#### THTF-3

#### Tennessee Housing Trust Fund

**units assisted Information Form**

INSTRUCTIONS:

Complete a separate form for each unit assisted. For all units where the type of activity is New Construction, attach copy of completed Certificate of Occupancy.

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| --- | --- | --- | --- |
| Mark Appropriate Box Original Submission Revision | | | |
| **Part A: Activity Information** | | | |
| 1. Grantee: | | 2. Contract Number: | |
| 3. Type of Activity Financed (check one):  New Construction Rehabilitation Other  Certificate of Occupancy Attached | | | |
| 4. Activity Location:  a. Street Address: | | | |
| b. City: | c. State: TN | | d. Zip Code: |

**Part B: CERTIFICATION**

|  |  |
| --- | --- |
| I hereby state that I have included and attached all required documentation to support this request. I have satisfied all related terms and conditions of the above cited contract. I also state that the data reported above is correct. | |
| Date: | Signature: |

##### Completed forms should be submitted with final payment request to:

Toni Shaw

Housing Programs Manager

Community Programs Division

Tennessee Housing Development Agency

502 Deaderick Street, Third Floor

Nashville, TN 37243