FLORIDA HOUSING FINANCE CORPORATION LOCAL GOVERNMENT VERIFICATION OF CONTRIBUTION - FEE WAIVER FORM

Name of Development:	
Development Location: (At a minimum, provide the address number, street name and city, and/or provide the city (if located within a city) or county (if located in the unincorporated area Sites, the Development Location stated above must reflect the Scattered Site who	of the county). If the Development consists of Scattered
The City/County of, pursuant tr, wa (Reference Official Action, cite Ordinance or Resolution Number and Date)	0
, wa (Reference Official Action, cite Ordinance or Resolution Number and Date)	iived the following fees:
Amount of Fee Waiver: \$	·
No consideration or promise of consideration has been given wiforegoing, the promise of providing affordable housing does no be effective as of the Application Deadline for the applicable R the proposed Development.	of constitute consideration. This fee waiver must RFA, and is provided specifically with respect to
CERTIFICATIO)N
I certify that the foregoing information is true and correct and the date required in the applicable RFA.	nat this commitment is effective at least through
Signature Prin	t or Type Name
Pri	nt or Type Title
NOTE TO LOCAL GOVERNMENT OFFICIAL: Waivers that are not but are instead of general benefit to the area in which the Developmer Development. Further, the fact that no impact fees or other fees are levic DOES NOT constitute a "Local Government Contribution" to the propose by the local jurisdiction but the nature of the proposed Development ex is not subject to impact fees), for purposes of this form, no "Local Gowarded.	nt is located will NOT qualify as a contribution to the ed by a local jurisdiction for ANY type of development osed Development. Similarly, if such fees ARE levied empts it (e.g., typically, a Rehabilitation Development
This certification must be signed by the chief appointed official (staff) County Manager/Administrator/Coordinator, Chairperson of the City County Commissioners. Other signatories are not acceptable. The Appendix the certification is improperly signed. To be considered for points, the a precise dollar amount and cannot include words such as estimated, up	Council/Commission or Chairperson of the Board of pplicant will not receive credit for this contribution if amount of the contribution stated on this form must be
If the Application is not eligible for automatic points, this contribution corrections or 'white-out' or if the certification is altered or retyped. The contribution is altered or retyped.	
Please note: This form may be modified by Florida Housing Finance C	Corporation per Section 67-60.005, F.A.C.
(Form Rev. 08-16)	