NYS CDBG PROGRAM – Multi-Family Rental Rehabilitation

RENTAL PROJECT COMPLIANCE REPORT

A	B	C	D	E	F	G	H	I	J	K	L
Unit #	No. of Bedrooms	Low or High CDBG Rent Unit Designation	Tenant Name	Household Size	Annual (gross) income	Date of Last Income Re-examination	Low or High CDBG Rent	Utility Allowance	Max Actual Rent (H-I)	Unit in Compliance? (Y or N)	Comments
Example	3	H	L. Smith	4	$56,000	05/2020	$500	$80	$420	Y	

CDBG Project Number: _____ **Reporting Period:** _____

Owner Signature: _____ **Date:** _____