

Subsidized Housing Income and Expense Questionnaire

FOR 36 MONTHS: FROM 2009 TO 2011

NAME AND LOCATION OF PROPERTY

OWNER AND ADDRESS OF RECORD

Check Services & Utilities in Rent: Heat () A/C () Gas () Electricity ()
 Carpets () Drapes () Washer/Dryer () Swimming Pool () Party Room ()
 Tennis () Parking () Switchboard () Security ()

| Rent Schedules: # Units | 2011 Base Mo. Rent | 2011 Market Mo. Rent | 2010 Base Mo. Rent | 2010 Market Mo. Rent | 2009 Base Mo. Rent | 2009 Market Mo. Rent |
|----------------------------|-----------------------|-------------------------|-----------------------|-------------------------|-----------------------|-------------------------|
| Effic. | | | | | | |
| 1 Bedrm. | | | | | | |
| 2 Bedrm. | | | | | | |
| 2 Bedrm./den | | | | | | |
| 3 Bedrm. | | | | | | |
| 3 Bedrm./den | | | | | | |
| Other (list) | | | | | | |

| | # of Spaces | 2011 Mo. Rent | 2010 Mo. Rent | 2009 Mo. Rent |
|-----------------|----------------|---------------|---------------|---------------|
| Parking: | | | | |

Income and Expense Information: Please attach copies of the last three years audited profit and loss statements as filed with the regulatory agency.

Mortgage / Sales Information:

1. Is there a current mortgage on this property? Yes _____ No _____
 If yes, please provide the following data:

| | |
|------------------------------------|-------------------|
| Name of mortgagee | _____ |
| Mortgage amount | _____ |
| Market interest rate | _____ |
| Subsidized interest rate | _____ |
| Original loan / value ratio | _____ |
| Original equity investment (\$amt) | _____ |
| Term of mortgage | _____ |
| Date of first payment | _____ |
| Monthly payment | _____ |
| Regulatory limit on equity return | _____ |
| Mortgage balance (if known) | _____ as of _____ |
2. Current dollar amount in residual receipts / surplus cash account _____
 Interest rate _____
3. Current dollar amount in reserve for replacement account _____
4. Is there an annual trustee fee? If yes, enter amount _____
5. Is there an annual mortgage ins. premium? If yes, enter amount _____
6. Please provide: Date Purchased _____ Consideration _____

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.

Signature

Title of Signer

Date

Print/Type Name of Signer

Phone Number

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