



## OFFICE OF HOUSING

### OWNER/PROPERTY MANAGER INFORMATION

**Project Name (This is the name of the property receiving HOME/CDBG/NSP funds through Metro OHCD):**

#### OWNER Information

**Legal Name of Entity Receiving Funds:**

**OWNER Contact Name:**  
(*NOT the management company*)

**Title:**

**OWNER Address:**

**OWNER Phone Number:**

**Owner Cell Number:**

**OWNER Email Address:**

#### Management Compliance Information

**Management Company Name:**  
(The company paid by the Legal Owner to manage the property)

**Compliance Contact Name:**  
(The person responsible for compliance paid by the Management Company)

**Title:**

**Compliance Address:**

**Compliance Phone Number:**

**Compliance Cell Number:**

**Compliance Email Address:**

#### On-Site or Property Manager

**Management Company Name:**  
(The company paid by the Legal Owner to manage the property)

**Property Manager Contact Name:**  
(The person responsible for day to day operation of property paid by the Management Company)

**Title:**

**Property Manager Address:**

**Property Manager Phone Number:**

**Property Manager Cell Number:**

**Property Manager Email Address:**

**Completed By:**

**Title:**

**Date:**