HOME Monitoring Checklist 6-D

Project Compliance Report: Rental Housing

Project Name: _____ **Owner Name:** _____

Project ID: _____ **Reporting Period: from** _____ **to** _____

A	B	C	D	E	F	G	H	I	J	K	
UNIT NUMBER	LOW OR HIGH HOME RENT UNIT?	TENANT NAME	NO. PERS.	NO. BR'S	DATE OF LAST INCOME CERT.	MAX RENT	UTILITY ALLOWANCE	MONTHLY UNIT RENT	TENANT'S ANNUAL GROSS INCOME	COMPLIANCE Y/N?	UNIT STATUS (PJ Only)

Reviewer: _____ **Date:** _____