AFFIDAVIT CONFIRMING LEAD PIPE REPLACEMENT ASSISTANCE PROGRAM (LPRAP) AFFORDABLE UNIT INFORMATION

The undersigned solemnly swears (or affirms) that the following statements are true:

1. I, the undersigned, am over the age of (18) and understand that making a false statement to the District of Columbia government is punishable by criminal penalties under D.C. Official Code § 22–2405.

2. I am [Insert Authorizing Authority Full Name] _____, an authority that is authorized to act on behalf of the homeowners of _____ [Insert Property Address].

3. _____ [Insert Property Address] is seeking to replace the partial lead service line located on the private property and would like to qualify for income eligible assistance by providing the income information set forth in Paragraph 4 below.

4. To ascertain the qualifications of the Property's low-income households, I have reviewed and provided to DOEE the following applicable document(s) and highlighted the relevant provisions to demonstrate that the property will remain under an affordability covenant that aligns with LPRAP income guidelines:

   - Regulator Agreement (memorializes affordability restrictions between the Property owner and the District or federal agency);
   - Deed Restriction or Covenant;
   - Loan Agreement;
   - Affordable Housing Restriction (lists the number of restricted units, income to which they are restricted to, and terms of agreement);
   - Housing Assistance Payment (HAP) Contract (documents Section 8 provisions or local vouchers);
   - Proof of the property using the District's Housing Choice Voucher Program;
   - Tax Credit Regulatory Agreement and Declaration of Restrictive Covenants; and/or
   - Other relevant documentation not listed here but reviewed and approved by DOEE.

5. I certify that, as a result of this review and the information submitted and certified by the Property, the low-income households listed in the corresponding LPRAP Application are income-qualified. I acknowledge that improper certification of the Property and income-qualified households are a violation of the law and may result in penalties or legal action against the authorizing authority.

6. I certify that I am authorized to execute and deliver this affidavit to DOEE on behalf of the property.

_____

Signature of Authorizing Authority Date

_____

Printed Name

Subscribed and sworn to before me this ____ day of _____ , 20___.

_____

Notary Signature

My commission expires:_____