## CITY OF HARRISONBURG AFFORDABLE HOUSING FEE WAIVER PROGRAM

# **FEE WAIVER RESERVATION FORM**

To initiate the process, email this form to the Housing Coordinator (<u>liz.webb@harrisonburgva.gov</u>) any time after obtaining a building permit. The City will review preliminary eligibility and notify you of fund reservation.

### **Applicant Information**

(	Name:	
	Mailing Address:	
	Email:	
	Phone:	
	Tax ID:	
	Applicant Type (check all that apply): Owner Developer Corporation Individual	
	Sale Contract Purchaser 501(c)(3) Other	
	Are you in good standing with the Virginia State Corporation Commission? Yes No N/A	

#### **Property Information**

Address:	
Parcel ID:	
Anticipated Date for Certificate of Occupancy:	
Anticipated Home Value / Sale Price:	
Is this unit part of a bigger project? 🗌 No 📄 Yes Total Units in Developme	ent:
Total units in development that will qualify for fee waivers:	
Unit Description (type, size, beds, baths, etc.):	
Development Details (if applicable):	
Realtors and/or lenders participating in project sale, if known:	

	nust be purchased by a buyer within 100% Area Median Income, who will use the unit as ary residence. How do you plan to meet those requirements? Check any that apply.
🗌 l am t	he qualified buyer/owner
Existi	ng funding and/or program agreements obligate the unit to meet these requirements
Organ	izational and/or charter-based mission obligates the unit to meet these requirements
🗌 Still to	be determined, but committed to working with the City and partners on this effort
Please des	scribe relevant details. You may attach or provide links to additional documents.

#### Certifications

I am requesting to reserve water and sewer capital recovery fee waivers for the construction of an affordable for-sale residential dwelling unit within the City of Harrisonburg. I am committed to selling the unit for no more than the stated maximum sale price, to an income-qualified owner-occupant.

I understand that this reservation and any receipt of confirmation I receive from the City is dependent on submission and approval of a Request Form and all required attachments.

I certify that the information on this form is accurate and complete to the best of my knowledge.

Signature

Name/Title

Date

### Attachments

- Building permit
- Good Standing with VCC (if applicable)
- Program Agreements, Funding Agreements (if applicable)
- Site Information (optional)