

## Submission Checklist for 811PRA Contracts

Below are the required contents to be submitted to MSHDA for RAC's

### I. Rent Schedule, form HUD-92458

The Rent Schedule is to be submitted with the following components answered:

- \_\_\_\_\_ Part A Apartment Rents
- \_\_\_\_\_ Part B Items Included in Rent
- \_\_\_\_\_ Part C, D, and E – *Answered, if applicable.*
- \_\_\_\_\_ Part F Maximum Allowable Rent Potential – *Leave blank.*
- \_\_\_\_\_ Part G Information on Mortgagor Entity
- \_\_\_\_\_ Part H Owner Certification Entity
- \_\_\_\_\_ Part I HUD/Lender Approval – *Leave blank.*

### II. Utility Policy

\_\_\_\_\_ The property's current Utility Policy is to be submitted.

### III. The following information fields are to be filled out, for the project's iREMS record

#### 1. Owner Information

- a. Owner Entity TIN #: \_\_\_\_\_
- b. Owner Entity DUNS #: \_\_\_\_\_
- c. Owner Legal Structure (e.g., Limited Partnership): \_\_\_\_\_
- d. Mortgagor Type (e.g., Non-Profit, Profit Motivated): \_\_\_\_\_
- e. Owner Contact Information:
  - i. Name of Contact Individual: \_\_\_\_\_
  - ii. Mailing Address: \_\_\_\_\_
  - iii. Phone: \_\_\_\_\_
  - iv. Fax: \_\_\_\_\_
  - v. Email: \_\_\_\_\_

2. Management Agent Information

a. Management Agent Legal Name: \_\_\_\_\_

b. Management Agent TIN #: \_\_\_\_\_

c. Management Agent Address: \_\_\_\_\_

d. Management Agent Effective Date: \_\_\_\_\_

e. Management Agent Contact Information

i. Name of Contact Individual: \_\_\_\_\_

ii. Mailing Address: \_\_\_\_\_

iii. Phone: \_\_\_\_\_

iv. Fax: \_\_\_\_\_

v. Email: \_\_\_\_\_

3. Property Information

a. Building Type:

- Row       Townhouse       Detached       Semi-Detached  
 Mid-Rise       Walk-up/Garden       High-Rise/Elevator

b. Building Count (enter numeric value): \_\_\_\_\_

c. Site Manager Contact Information:

i. Name of Contact Individual: \_\_\_\_\_

ii. Mailing Address: \_\_\_\_\_

iii. Phone: \_\_\_\_\_

iv. Fax: \_\_\_\_\_

v. Email: \_\_\_\_\_

4. Additional Items

Please complete the following information, if applicable

*The following information is required, if the property is currently an existing or previously FHA-insured or a multi-family assisted property.*

i. iREMS Property ID, if exists: \_\_\_\_\_

ii. TRACS Project Name, if exists: \_\_\_\_\_

iii. Related Subsidy Contract Number, if exists: \_\_\_\_\_

**IV. Breakdown by unit type: 811PRA Units**

Number of 811PRA Assisted Units	Number of Bedrooms in Each Unit Type	Contract Rent	Utility Allowance	Gross Rent	Maximum Annual Contract Commitment (Number of 811PRA Units x Gross Rent)
	1BR =				
	2BR =				

Total 811PRA assisted units: \_\_\_\_\_

 Total *non-assisted* units which are also restricted to persons with disabilities: \_\_\_\_\_

Total number of units at the property: \_\_\_\_\_

**V. Breakdown by unit-type: Non-assisted units**

Breakdown of Non-Assisted Units:	
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Example:

 30 non-assisted units = 10-1BR, 15-2BR, and 5-3BR

Total non-assisted units = 30

Total 811PRA assisted units = 10

Total units at the property = 40

Signature: \_\_\_\_\_

Date: \_\_\_\_\_