

NOTICE OF COMPLETION

Issuer's Name: _____

Issuer's Address: _____

Name of Project: _____

Location of Project: _____

Certificate of Allocation Number: _____

Type of Residential Rental Project:

- Preservation
- 30% AMI Residential Rental Project
- 50% AMI Residential Rental Project
- 100% LIHTC Project
- 20% LIHTC Project
- Other Residential Rental Projects

Date of Completion: _____

Issuer's Certification

The undersigned representative of the Issuer hereby represents and certifies to Minnesota Management and Budget ("MMB") that the Project has been completed as evidenced by the attached (i) final Internal Revenue Service Form 8609 with respect to preservation projects, 30 percent AMI residential rental projects, 50 percent AMI residential rental projects, 100 percent LIHTC projects, or 20 percent LIHTC projects, or (ii) Certificate of Occupancy (issued by the appropriate governing entity).

The Issuer hereby requests the refund of the remaining 50 percent of the total refund held by MMB pending the completion of the project.

By: _____ Title: _____

Signature: _____ Date: _____

Send two original copies to:
(one copy will be signed by MMB and returned to bond counsel)
Minnesota Management and Budget
Attn: Debt Management Division
400 Centennial Building, 658 Cedar Street
St. Paul, Minnesota 55155-1489

CERTIFICATION BY THE DESIGNATED OFFICIAL OF MINNESOTA MANAGEMENT AND BUDGET

Based on the information supplied to the department in this notice of completion, the undersigned official of MMB hereby accepts this notice of completion.

By: (Name of MMB Official
designated to provide this certification): _____

Title: _____

Signature: _____

Date: _____

Address:

Minnesota Management and Budget
Debt Management Division
400 Centennial Building
658 Cedar Street
St. Paul, MN 55155-1489