

LANDLORD TRAINING AND EXPERIENCE:

Date completed City of Milwaukee Landlord Training Certification: _____
(A completion certificate must be included with your application)

If you have additional training, education, or other experience with rental property ownership, rehabilitation and/or management, please describe below (feel free to attach a resume or any additional information which further demonstrates your capacity to complete this project):

Do you plan to use a professional property management firm to manage the property you will rehabilitate through the Rental Rehabilitation Program? If so, please provide its name and contact information:

MATCHING FUNDS:

What is the source of funds which you propose to utilize to pay for your matching share of the Rental Rehab project costs (e.g. savings/checking account, bank loan, etc.): _____
(Proof of sufficient matching funds must be included with your application)

CITY POLICIES

Applicant/Developer certifies that it as individual and/or member of a corporation or partnership is not in violation of the following policies:

- Delinquent taxes due the City
- Building or health code violations that are not being actively abated
- Convicted of violating an order of the Department of Neighborhood Services or Health Department within the previous year
- Convicted of a felony crime that affects property or neighborhood stability or safety
- In Rem foreclosure by the City

CERTIFICATION AND ACKNOWLEDGEMENT

I certify that this Supplementary Qualification Statement is true and correct. I acknowledge that any omissions, or false or misleading information can be cause for loan denial.

Signature (applicant)

Signature (co-applicant)

Date

Date



**Neighborhood Improvement
Development Corporation**
In partnership with the City of Milwaukee