CITY OF OAKLAND HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT

Acquisition and Conversion to Affordable Housing (ACAH) Program NOFA Narrative Certification Form (Certification Form 1)

Project Name/Address: Date of Form:			
Narrative:			
Verification and Certifi	ication - Must be signed below	by the applicant, and included with application document	ation.
To best of my knowledge, I d attached hereto are true cop		ant to the State of California that everything said in this application is true	and that all the documents
Organization Name:			
Applicant Name:			
Applicant Title			
Application Signature:			

CITY OF OAKLAND HOUSING AND COMMUNITY DEVELOPMENT DEPARTMENT Acquisition and Conversion to Affordable Housing (ACAH) Program NOFA Household Certification Form (Certification Form 2)

Project Name/Address:							A			
Date of Form:							1			
		Enter yes/no for each tenant household on property								
Instructions: Complete the highlighted portions of the chart; sign and date form to include with application.	Household Name (First Initial Last Name)	Hh is rent burdened (paying more than 50% income on housing costs)	Hh has received rent increase of >10% over 12 months	children (under 17		s Hh qualifies as disabled	Hh qualifies as Extremely Low Income			
Tenant Household 1				I			/			
Tenant Household 2										
Tenant Household 3										
Tenant Household 4										
Tenant Household 5										
Tenant Household 6										
Tenant Household 7										
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Tenant Household 21										
Tenant Household 22										
Tenant Household 23										
Tenant Household 24										
Tenant Household 25										
Verification and Certif	fication - Must be signed below	w by the app	licant, and i	ncluded wit	.h applicatio	n document	ation.			
To best of my knowledge, I declare under penalty of perjury pursuant to the State of California that everything said in this application is true and that all the documents attached hereto are true copies of the originals.										
Organization Name:								_		
Applicant Name:										
							A			
Applicant Title							4			
Application Signature:										