ANNUAL CERTIFICATE OF RENTS AND INCOMES

This Certificate is made pursuant to that certain [*loan agreement*] dated _____ , 20__ by and between the [*City of Saint Paul/Housing and Redevelopment Authority of the City of Saint Paul, Minnesota*] and [*name*] ("Agreement").

This Certificate is for the reporting period beginning _____, 20__ and ending December 31, 20__ [or _____, the end of the contract term] ("Reporting Period").

The undersigned, a recipient of the City of Saint Paul Rental Rehabilitation Loan ("Landlord") certifies as follows:

1. As of the end of this Reporting Period the rent of the unit located at _____ is $_____. This represents an increase/decrease of $_____from the previous Reporting Period.

Income Verification (must check one box in part A and box in part B)

1. Check the box below next to the line that describes the total number of persons in the unit.
2. Check the income level under that line that describes the total family income of the unit. When calculating total family income, please consider all income earned from the sources listed on the reserver side.

Part A	☐ 1 person	☐ 2 persons	☐ 3 persons	☐ 4 persons	☐ 5 persons	☐ 6 persons	☐ 7 persons	☐ 8 persons
Part B	☐ ≤ $19,000	☐ ≤ $21,700	☐ ≤ $24,400	☐ ≤ $27,100	☐ ≤ $29,300	☐ ≤ $32,960	☐ ≤ $31,140	☐ ≤ $41,320
	☐ $19,000 to $31,650	☐ $21,701 to $36,200	☐ $24,401 to $40,700	☐ $27,101 to $45,200	☐ $29,301 to $48,850	☐ $32,961 to $52,450	☐ $31,141 to $56,050	☐ $41,321 to $59,700
	☐ $31,651 to $47,600	☐ $36,201 to $54,400	☐ $40,701 to $61,200	☐ $45,201 to $68,000	☐ $48,851 to $73,450	☐ $52,451 to $78,900	☐ $56,051 to $84,350	☐ $59,701 to $89,800
	☐ ≥ $47,601	☐ ≥ $54,401	☐ ≥ $61,201	☐ ≥ $68,001	☐ ≥ $73,451	☐ ≥ $78,901	☐ ≥ $84,351	☐ ≥ $89,801

2. Upon request by the City/HRA the Landlord will promptly produce documents evidencing the above statement.

I certify under penalty of perjury that the information contained in this Certificate is true and correct as of the date this Certificate is executed. I authorize the City of Saint Paul to verify information provided, if necessary

[*Landlord Name*]

By _____
Its _____

Dated: _____, 20__.

Form Date: June 2017