EXHIBIT D

Annual Project Certification Form

City of Shoreline Affordable Housing REPORTING PERIOD: ______ through _____. # of Required Affordable Units _____ Project: Address: The undersigned hereby certifies that during the past 12 months the Affordable Units required in the Declaration of Affordable Housing Covenants were utilized in the following manner (please enter the number of each type utilized): _____ Affordable Units in the Project were rented to new tenants (eligible households). Affordable Units in the Project were re-rented (leases renewed) to tenants whose income for remained qualified under the limit for initial occupancy. Affordable Units in the Project were re-rented to tenants who exceeded the qualifying income for initial occupancy but remained qualified under the income limit for recertification. Affordable Units in the Project were rented to tenants who, at time of recertification, exceeded the qualifying income and either moved to a market-rate unit in the Project or moved out of the Project. ____ Affordable Units in the Project were rented to tenants who, at time of recertification, exceeded the qualifying income and remained in the unit, causing the affordability to be re-designated to a different unit in the Project. The above information and that on the attached sheet(s) has been verified as required by the Declaration of Affordable Housing Covenants between the City of Shoreline and:

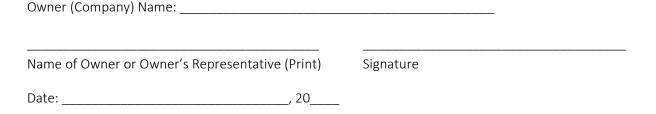




EXHIBIT D

PROJECT NAME					
REPORTING PERIOD:	_ through				
Contract rent included the f	ollowing (pleas	se answer "yes" or	"no"):		
Electricity and gas?	YES	NO			
Water and sewer?	YES	NO			
Garbage and recycling?	YES	NO			
Other expenses tenants are	required to pa	y in addition to con	tract rent:		
Renter's insurance?	_				
King County Sewer Capacity	Charge?				
Other (specify)?					
Other (specify)?					
Please attach a copy of the property's standard residential lease agreement.					



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PROJECT NAME	
Complete the following table for all househ	olds occupying Affordable Units in the Project
REPORTING PERIOD:	_ through

	Tenant's Family	Household		Current Lease	Current Household	Unit Type	Affordability	
Unit #	Name	Size	Move-in Date	Begin Date	Income	(BRs)	Level	Contract Rent

Be sure to include all affordable units. Enter "vacant" under Tenant's Family Name for unoccupied units.

Please attach copies of the current Certificate of Household Eligibility for each Affordable Housing tenant.

