

ATTACHMENT L

**OWNER'S CERTIFICATION OF PARTICIPATION
IN THE
LOW INCOME HOUSING TAX CREDIT PROGRAM**

Project Name:

Project Address:

I certify that (check one):

_____ Neither I nor any other representative of the project identified above currently intends to participate in the Low Income Housing Tax Credit Program (LIHTC).

_____ The project identified above intends to participate in the LIHTC Program and is subject to a Subsidy Layering Review by HUD prior to the execution of the Agreement.

If plans change regarding this project's decision to use the LIHTC Program as indicated above, I will notify Housing Authority of the County of Butte in writing immediately so long as it is prior to the execution of the Agreement to enter into Housing Assistance Payments Contract (AHAP).

WARNING: It is a crime to knowingly make false statements to a Federal agency. Penalties upon conviction can include fine and imprisonment. For details, see Title 18 U.S. Code, Sections 1001 and 1010.

Signature - Owner

Date

Print name and title

Signature - Co-owner

Date

Print name and title