



POST-CONSTRUCTION CERTIFICATION FORM

Development Name: _____

Development Location: _____

The undersigned Architect/Engineer, General Contractor, and Ownership Entity for the above-referenced development, hereby certify to the following:

1. The Drawings, Description of Materials, or Physical Needs Assessment submitted with the application remain in compliance with HUD requirements and the Corporation's Design Quality Standards outlined in the HOME or HTF Program Guide/Manual.
2. The completed construction/rehabilitation and the plans have met the applicable property standards & rehabilitation standards requirements.
3. The site development has met all federal, state, and local requirements.
4. The design has complied with all applicable permit requirements of the local, state, and federal jurisdictions.

ARCHITECT/ENGINEER ACKNOWLEDGMENT

(Architect/Engineer Firm)

By: _____
(Signature)

Date: _____

Its: _____

License #: _____

WITNESS OF SIGNATURE

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ proved to me through satisfactory evidence of identification to be the person whose name is signed above in my presence.

Signature of Notary Public

Commission Expiration Date

GENERAL CONTRACTOR ACKNOWLEDGMENT

(General Contractor Company)

By: _____
(Signature)

Date: _____

Its: _____

License #: _____

WITNESS OF SIGNATURE

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ proved to me through satisfactory evidence of identification to be the person whose name is signed above in my presence.

Signature of Notary Public

Commission Expiration Date

OWNERSHIP ENTITY ACKNOWLEDGMENT

(Principal Member of Ownership Entity)

By: _____
(Signature)

Date: _____

Its: _____

WITNESS OF SIGNATURE

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ proved to me through satisfactory evidence of identification to be the person whose name is signed above in my presence.

Signature of Notary Public

Commission Expiration Date