

Enter Project Name

Enter MSHDA Project Number

Enter Project City

Submitted By: _____

Date: _____

Instructions

1. Identify the owner of the project by completing the information below.
2. If the combined percentages of ownership total less than 100%, attach an explanation.
3. Attach additional sheet(s) if necessary

Name of Ownership Entity:	
Type of Entity (Indv, Corp, Ptrnshp, etc.)	
Taxpayer Identification Number	
Street Address	
City, State, Zip Code	
Phone Number	
Primary Contact Person	
Address (if different from above)	
Phone Number (if different than above)	
E-mail Address of Contact Person	

Name of Limited Partner:	
Percent of Ownership	
Type of Entity	
Taxpayer Identification Number	
Street Address	
City, State, Zip Code	
Phone Number	
Name of Primary Contact Person	
E-mail Address of Contact Person	

General Partner #1:	
Percent of Ownership	
Taxpayer Identification Number	
Type of Entity	
Non-Profit (Y/N)	
Street Address	
City, State, Zip Code	
Phone Number	
Name of Primary Contact Person	
E-mail Address of Contact Person	
Sub-owner #1, if applicable	
List add'l sub-owners, if applicable	

General Partner #2:	
Percent of Ownership	
Taxpayer Identification Number	
Type of Entity	
Non-Profit (Y/N)	
Street Address	
City, State, Zip Code	
Phone Number	
Name of Primary Contact Person	
E-mail Address of Contact Person	
Sub-owner #1, if applicable	
List add'l sub-owners, if applicable	

General Partner #3:	
Percent of Ownership:	
Taxpayer Identification Number	
Type of Entity	
Non-Profit (Y/N)	
Street Address	
City, State, Zip Code	
Phone Number	
Name of Primary Contact Person	
E-mail Address of Contact Person	
List add'l sub-owners, if applicable	

Other Ownership Interest:	
Describe:	
Percent of Ownership	
Type of Entity	
Non-Profit (Y/N)	
Street Address	
City, State, Zip Code	
Phone Number	
Name of Primary Contact Person	
E-mail Address of Contact Person	
List add'l sub-owners, if applicable	