau, financial service provider or any other third party to obtain, use and disclose any of my NPI in their possession, as necessary, to enable MDA to administer the Program and process my application.

I understand and acknowledge that MDA may obtain, use and disclose any NPI received in its investigation of my application with third parties, including those referenced above, as necessary for final determination of my eligibility for and the amount of assistance under the Program.

I acknowledge that I have received and reviewed MDA's privacy policy as it relates to my NPI and my right to privacy associated therewith. I also understand and acknowledge that, as part of that policy, my consent may be revoked at any time with written notice to the MDA. I further understand and acknowledge that any such revocation of this consent may affect my ability to receive assistance under the Program.

By completing and signing this application, I acknowledge and agree to the above and agree that this consent may be furnished on my behalf to any financial institution, lender, insurer, government agency (federal or state), credit bureau, financial service provider or other third party.

Applicant/Owner Signature

Applicant/Owner Name (printed)

Date



APPEALS PROCEDURE

Any applicant may appeal MDA's loan eligibility decision.

Appeals must be submitted in writing within 60 (sixty) days of the applicant's receipt of MDA's decision. The appeal must explain the specific disagreements with MDA's decision(s). It should include any and all documentation supporting the applicant's position. There is no specific format for appeals, but they *must* include:

1. The applicant's name and current mailing address
2. The applicant's Social Security Number or Federal Tax ID Number
3. The street address of the damaged residence
4. The application number assigned to your applicant's assistance program application

All appeals documents must be mailed to:

Mississippi Development Authority
Post Office Box 66
Clinton, MS 39060-0066

MDA will promptly forward all appeals to the Mississippi Development Authority Appeals Board (the "Appeals Board"). MDA will also include a complete copy of the applicant's application file and a written explanation of MDA's position.

The Appeals Board may request additional information from the applicant or from MDA. This information may be requested in any form the Appeals Board specifies.

In its decision, the Appeals Board may affirm, modify, or overturn MDA's decision and may remand any issue to MDA for additional findings or determinations.

The Appeals Board decision will be presented in written form. It will be mailed via regular mail to the applicant's current address.

Decisions by the Appeals Board are final. The applicant will have no right to a judicial review of any Appeals Board decision.

All applicants agree to abide by this procedure as part of the application process.

Applicant Acknowledgements

I agree and acknowledge that the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of the information contained in this application may result in Civil Liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine, imprisonment or both under the provision of Title 18 United States Code Section 1001.

I acknowledge that I have reviewed the MDA Appeals Procedure as found in this application package and agree to abide by its terms.

I acknowledge that MDA, in its sole discretion, reserves the right to adjust the funding pools for Round 1.

I acknowledge that MDA, in its sole discretion, reserves the right to set scoring requirements for application acceptance and rollover into future competitive scoring rounds.

I acknowledge that MDA, in its sole discretion, reserves the right to expand the required information and certifications as part of the application, loan closing, and/or monitoring processes.

I acknowledge that MDA, in its sole discretion, reserves the right to limit or adjust the limit on the number of cumulative properties developed by any one applicant, non-profit organization, corporation, or other ownership group.

As of this date all rental units located on the property which is the subject of the above-referenced application for a grant under the Program are unoccupied and are not rented or leased to any tenants. No tenant leases have been terminated and no tenants have been removed or displaced in order to meet this requirement of the Program.

I further certify that, to the best of my knowledge and belief, all the information on and attached to this application is true, correct, complete, and provided in good faith. I understand that false or fraudulent information on, or attached to, this application may be grounds for MDA not making a loan and may be punishable by a fine and/or imprisonment. I understand that any information I give may be investigated.

Print Applicant Name: _____

Applicant Signature: _____

Date: _____



Equal Housing Opportunity
We Do Business in Accordance With the Fair Housing Act

(The Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988)
**IT IS ILLEGAL TO DISCRIMINATE AGAINST ANY PERSON BECAUSE
OF RACE, COLOR, RELIGION, SEX, DISABILITY, FAMILIAL STATUS
(HAVING ONE OR MORE CHILDREN), OR NATIONAL ORIGIN.**

Anyone who feels he or she has been discriminated against should send a complaint to:
U.S. Department of Housing and Urban Development,
Assistant Secretary for Fair Housing and Equal Opportunity, Washington, DC 20410