OMB Approval No. 2502-0608 (exp. 02/28/2017)

Exhibit 8 of the Cooperative Agreement Part I of the Rental Assistance Contract

U.S. Department of Housing and Urban Development Office of Housing Federal Housing Commissioner

Section 811 Project Rental Assistance (PRA Demo) Demonstration

PRA Demo Project Number:	811 PRA Demo Contract Number:	FHA Project Number (if applicable):				
This Rental Assistance Contract (RAC	c) is entered into by and between					
(Grantee), and		(Owner Legal Name) for rental assisted units at				
	(Project Name).					
	rank Melville Supportive Housing Inve elopment Act, 42 U.S.C. 3531, <i>et seq,</i>	nzalez National Affordable Housing Act of 1990, estment Act of 2010, Pub. L. No. 111-374; the and pursuant to the applicable HUD				
Purpose. The purpose of this Contract Decent, Safe and Sanitary Assisted U		ments on behalf of Eligible Families leasing				
1.1 Significant Dates and Other Iter	ms; Contents and Scope of Contract	<u>t</u> .				
(a) Effective Date of Contract:		,				
([Insert March 31, June 30, Septo be the 12-month period ending of effective date of the Contract and effective date. If the first Fiscal N	n this date. However, the first Fiscal You dending on the last day of the Fiscal Your ear exceeds 12 months, the maximun	ed by HUD.) The Fiscal Year for the project shall ear for the project is the period beginning with the ear which is not less than 12 months after the n total annual rental assistance payment in plicable to the period of operation in excess of 12				
	(c) <u>Maximum Annual Contract Commitment</u> . The maximum annual amount of the commitment for Rental Assistance Payments under this Contract, as identified in Exhibit 1.					
	nclude the projects street address, city r information necessary to clearly design	r, county, state and zip code, block and lot gnate the covered project:				
(e) Statement of Services, Mainter	nance and Utilities Provided by the 0	<u>Owner</u> :				
(1) Services and Maintenance:						
(2) Equipment:						

	(3) Utilities:	
	(4) Other:	
(f)	Contents of Contract. This Contract consists of Part I, Part II and the following Exhibits:	
	Exhibit 1: The schedule showing the number of units by size (Assisted Units) and their applicable rents (Contract Rents). Schedule of Assisted Units and Contract Rents Exhibit 2: iREMS Data Record Exhibit 3: Grantee Affirmative Fair Housing Marketing Plan, HUD-92243-PRA Exhibit 4: Use Agreement, HUD-92238-PRA Exhibit 5: Lease, HUD-92236-PRA Exhibit 6: Definitions	
	Exhibit 7: Program Guidelines Additional exhibits (Specify additional exhibits, if any, such as Special Conditions for Acceptance. If none, insert "None"):	
(g) <u>Scope of Contract</u> . This Contract, including the Exhibits, whether attached or incorporated by reference, comprises the entire agreement between the Owner and the Grantee with respect to the matters contained in it. Neither party is bound by any representations or agreements of any kind except as contained in this Contract, any applicable regulations, and agreements entered into in writing by the parties which are not inconsistent with this Contract.	
1.2	Term of Contract, Obligation to Operate Project for Full Term.	
(a)	<u>Term of Contract</u> . The term of this Contract for any unit shall be years. (Note: Minimum contract term is 20 years).	
(b)	Obligation to Operate Project for Full Term. The Owner agrees to continue operation of the Assisted Units within the project in accordance with this Contract for the full term specified in paragraph (a).	
1.3	Grantee Assurance.	
(a)	Grantee has or will receive funds from HUD, pursuant to Section 811 of the Cranston-Gonzalez National Affordable Housing Act of 1990, as amended, and subject to appropriations, will provide Rental Assistance Payments for the Assisted Units.	
(b)	Consistent with the Cooperative Agreement between HUD and the Grantee, Grantee shall provide Rental Assistance Payments for Assisted Units to the Eligible Multifamily Owner, as identified under this Contract.	
1.4 (a)	No Recourse Provision In the event HUD cancels the Cooperative Agreement with the Grantee or the Grantee cancels the Rental Assistance Contract in accordance with the provisions of the RAC, the Owner agrees that it shall have no financial or legal recourse against the Grantee.	

years, or both.
Signature Page
Name of Owner (Print)
D.
By:
Name (Print)
Official Title (Print)
Date:
Grantee
By:
Signature of authorized representative
N (D:)
Name (Print)
Official Title (Print)
Date:
<u></u>

Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000 or imprisoned for not more than five

Exhibit 1

Schedule of Contract Units and Contract Rents¹

Number of Assisted Units	Number of Bedrooms	Contract Rent	Utility Allowance	Gross Rent	Maximum Annual Contrac Commitment (Number of Assisted Units x Gross Rent)
,		Total	Maximum Annual Co	ntract Commitment ² :	
	Total Number	of Non-Assisted Un	its Restricted to Pers	ons with Disabilities:	
		Expiration Date of	of the Unit Restriction	above, if applicable:	
	Tot	al Number of Units a	at the Property (Assist	ted + Non-Assisted):	
Percent of Assist	ed Units and other	Units Restricted to	Persons with Disabilit	ties at the Property ³ :	
tructions: This signa	ature box should only	be signed by the Owne	er and Grantee if the sche	edule of units needs an	amendment.
is Exhibit was amer	nded on	(date) by		(Legal Name of Owner)
d			(Grantee) to be EFFEC	CTIVE on	.
gnatures of Autho	rized Representativ	es (Sign and Print):			
			Print Name:		
vner Signature:			Print Name:		

¹ This Exhibit must be completed and attached to the Contract at the time the Agreement is executed. It may, however, be amended in accordance with program rules.

² The Total Maximum Annual Contract Commitment will amend as the rent increases occur in subsequent years or as other contract adjustments are made. To calculate the adjusted amount, refer to the Number of Assisted Units and Gross Rent identified on the rent schedule (form HUD-92458).

³ The percentage of Assisted Units AND any other units restricted to people with disabilities MUST NOT exceed 25% of Total Number of Units.

This Exhibit shows the additional fields that will be inputted in the project's iREMS record.

1.	Owner	rinformation				
	a.	Owner Entity TIN #:				
	b.					
	C.	Owner Legal Structure (e.g., Limited Partnership):				
	d.	. Mortgagor Type (e.g., Non-Profit, Profit Motivated):				
	e.	Owner Contact Information:				
		i. Name of Contact Individual:				
		ii. Mailing Address:				
		iii. Phone:				
		iv. Fax:				
		v. Email:				
II.	Manag	ement Agent Information				
	a.	Management Agent Legal Name:				
	b.	Management Agent Address:				
	c.	Management Agent TIN #:				
	d.	I. Management Agent Effective Date:				
	e.					
		i. Name of Contact Individual:				
		ii. Mailing Address:				
		iii. Phone:				
		iv. Fax:				
		v. Email:				
III.	Proper	ty Information				
	a.	Building Type:				
		□ Row □ Townhouse □ Detached □ Semi-Detached				
		□ Mid-Rise □ Walk-up/Garden □ High-Rise/Elevator				
	b.	Building Count (enter numeric value):				
	C.	Site Manager Contact Information:				
		i. Name of Contact Individual:				
		ii. Mailing Address:				
		iii. Phone:				
		iv. Fax:				
		v Email·				

Grantee Affirmative Fair Housing Marketing Plan

Use Agreement

Lease

Definitions

Program Guidelines