



Mississippi Home Corporation
Compliance Monitoring
Payment Processing Form

COMPLETE THIS FORM AND SUBMIT IT WITH YOUR PAYMENT

(If a single check/money order is submitted in satisfaction of several developments/invoices, complete one form for each development. Indicate amount paid per development. Mark the split payment box, where applicable.)

DEVELOPMENT INFORMATION:

Development Name: _____
 Development Number: _____
 Submitted by: _____
 E-mail: _____ Phone: _____

METHOD OF PAYMENT:

	Reference No.	Invoice No.	Split Payment	Project No.
<input type="checkbox"/> Check:	_____	_____	<input type="checkbox"/>	_____
<input type="checkbox"/> Money Order:	_____	_____	<input type="checkbox"/>	_____
<input type="checkbox"/> Other:	_____	_____	<input type="checkbox"/>	_____

FEE:

Fee Type	Description	Rate	Qty.	Total
<input type="checkbox"/> Annual Administrative	Administrative fee	\$50/LI Unit		
<input type="checkbox"/> Manual Processing	Fee for MHC processing unit data should owner elect not to submit through Certification Online	\$40/ unit		
<input type="checkbox"/> Noncompliance	Fee for failure to comply with program rules and regulations	\$55/hour review		
<input type="checkbox"/> Late Submission	Fee for late submission of requested paperwork	\$100/day late		
GRAND TOTAL:				\$ _____

Remit Payment(s) to:

Mississippi Home Corporation
 Compliance Monitoring Division
 735 Riverside Drive
 Jackson MS 39202

*****For MHC Internal Use Only*****

Date payment received: _____ Late No. of days: _____
 Billed Amount: \$ _____
 Invoice Balance: \$ _____

Processing Staff: _____

[Image of Payment]