

Form 3 SLFRF City of Norman

(Complete form for the Developer, Owner, Management Company, and General Contractor)

Development Team Member Certificate

SLFRF/AFFORDABLE HOUSING TAX CREDIT PROGRAM

Complete the certificate for each applicable team member listed below.

Development Name: _____

Team Member Role: Check box/boxes that apply

Developer General Contractor Owner Mgmt. Company

Other (please specify) _____

The undersigned Development Team Member for the referenced Applicant and Development hereby affirms to the City of Norman that the undersigned has not:

- Been involved in uncured financing defaults, foreclosures, or placement on HUD’s list of debarred contractors;
- Had events of uncorrected material noncompliance with any Federal or State assisted housing programs within the prior seven (7) year period;
- Had Appointment of a Receiver or bankruptcy within the prior seven (7) year period;
- Been removed as a general partner or managing member.
- Failed to meet and maintain any material aspect of a Development as represented in an Application;
- Failed to meet and maintain minimum property standards;
- Failed to bring any Development back into compliance after receiving written notice from OHFA’s Compliance Staff.
- Failed to comply with OHFA’s requests for information or documentation on any Development funded or administered by OHFA;
- Intends to participate in the Development proposed by the Application.

By: _____

Printed Name: _____

Company: _____

SUBSCRIBED AND SWORN to before me on this the _____ day of, _____
_____ 20____.

NOTARY PUBLIC

(SEAL)

My commission expires: _____