NEW JERSEY HOUSING AND FINCANCE AGENCY
LOW INCOME HOUSING TAX CREDIT
PROJECT STATUS FORM

Property Name: **LIHTC #:**

Ownership Name:

General Partner's Contact Name: **Phone #:**

Limited Partner's Contact Name: **Phone #:**

Please check off and complete the following information so we can keep our files updated. Please complete all that may apply to your property:

_____ Property is currently under construction. We expect a completion date of _____.

_____ Property has placed in service. The placed in service date is _____.

_____The date of the first resident to move in is _____.

_____Property is _____% occupied as of the date this form is completed.

_____Property is 100% occupied as of _____.

The above information is true and accurate to the best of my knowledge and belief.

_____ _____
SIGNATURE OF OWNER/REPRESENTATIVE DATE