

VHFA LIHTC Compliance Monitoring Tenant File Review

Project Name: **Project Name** Unit #: 1 # of BD: _____

Location: **City/Town** Tenant: _____ # of People: _____

Term of Initial Lease	Move-in (Transfer) Date
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Initial					
Gross Annual Income (GAI)	Max Allowable Income Limit (MAIL)	Tenant Rent	Utility Allowance	Gross Rent	LIHTC Max Rent

List source and amounts adding up to Current Gross Annual Income: Verified?

	\$	
	\$	
	\$	
Total	\$	

Current					
GAI	MAIL	Tenant Rent	Utility Allowance	Gross Rent	LIHTC Max Rent

Most Recent Recertification Date	Is Current GAI > 140% of MAIL?
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All full-time students in household? _____ If yes, LIHTC eligible? _____ Is this unit in compliance? _____

TO BE COMPLETED BEFORE FILE REVIEW

Year of Allocation	<u>199</u>	County:	<u>County</u>	Building #:	<u>1</u>	BIN #:	<u>VT-98-00000</u>
1st Yr of Credit:	<u>199</u>						
Election:	<input type="checkbox"/> 40/60	<input type="checkbox"/> 20/50	Rent Calculation:	<input type="checkbox"/> BR Size (1.5)	<input type="checkbox"/> # of People	<input type="checkbox"/> Effective 2/7/94 (1.5 Formula)	

Inspected by: _____ Date: _____