## New Jersey Housing and Mortgage Finance Agency Low Income Housing Tax Credit Project Status Form

Project Name:	LITC#
Project Address:	County:
	Phone:
<b>Property Manager:</b>	Email:
Owner's Name & Address	Phone:
	Email:
Please check and complete all that apply to the property:	
☐ "New property" is under construction. Expected completion date is	
☐ Property is under Rehab. Expected completion date is	
☐ The acquisition date is	
☐ The placed-in-service date is	·
☐ First unit occupied on	(excludes Acquisition/Rehab projects)
☐ Property is	% occupied as of the date this form is completed.
100% occupancy is expected by	
☐ Property is 100% occupied as of	
The above information is true and accurate to the best of my knowledge and belief.	
SIGNATURE OF OWNER/CENERAL PART	NFR DATE