BMR QUARTERLY WAIT LIST CERTIFICATION
BY BMR RENTAL PROPERTY OWNERS

TO: City of Sunnyvale Housing Division
    Attn: BMR Program Administration
    456 West Olive Avenue
    Sunnyvale, CA 94086-3707

RE: Property Name: __________________________________________
    Property Address: __________________________________________

The Owner hereby certifies the following under penalty of perjury under the laws of the State of California:

The information contained in the attached BMR Rental Property Annual Certification of BMR Wait List Administration is true, accurate and correct as of the date hereof, and that the attached BMR Wait List Log meets the eligibility criteria established by the City of Sunnyvale. The management of the Wait List is in accordance with the Program Priority Preference Points as established in the City’s BMR Resident Selection Plan.

In Witness Whereof, the undersigned has signed this report as of _____________, day of ______________, 20___.

Name of Ownership Entity: __________________________________________

By: __________________________________________
    Signature

    ____________________________
    Print Name and Title

    ____________________________
    Address

    ____________________________    ____________________________
    City, State & Zip            Phone

    ____________________________
    E-Mail Address

Attachment: BMR Wait List Log