2013 FLORIDA HOUSING FINANCE CORPORATION LOCAL GOVERNMENT VERIFICATION OF STATUS OF SITE PLAN APPROVAL FOR MULTIFAMILY DEVELOPMENTS

FHFC Application Reference:	elopment is applying/has applied for funding from the Corporation such as the Request al/Application)
Name of Development:	
within a city) or county (if located in the unincorporated area of the county).)	provide the street name, closest designated intersection and either the city (if located
Zoning Designation:	
Mark the applicable statement:	
or (c) rehabilitation, without new construct process. The final site plan, in the zoning submission deadline for the above reference	ew construction, or (b) rehabilitation with new construction, tion, that requires additional site plan approval or similar designation stated above, was approved on or before the def FHFC Request for Proposal/Application by action of the body; e.g. council, commission, board, department, division,
or (c) rehabilitation, without new construct process, and (i) this jurisdiction provides ei approval which has been issued, or (ii) site and/or the rehabilitation work; however, this nor conceptual site plan approval, nor is any approval. Although there is no preliminary	ew construction, or (b) rehabilitation with new construction, tion, that requires additional site plan approval or similar ither preliminary site plan approval or conceptual site plan e plan approval is required for the new construction work is jurisdiction provides neither preliminary site plan approval other similar process provided prior to issuing final site plan or conceptual site plan approval process and the final site site plan, in the zoning designation stated above, has been
referenced FHFC Request for Proposal/App	erformed on or before the submission deadline for the above blication by the appropriate City/County legally authorized truent, division, etc., responsible for such approval process.
3. O The above-referenced Development, in the z new construction and does not require additional does not require	oning designation stated above, is rehabilitation without any onal site plan approval or similar process.
CERT	TIFICATION
I certify that the City/County of(Name of City or County) approval as specified above and I further certify that the infe	has vested in me the authority to verify status of site plan ormation stated above is true and correct.
Signature	Print or Type Name
	Print or Type Title

This certification must be signed by the applicable City's or County's Director of Planning and Zoning, chief appointed official (staff) responsible for determination of issues related to site plan approval, City Manager, or County Manager/Administrator/Coordinator. Signatures from local elected officials are not acceptable, nor are other signatories. If this certification is applicable to this Development and it is inappropriately signed, the certification will not be accepted.