



## **Certification of Consistency for Projects Serving Low-Income Minority Areas**

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### **Application Name:**

Instructions: This form is to be completed for submission of points under the **Projects Serving Low-Income Minority Areas** scoring category of the Affordable Housing Program (AHP) General Fund application.

This form is to be completed by the Plan Author, a representative of the Plan Approval Committee or the Plan Manager. This form is not to be completed by the sponsor, unless the sponsor is also the Plan Author, a representative of the Plan Approval Committee or the Plan Manager.

### **Section I**

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Title of plan:

Date of plan approval (must be within 7 years from June 9, 2023):

Date of plan update approval (must be within 7 years from June 9, 2023, if applicable):

The project is consistent with and meets targeted priorities in the plan      Yes      No

Include the project address(es) located within the area covered by the Plan. Attach additional pages if necessary.

**Note:** If the project is multi-site and there are both known and unknown sites at the time of application, please provide the addresses of all known sites below. If the project is multi-site and all sites are unknown at the time of application, please include the central site location below. This information should mirror the entries provided within the Site Information screen of the application.

<b>Community Planning Property Address(es)</b>	

If all project sites are known or identified at the time of application, are at least 75 percent of the project's total units located within the boundaries of the plan's consideration?      Yes      No

If the project contains unknown or unidentified sites at the time of application, is an owner-occupied, will at least 75 percent of the project's units be located within the area covered by the Plan?      Yes      No

### **Section II**

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Indicate who is signing this form:

Plan Author

Plan Approval Committee Representative

Plan Manager

Please explain how you are authorized to sign this form on behalf of the referenced plan:

## Certification

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I, the undersigned, hereby certify that: (1) I am a duly authorized representative of the Plan Author, Plan Approval Committee, or Plan Manager as specified in the check box above; (2) I have reviewed the property address(es) within the project's plan, and at least 75 percent of the project's properties are within the boundaries of the community plan; (3) as of the date listed beside my signature below, the community plan noted on this form is in effect; and (4) all the information and statements contained in this form are true, complete, and accurate.

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Signature

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Date

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Name (Typed)

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Phone Number

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Title

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Organization