| 1                                       | Form  |
|---|---|
| Housing Assistance<br>Funded by HUD     |   |
| PROJECT BASED L<br>PERMANENT HOUSING    |   |
|   | Tax Credit                                  |
| Date://                                 | Scatter Si                                  |
| To:<br>Housing Specialist/Case Manager: | /<br>/ Housing Assistance/ -Referral Agency |
| Fax #:                                  |   |
| From: Organization Rep/Agent:           |   |
| (Phone #):                              |   |
| Notes: Tenant Name:                     | SSN:  |
| Address:                                | , CA  |
| Contract Rent: \$                       |   |
| Tenant Portion: \$                      |   |
| Security Deposit: \$                    |   |
| Contract Effective Date://_             |   |
| Payee Name and Address:                 |   |
|   |   |
|   |   |

Sincerely,

Rep/Agent Signature\_\_\_\_\_

\_\_ Date\_

AFFORDABLE HOUSING FORM

Revised 7.1.2020