

Date: _____

Minnesota Housing Loan #: [Loan Number]

PROPERTY ADDRESS

[Property Full Address] in [Property County] County

OWNER NAME

Last

First

MI

OWNER ADDRESS

Street

City

County

Zip

Part I. CERTIFICATION OF RENTS

By executing this form, Owner of the above property hereby certifies the following is true and correct:

1. All rents charged are equal to or below \$ _____ (“Affordable to the Local Work Force”). Affordable to the Local Work Force is the amount determined by the Minnesota Housing Finance Agency in accordance with Minn. Rules Parts 4900.3610, subp. 2, and 4900.3646, subp. 2(D), as amended or revised.
2. These rents will not be increased without the written permission of the Minnesota Housing Finance Agency in accordance with Minn. Rule 4900.3652, subp. 2, as amended or revised.

Part II. SIGNATURES

Signature of Owner

Date

