Attachment 4

2009 Management Experience Form

Management Company Name:		Tax ID:	
Contact Person:		Phone Number:	
Address:		City:	
State:		Zip Code	

List the names of all principals of the management company for the proposed development.

Principal Name	Role of Principal or Affiliate	% Interest in Ownership of Company

Certification and Authorization

I (individual, corporation, partner, member, or other entity) certify that I am applying to the Mississippi Home Corporation (MHC) for approval to participate as a principal in the role and development listed above based upon my following previous participation record and this certificate. I certify that all the statements made by me are true, complete and correct to the best of my knowledge and belief and are made in good faith, including the data contained on page 2, under the penalties of perjury.

I acknowledge that federal funds may be used in connection with the development, and that these certifications will be relied on by MHC, its staff members and/or its employees except in its capacity in the development as indicated above and do not presently have any involvement with any decision-making process and am not presently in a position to gain inside information with respect to any activities assisted with federal funds.

I further certify that the organizations relevant experience, detailed on page 2 of this certification, contains a listing of every assisted or insured development of HUD, RD, MHC and other state and local government housing finance agencies in which I have been or am now a principal.

I certify for the period beginning 3 years prior to the date of this certification, and except as shown by me on the certificate, that:

a) No mortgage on a development listed by me has ever been in default, assigned to the state or foreclosed. Nor has mortgage relief by the mortgagee been given:
b) I have not experienced defaults or non-compliances under any HUD, RD, MHC and other state and local government housing finance agencies development;
c) To the best of my knowledge, there are no unresolved findings raised as a result of HUD, RD or MHC audits, management reviews or other government investigations concerning me or my developments nor have I had one or more public (federal, state or local) projects terminated for cause of default;
d) There has not been a suspension or termination of payments under any HUD, RD, MHC and other state and local government housing finance agency assistance contracts in which I have had a legal or beneficial interest attributable to my fault or negligence;
e) I have not been convicted of or had a civil judgment rendered against me for commission for fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public transaction or contract, violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property and am not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offense enumerated in this paragraph;
f) I am not presently debarred, suspended, proposed for debarment or suspension, declared ineligible, or voluntarily excluded from any transactions or construction projects involving the use of federal funds or the Housing Tax Credit Program;
g) I have not defaulted on an obligation covered by a surety or performance bond and have been the subject of a claim under an employee fidelity bond.

I certify that all the names of the parties, known to me to be principals in this development in which I proposed to participate, are listed above.

I authorize MHC to obtain from and release to any source information regarding me and my experience relative to the experience detailed on page 2 of this certification.

For general partners or development owners only:
I further certify that all parties who are principals or who are proposed as principals here are listed above and no principals or identities of interest are concealed or omitted. Statements above to which I cannot certify have been deleted by striking through the words with a pen. I have initialed each deletion (if any) and have attached a true and accurate signed statement, if applicable, explaining the facts and circumstances which help qualify me as a responsible principal for participation in this development.

Type or Print Name of Principal	Signature of Principal	Tile, Role or Capacity	Date	Telephone Number

Management Experience

Complete the information below for each development your organization currently manages. List only other affordable housing (e.g. HUD, RD, Tax Credit) developments. ***Do not include developments approved but not yet placed in service***. Attach copies of this form as needed.

Management Company: | Contact Person: | Contact Phone:

Development Information	Development Type (NC, REHAB, or ACQ/REHAB)	# Units	# Low-Income	Date Placed in Service	#Years Managed	Compliance Status	HFA, HUD or RD Contact
Development Name: _____						**8823s Filed?** Yes☐ No☐	Agency Name:
							Contact Person:
Development Contact/Phone: _____ _____						**Corrected?** Yes☐ No☐	Address:
							Phone Number:
Development Name: _____						**8823s Filed?** Yes☐ No☐	Agency Name:
							Contact Person:
Development Contact/Phone: _____ _____						**Corrected?** Yes☐ No☐	Address:
							Phone Number:
Development Name: _____						**8823s Filed?** Yes☐ No☐	Agency Name:
							Contact Person:
Development Contact/Phone: _____ _____						**Corrected?** Yes☐ No☐	Address:
							Phone Number: