



**Low Income Housing Tax Credit**  
**Check List for Annual Social Service Models and/or**  
**Special Needs Packages**

**This check list must be used when submitting social service or special needs packages to the Agency for approval. Please check off each item as it pertains to the property and submit complete package on or before January 31st. Failure to submit by the deadline is noncompliance that shall be reported to the IRS.**

**LITC#:** \_\_\_\_\_

**Property:** \_\_\_\_\_

**Property Contact Information:**

**Owner Contact Information:**

**Site Mgr:** \_\_\_\_\_

**Owner:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Managing Agent Contact Information:**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Check all that apply:**

- Annual Certification for Projects with Social Service Models (attach job description for onsite service coordinator (if applicable), three current (3) monthly newsletters with calendar and supporting documentation for each service provided to residents)
- Annual Certification for Projects in the Supportive Housing Cycle or with Set-Aside Special Needs Unit with supporting documentation
- Annual Certification for Projects in the Age-Friendly Senior Cycle (funded in 2019 and later)
- Special Needs Population Certification Form with supporting documentation
- Frail Elderly Certification with supporting documentation

**\*\*Please email documentation via Leapfile to the attention of Maria DiMaggio at [mdimaggio@njhmfa.gov](mailto:mdimaggio@njhmfa.gov)\*\***

**To access monitoring forms or the list of HMFA contacts, visit  
<http://www.state.nj.us/dca/hmfa/developers/credits/compliance/>**

**\*\* If you have any questions, feel free to contact Maria DiMaggio at (609) 278-7512. \*\***