



Spectrum Enterprises: Property Compliance Profile

**Please provide all requested information so Spectrum can accurately review your project for LIHTC compliance. When completed, please print and email to: dwarren@Spectrumlihtc.com*

Name/Contact Information for Person Completing this Profile:

Property Name: _____ AKA: _____
Street Address: _____
City, State: _____ County: _____

Management Company: _____
Management Contact Name/Phone/Email: _____

Total # of Buildings: _____ Total Number of Units: _____ Total # LIHTC Units: _____

Date of initial credit allocation: _____
New Constructions or Ac/Rehab? (Check one) _____ New Construction: [] Ac/Rehab: []
For new construction – describe actual/estimated C of O: _____
For ac/rehab please describe actual/estimated date of acquisition: _____
For ac/rehab is this a 2nd allocation? _____

Minimum Set Aside: _____
Additional Set Aside(s): _____
Placed in Service Date: _____
Describe the multiple building election (line 8b of the IRS 8609 form): _____
Will credit be taken the same year as the PISD or deferred (line 10a of IRS 8609 form) _____

The gross rent floor linked to (check one) _____ Credit allocation: [] PISD: []
Do tenants pay utilities? If so list which ones: _____
UA Verification source (i.e. PHA Schedule, RD, engineer estimate, actual usage, etc.) _____

Does project participate in other housing programs such as Tax Exempt Bonds, HOME, HUD, etc.? If so describe those requirements: _____

Is this senior housing? (Check one) _____ Yes: [] No: []
If so what is the age requirement? _____

Other Documents to Submit:

- Tax Credit Application
- UA Source Verification (for all applicable years)
- Tenant Selection Criteria
- Rent roll listing all initial qualifying households (for lease up reviews) or dated 12/31 for a periodic compliance review