

**EXHIBIT 3YDP- 3-Year Decontrol Period  
ANNUAL OWNERS CERTIFICATION OF CONTINUING COMPLIANCE**

Property Name: \_\_\_\_\_ Property Number: \_\_\_\_\_

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

Certification Dates: From: 0 \_\_\_\_\_ To: 0 \_\_\_\_\_

Please Complete and submit Form To: MISSOURI HOUSING DEVELOPMENT COMMISSION

Attention: Compliance/Asset Management Support

Address: 505 N. 7<sup>th</sup> , Suite 2000, St. Louis, MO 63101

Phone: 314-877-1350

***THIS SECTION MUST BE COMPLETED BY THE OWNER***

I, \_\_\_\_\_, (Owner) certify that all provisions pursuant to IRC Section 42(h)(6)(E)(ii) with the Land Use Restriction Agreement and Good Cause Eviction Provisions were accomplished as follows:

If a low-income unit in the property became vacant during the year; the prior existing low-income household did not vacate due to an eviction or termination of residency for less than "good cause."

**YES**                       **NO**

All remaining low-income units in the property have remained rent-restricted under the Final Schedule II or no increase was implemented above 7% annually.

**YES**                       **NO**

**NOTE: Please attach the annual rent roll covering this certification period.**

Date Property began 3-year Decontrol Period: \_\_\_\_\_

*NOTE: Failure to complete this form in its entirety will result in noncompliance with the agreed upon requirements. Signature of anyone other than the property owner is not permitted without the prior written approval of MHDC.*

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

Address: \_\_\_\_\_

Tax Identification Number: \_\_\_\_\_

**Electronic Submission Agreement and Disclosure:** Once signed, a scanned version of this document may be submitted electronically to MHDC via email to [compliance.exhibits@mhdc.com](mailto:compliance.exhibits@mhdc.com). If submitted as such, the undersigned agrees that the signature thereon is to be treated as an original signature; and the document (in the form of a photocopy, PDF, or other electronic form) is to be treated as an original document with the same legal effect and enforceability as the original signed document. Regardless, MHDC in its sole and absolute discretion reserves the right to request an original signed hard copy of the document as it deems necessary. The undersigned is responsible for retaining the original signed hard copy in his/her files.

By signing below, I swear/affirm that the above information in this certification and any attachments are true and made UNDER PENALTY OF PERJURY.

Owner Signature: \_\_\_\_\_

STATE OF MISSOURI	)
	)ss.
County of _____	)
The foregoing instrument was acknowledge before me this ____ of _____, 20__ by _____ Member of	
_____	Owner(s) Name
Owner(s) Entity	
My commission expires: _____	_____
	Notary Public