CERTIFICATION OF NO EXISTING WAIT LIST

The undersigned, ________________________________________

(Property Manager or Authorized Representative)

hereby certifies the following:

a) A BMR Unit ______________________ became vacant on _____________.

(Apartment/Unit #) (Date)

b) There are currently no applicants on the BMR Wait List who live or work in Sunnyvale that are interested or available for the above mentioned unit.

c) The BMR unit was offered to ______________________, who does not live or work in Sunnyvale. However, the total household income and total household assets fall within the Sunnyvale BMR eligibility limits.

Complete Property Address

Property Manager or Authorized Representative (Signature) Date

Print Name Phone

Approved:

Name and Title, City of Sunnyvale Date

Print Name Phone