ORHA OTSEGO RURAL HOUSING ASSISTANCE, INC

PO BOX 189 | MILFORD, NY 13807 | 607-286-7244 www.otsegoruralhousing.org

# Otsego County Vacant Rental Program (VRP) Application Packet

This packet contains all of the forms required to apply for the Otsego County Vacant Rental Program (VRP). It also contains a selection of optional forms that may assist you in your application or may be required for your specific project.

For application instructions and other information, refer to the Otsego County VRP Owner Information Packet, available at otsegoruralhousing.org/vrp.

Please ensure that you have accurately completed all required forms and that all property owners have signed where required before you submit your application.

If you have questions as you complete your application, please contact Bridget Stith by calling 607-286-7244 ext. 1 or emailing VRP@otsegoruralhousing.org.

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# Otsego County Vacant Rental Property Program (VRP)
# Property Assistance Application

| BASIC APPLICANT INFORMATION | | | |
|---|---|---|---|
| Applicant Name: | | | |
| Phone: | | Email: | |
| Mailing Address: | | | |
| Ownership Entity: | ☐ Individual ☐ Multiple Individuals ☐ Nonprofit ☐ Business Entity ☐ Trust ☐ Other | | |
| Property Deed/Title in Name of *(list all)*: | | | |
| If Business Entity, List All Principals: | | | |
| **Owner Permanent Residence Address (If multiple owners, list address of main contact.)** | | | |
| Street Address: | | | |
| City, State Zip: | | County of Residence: | |
| Total Number of Properties Owned by or Under Control of ALL Applicants | | Total Number of Residential Rental Units owned by or Under Control of ALL Applicants | |

| BASIC PROPERTY INFORMATION | | | |
|---|---|---|---|
| Property Address: | | | |
| Municipality for Property Taxes: *List town AND village, if applicable* | | | |
| Number of Housing Units *(current)* *Must be no more than 5 to be eligible* | | Year Built: | |
| Number of Housing Units Anticipated *(post-rehabilitation)* *Must be no more than 5 to be eligible* | | Approx. Date of Vacancy: *List multiple units in property description below.* | |
| Number of Vacant Units: | | Current Use of the Property: | ☐ Residential<br>☐ Mixed-Use<br>☐ Other |
| Number of Vacant Units to be Assisted with VRP Grant Funds: | | Partially or Fully Vacant: | ☐ Partially Vacant<br>☐ Fully Vacant |
| Describe the property, including its current condition and any current uses and occupancy: | | | |

| GRANT REQUEST | | | |
|---|---|---|---|
| Type of Grant Award Requested | ☐ Standard<br>*Up to $50,000 per eligible unit - units affordable to 80% AMI level)* | ☐ Enhanced<br>*Up to $75,000 per eligible unit - units affordable to 60% AMI level* | |
| Estimated Number of Vacant Units to be Assisted with VRP Grant Funds | | Estimated Total Grant Funds Requested | |

| CONFLICTS OF INTEREST | | |
|---|---|---|
| Do you have any personal, business, or familial relationships with the staff of ORHA? | ☐ Yes | ☐ No |
| Do you have any personal, business, or familial relationships with the staff of Opportunities for Otsego, Inc.? | ☐ Yes | ☐ No |
| If yes, does the staff member work in the Energy Services department? | ☐ Yes | ☐ No |
| Identify any potential conflicts of interest in receiving VRP grant assistance, including details regarding any of the questions above you answered “yes” to or any other potential conflicts. | | |
| | | |

| SCOPE OF WORK |
|---|
| Describe the anticipated rehabilitation project you hope to complete with VRP grant assistance. You should describe, in detail, the work required to make the unit habitable and marketable, based on your knowledge of the property. Use additional pages if necessary.<br>If awarded funds, ORHA’s partner Opportunities for Otsego, Inc. will prepare a detailed scope of work and cost estimate for your project. |
| |

| PROJECT READINESS | |
|---|---|
| Have you already received any estimates/bids or written scopes of work for this project? | ☐ Yes* ☐ No |
| Does the proposed project require a zoning variance? | ☐ Yes ☐ No |
| Have you obtained all or some of the necessary permits or other approvals for this project? | ☐ Yes* ☐ No |
| Has this property received a lead-based paint inspection or risk assessment from a certified professional? | ☐ Yes* ☐ No |
| Has this property received an asbestos inspection or survey from a certified professional? | ☐ Yes* ☐ No |
| Will the proposed project require architectural or engineering services? | ☐ Yes ☐ No |
| **If yes,** is the necessary architectural or engineering work complete or underway? | ☐ Yes* ☐ No |
| Are there other funding sources already committed to this project? | ☐ Yes ☐ No |
| If the total project cost exceeds VRP limits, do you have access to other funds to pay for a portion of the project? | ☐ Yes ☐ No |
| ***If you answered yes to any of these questions, submit copies of the relevant documents with your application.*** | |
| Please describe the status of your project, including details about your responses to the questions above, the source and status of any other funding, or any other information regarding project readiness. | |
| | |

| PRIORITY SCREENING | |
|---|---|
| If your permanent residence is not local (in Otsego County or any of its directly neighboring counties), do you own any other rental property in Otsego County? | ☐ Yes ☐ No<br>☐ N/A – Local |
| **If yes,** does a company or individual located in Otsego County or a neighboring county currently assist you with property management? | ☐ Yes ☐ No |
| **If no,** do you intend to have a company or individual located in Otsego County or a neighboring county assist you with property management, once the project is complete? | ☐ Yes ☐ No |
| Is this property located within a public transit route's maximum route deviation distance? | ☐ Yes ☐ No |
| Is this property located within a reasonably safe 20-minute walk of a public transit stop or of basic amenities like a grocery store, pharmacy, or school?<br><br>"Reasonably safe" means the walking route has sidewalks for the entire trip **OR** it meets *all* of the following criteria:<br><br>○ Good visibility throughout (no significant curves or hills)<br>○ Speed limit for roads along the walking route is never more than 45 mph<br>○ Space for pedestrians throughout (wide shoulders and/or a large amount of room to leave the roadway if needed, no deep ditches or steep drop-offs trapping pedestrians on the road)<br>○ No other characteristics that would make a pedestrian feel unsafe walking the route, such as crossing more than 2 lanes of traffic with no pedestrian signal | ☐ Yes ☐ No<br><br>If yes, what is within walking distance?<br>☐ Bus stop<br>☐ Grocery store<br>☐ Pharmacy<br>☐ School<br>☐ Other (specify): |
| Is this property located within the City of Oneonta or the boundaries of a village? | ☐ Yes ☐ No |
| **If yes,** specify here: | |
| **If no,** are there at least 5 other buildings (other than garages, barns, and other obvious outbuildings) within 500 feet of the building containing the vacant unit(s)? | ☐ Yes ☐ No |
| Does at least 1 unit included in the project qualify for the Minimum Accessibility priority?<br>**If yes:** complete the Minimum Accessibility attestation and submit with this application. | ☐ Yes ☐ No |
| Has any owner of this property ever rented to a tenant who participated in a housing assistance program, such as Section 8? | ☐ Yes ☐ No |
| **If yes,** list the program and the organization that administers it here: | |

## APPLICANT ATTESTATIONS

Applicants for VRP assistance must agree with the following by checking the box to the right of each statement.

| Responsible Owner Verification Statements | I Agree |
|---|---|
| Payments on the primary mortgage and other loans secured by this property are current and the property is not in foreclosure proceedings **OR** there is no current mortgage or loan secured by the property and the property is not in foreclosure proceedings. | |
| There are no delinquent property taxes for this property, including local, county, school, and other applicable taxes. | |
| There are no delinquent property taxes for any other property owned by any of the owners of this property, including local, county, school, and other applicable taxes. | |
| There are no overdue utility payments for this property, including any gas, electric, water, and other utilities applicable to this property. | |
| There is an active comprehensive insurance policy in effect for this property **OR** I can document that the property is not currently insurable but will be insured after work is completed. | |
| No owners of the property are currently involved in any bankruptcy proceedings. | |
| There are no outstanding or unresolved federal, state, or local liens on the property. | |
| No owner of this property has been found in violation of any local, state, or federal fair housing laws or regulations with any properties in their real estate portfolio or themselves as the property owner(s) including any properties under their control through a subsidiary or other entity/owner. | |
| No owner of this property is currently under investigation by the Department of Health (DOH), the Environmental Protection Agency (EPA), the Department of Housing and Urban Development (HUD), any state agency, or any local government, for any violations of laws or regulations. | |
| Each owner of this property is in compliance with all applicable registration and inspection requirements for all active rental properties they own. (That is, any active rental property in the City of Oneonta has a valid Certificate of Compliance; any property with three or more active rental units in Otsego County has a valid Fire Safety Certificate; and any similar requirements in other jurisdictions are met.) | |
| Each owner of this property has accurately disclosed all properties in their real estate portfolio, the number of residential units therein, and the number of those units that are currently rented as housing. | |
| **Acknowledgement of Select Grant Conditions and Requirements** (other requirements apply) | **I Agree** |
| The units I am applying to receive assistance for are vacant and are either not currently habitable or not currently marketable due to their condition. | |
| I have not, and will not, displace a tenant, voluntarily or involuntarily, either permanently or temporarily for the purposes of making a unit eligible for grant assistance. | |
| I understand that if my property was constructed prior to 1980, the program requires a Lead Risk Assessment and that the scope of work is required to address any identified lead hazards. | |
| If my property is located in a flood plain, I understand that I may be required to obtain flood insurance to receive VRP assistance. | |
| I will facilitate necessary site visits by ORHA and its partners to verify eligibility for grant assistance and to inspect the property during application review, project development, and over the course of any VRP project. | |
| I understand that if the rehabilitation work exceeds, or is likely to exceed, the grant award limit that I may be required to show proof of additional available funds as a condition of award and may be required to expend such funds prior to the expenditure of grant funds on the project. | |

| | |
|---|---|
| I understand that I am not permitted to serve as my own contractor, that a competitive bidding process to solicit a qualified contractor will be conducted on my behalf, and that no costs incurred prior to signing a grant agreement are eligible for reimbursement. | |
| I intend to remain the owner of this property for the next 10 years. | |
| I will abide by the program requirements for 10 years, including selecting income-qualified tenants, charging rents at or below the maximum allowed by the program, keeping units in good condition, allowing for periodic site inspections, and transferring the property only to a new owner willing to assume the obligations of the program. | |
| I understand that, if provisionally selected for a VRP award, I must sign an award acceptance agreement and deposit a refundable commitment fee of $5,000 with ORHA. I understand that failure to do so will constitute a refusal of the award and that the commitment fee will not be fully refunded if the project associated with this application is not completed. | |
| If selected for a VRP award, I will execute an agreement with ORHA and agree to file a Declaration of Interest on the Property with the County Clerk. I understand that non-compliance may require full repayment of any awarded grant funds. | |

I/We affirm that the information provided in this application is true and correct to the best of my/our knowledge. I/We understand that providing false or misleading information may result in disqualification from the Vacant Rental Program and may require repayment of any awarded funds.

| SIGNATURES | |
|---|---|
| Signature of Owner | Signature of Co-Owner |
| Printed Name | Printed Name |
| Date | Date |

*If necessary, use the space below for additional owner signatures, or affix additional signature pages.*

**Otsego County VRP Application Ownership Disclosure Form**

In the table below, list all properties owned or controlled by any owner of this property, including any property owned by a business entity in which one of the owners is a principal.

If more space is needed, use additional copies of this form.

You may also provide this information using your own report/schedule, but all information requested on this form must be provided. Alternative formats that do not include all 4 points of information are not acceptable.

Instructions for each column:

- **Property Address:** List the street address, city, state, and zip code of all properties.
- **Owner Name & Business Entity:** If there are multiple owners listed on this application, indicate which owner(s) is/are connected to the property. If their ownership/control is through a business entity, you must also list the name of the business (e.g., "James Bond - 007 Enterprises, LLC").
- **Number of Housing Units:** List the total number of residential units on/in the property.
- **Number of Rented Units:** List the total number of residential units on/in the property that are currently rented out to tenants.

**Address of Property on VRP Application:** _____

| Property Address | Owner Name & Business Entity | Number of Housing Units | Number of Rented Units |
|---|---|---|---|
| | | | |
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**Otsego County Vacant Rental Program (VRP)**
**Authorization for Verification/Release of Information**

**Property Owner Name(s):** _____

**Property Address:** _____

I/We authorize Otsego Rural Housing Assistance, Inc., (ORHA) to collect and verify documentation to confirm all statements made as part of my/our application to the Otsego County VRP and my/our eligibility for the program.

This includes, but is not limited to:

- Payment records for property taxes, utilities, mortgages and loans secured by the property, or any other applicable ownership costs
- Insurance documents
- Information related to my/our participation as a landlord in any housing assistance program, with the exception of identifying details that would violate tenant privacy
- Information and documents related to my/our history with code enforcement offices and compliance with property inspection requirements

I/We consent to allow ORHA to request and obtain personal information for the purpose of verifying my/our eligibility and application scoring for the Otsego County VRP. I/We understand that this release waives any privilege or confidentiality existing under federal or state law regarding such information.

I/We consent to allow any agency from which ORHA requests such personal information for these purposes to release the requested information/documents to ORHA.

This consent form is valid for 3 years from the date of signature.

**Signature(s):**
*All owners must sign. Sign on the back or execute additional copies if necessary.*

| | |
|---|---|
| _____ | _____ |
| Property Owner Signature | Property Owner Signature |
| _____ | _____ |
| Date | Date |

## Otsego County VRP Application Document Checklist

This checklist is being provided to assist you in applying for the Otsego County Vacant VRP. Before submitting, please review your application and ensure that all required documentation is complete and included in your submission. **Your application will not be considered submitted until all required documentation has been received by ORHA.** Submission date affects application review and selection.

This checklist is two pages. Make sure to review **both** pages.

**Required for all applicants:**

- ☐ Completed Otsego County VRP Property Assistance Application
- ☐ Completed forms:
  - ☐ Authorization for Verification/Release of Information
  - ☐ Application Ownership Disclosure Form for each owner (or same information in different format)
- ☐ Color photos of the property and the vacant unit. ORHA recommends including at least:
  - ☐ Exterior photos showing each side of the building
  - ☐ 1 photo of each interior room of a unit/space (Closets, pantries, etc. not required.)
  - ☐ Photos of any interior hallway/staircase passed through on the way to the unit/space
  - ☐ Photos of any other issue mentioned in the proposed scope of work, if not already shown
- ☐ Proof of property ownership:
  - ☐ Copy of current property deed
  - ☐ If owned by business entity or trust, appropriate documentation of all owners and their share
- ☐ Proof of active comprehensive property insurance policy
  - ☐ **OR:** Proof of cancellation/denial of insurance due to the property's condition
- ☐ Most recent statement for primary mortgage and any other loans secured by the property
- ☐ Most recent utility bill statements for all applicable utilities
  - ☐ **OR:** Other acceptable documentation (see application instructions)
- ☐ Proof of no delinquent property taxes on the property (e.g., recent property tax statements/receipts)
- ☐ Proof of no delinquent property taxes on any other property owned by the applicant(s) (e.g., recent property tax statements/receipts, letter from applicable official)

**Required for applicants who own any other rental properties:**

- ☐ Required number of tenant references (1 for owners of a single rented unit, otherwise 2)
  - ☐ **OR:** Note that tenants will be submitting references separately. Please ensure that tenants' submissions clearly identify you. You may want to provide them a business card or ORHA's example reference form with your information already filled in.
  - ☐ **OR:** Written description of reason for being unable to provide references and any supporting documentation
- ☐ Proof owner is in compliance with all applicable registration/inspection requirements for all active rental properties, such as:
  - ☐ City of Oneonta properties: Certificate of Compliance for all active rentals
  - ☐ Properties with 3+ active rental units: Fire Certificate

**Optional:**

- ☐ Map demonstrating that there are at least 5 other buildings within 500 feet of the vacant unit
- ☐ Proof of any other funding available for the project (e.g., commitment letters, pre-approvals)
- ☐ Any other documentation you feel would assist ORHA in evaluating your project

**Required for certain applications:**

This documentation is required only when applicable, based on your responses to application questions.

Many of these documents are collected to verify whether your application meets priority screening criteria, so we may be able to accept your submission as-is even if you fail to submit these documents. However, you will not receive any benefit from any unverified priority screening questions. Failing to submit this documentation may therefore affect your application's score and whether your project is selected for an award.

- ☐ **Owners with a permanent residence in Otsego County or a neighboring county:** Proof of local residence (e.g., driver's license with local address, voter registration postcard, tax return)
- ☐ **"Non-local" owners currently using a local person/company for property management:**
  - ☐ Documentation of the current relationship with a local person/company (e.g., management agreement, letter)
  - ☐ Proof of the local person/company's location
- ☐ **"Non-local" owners who intend to use a local person/company for property management:** Completed Local Property Manager Attestation form
- ☐ **Accessibility priority:** Completed Minimum Accessibility Attestation form
- ☐ Copies of documentation for all applicable project readiness application questions, such as:
  - ☐ Copies of bids/estimates or scope of work
  - ☐ Copies of any lead inspection/risk assessment or asbestos reports
  - ☐ Copies of any permits already obtained
  - ☐ Copies of any architectural or engineering plans

ORHA OTSEGO RURAL HOUSING ASSISTANCE, INC

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**Otsego County Vacant Rental Program (VRP)**
**Tenant Reference Form**

Your landlord is providing you this form because they are applying to the Otsego County VRP for grant funding to rehabilitate a vacant property into affordable rental housing for low- to moderate-income households. If awarded, your landlord could receive a grant of up to $50,000 or $75,000 per housing unit included in their project. As part of this application, property owners must submit tenant references to help Otsego Rural Housing Assistance, Inc. (ORHA) select responsible landlords to receive these grant funds.

The form on the back of this page is provided to help you tell ORHA about your experience as a tenant renting from this landlord. If you would rather write a letter (or email) instead, you are welcome to do so.

Your reference does not have to be 100% (or even 1%) positive. Please share with ORHA your honest feelings about renting from this landlord, both the good and the bad.

If you do not want your landlord to see what you say about them, you can submit your reference directly to ORHA. ORHA will not share the details of your reference with your landlord, and your landlord must also attest that they will not retaliate against you for what you say as part of their application.

If you do not wish to provide a reference at all, you are not required to. As part of their application, your landlord must attest that they will not retaliate against you if you refuse to provide a reference.

If you have any questions about this form or the Otsego County VRP in general, please contact Bridget Stith by calling 607-286-7244 or by emailing bridget@otsegoruralhousing.org.

Thank you for your cooperation!

**Instructions:**

Please complete the form on the back of this page or write an email or a letter about your experience with your landlord.

Submit your reference in one of these ways:

- Give your reference to your landlord, so they can submit it with the rest of their application
- Email your reference to VRP@otsegoruralhousing.org
- Mail your reference to:
  ATTN: Vacant Rental Program
  ORHA, Inc.
  PO Box 189
  Milford, NY 13807

Applications for the Otsego County VRP are due **April 27, 2026.** If you are sending your reference directly to ORHA, please submit it by this date.

**Otsego County VRP Tenant Reference**

| | |
|---|---|
| Property Owner Name(s): | |
| Tenant Name: | |
| Tenant's Unit Address: | |
| Do you usually interact directly with your landlord or with a property manager? | |
| Would you recommend this property owner for the Otsego County VRP? | |

Please rate your landlord on the following by circling a number for each statement:

| This property owner… | Never or Disagree strongly | Not usually or Disagree somewhat | Sometimes or Neutral | Usually or Agree somewhat | Always or Agree strongly |
|---|---|---|---|---|---|
| Repairs problems quickly | 1 | 2 | 3 | 4 | 5 |
| Keeps up with maintenance before there are problems | 1 | 2 | 3 | 4 | 5 |
| Responds to other problems appropriately | 1 | 2 | 3 | 4 | 5 |
| Acts respectful and professional with me | 1 | 2 | 3 | 4 | 5 |
| Knows and follows rules about tenants' rights | 1 | 2 | 3 | 4 | 5 |

If there are any specific positive or negative experiences you think would help ORHA make its decision about this property owner's application, please use this space or another page to tell us about them.
**Examples:** was very understanding & flexible when you had money trouble, did something to make you feel afraid, installed upgrades or modifications they didn't legally have to for free, won't evict violent/dangerous neighbors

| | |
|---|---|
| May ORHA contact you about this reference, to clarify any details or discuss a specific experience in more detail? | |

If yes, please provide a phone number and/or email address we can use to contact you:

I affirm that I have filled out this form truthfully and in good faith. These are my honest opinions, and I am providing them freely. My landlord has not coerced, threatened, or harassed me to provide this reference.

Tenant Signature _____ Date _____

**Otsego County VRP Minimum Accessibility Priority Attestation**

This attestation must be completed by any property owner seeking to receive the "Minimum Accessibility" designation for the purposes of application scoring for the Otsego County Vacant Rental Program (VRP).

**Property Owner Name(s):** _____

**Property Address:** _____

**List Qualifying Unit(s):** _____

*(If unit(s) does/do not currently exist, describe which proposed unit(s) would qualify upon project completion.)*

I/We, the undersigned property owner(s), attest and confirm the following statements regarding the above-referenced property:

1. By the end of the proposed VRP project, the qualifying units(s) listed above will have a first floor entry, no interior stairs, and a walk-in shower in at least 1 bathroom within the unit.
2. By the end of the proposed VRP project, the qualifying unit(s) listed above will also meet **one** of the following requirements:
    a. A permanently installed ramp serves the unit's entry.
    b. There will be no site conditions at the property that would make later installation of a ramp serving the unit's entry impractical or overly costly.
3. If modifications are required to the qualifying unit(s) listed above in order to meet these requirements by the end of the project, these modifications are practical and feasible at this property, to the best of my knowledge, and will be included in the scope of work for the project. I/We have listed all necessary modifications in the application's scope of work.
4. I/We understand that if changes to the project's scope of work made prior to final commitment of funds would result in the qualifying unit(s) no longer meeting the above requirements, ORHA may revise the application's score and cancel or defer a conditional award.

**Acknowledgment:**

I/We affirm that the information provided in this attestation is true and correct to the best of my/our knowledge. I/We understand that a site inspection will be conducted to verify the statements I have made about the unit. I/We understand that providing false or misleading information may result in disqualification from the Vacant Rental Program and may require repayment of any awarded funds.

**Signature(s):**

*All owners must sign. Sign on the back or execute additional copies if necessary.*

| | |
|---|---|
| _____ | _____ |
| Property Owner Signature | Property Owner Signature |
| _____ | _____ |
| Date | Date |

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## Otsego County VRP Local Property Manager Attestation

This attestation must be completed by any non-local applicant who wishes to attest to their intent to use a local property manager to assist with management of the Otsego County property for which they are applying for Otsego County VRP funding.

**Property Owner Name(s):** _____

**Property Address:** _____

**Definitions:**

- The term "local" refers to location within Otsego County or any of the six neighboring New York counties.
    - For individuals, location is determined by the address of the person's primary residence.
    - For property management businesses, location is determined by the address of their place of business.
- The term "property manager" refers to a business or individual that assists property owners with management of their Otsego County properties.

**Attestations:**

I/We, the undersigned property owner(s), attest and confirm the following statements regarding the above-referenced property:

1. I/We do not currently own or control any active rental property within Otsego County.

2. I/We intend to establish a relationship with a local property manager to assist me/us with the management of any properties included in an Otsego County VRP project.

3. I/We understand that, if selected for an Otsego County VRP award, I/we must submit evidence prior to final commitment of Otsego County VRP funds that we have identified a local property manager and that we are ready to enter into an agreement with this business/individual or have already done so. If I/we fail to submit this evidence within a reasonable time period, ORHA may rescind the award and either defer or deny my application.

4. I/We understand that, if selected for an Otsego County VRP award, the Participant Agreement will include an addendum that stipulates the following:

    a. I/We must continue to work with a local property manager throughout the 10-year Regulatory Period. I/We are not required to continue working with the same local property manager and may establish a relationship with an alternative local property manager for any reason.
    b. If such a change occurs, I/we must notify ORHA promptly.
    c. If I/we move such that I/we now qualify as a local owner, ORHA may approve me/us to act as my/our own local property manager. I/We must notify ORHA of the change in residence and provide verification of local residence.

**Acknowledgment:**

I/We affirm that the information provided in this attestation is true and correct to the best of my/our knowledge. I/We understand that a site inspection will be conducted to verify the statements I have made about the unit. I/We understand that providing false or misleading information may result in disqualification from the Vacant Rental Program and may require repayment of any awarded funds.

**Signature(s):**

*All owners must sign. Sign in the blank space below if necessary.*

| | |
|---|---|
| Property Owner Signature | Property Owner Signature |
| Date | Date |
| Property Owner Signature | Property Owner Signature |
| Date | Date |