

**NEW MEXICO
STATE BOARD OF FINANCE**

**PRIVATE ACTIVITY BOND ALLOCATION TO MULTIFAMILY HOUSING
LOW INCOME UNIT INFORMATION**

APARTMENT COMPLEX: _____

GENERAL INFORMATION

Total amount of PAB cap that was allocated this project by the State Board of Finance: _____

Total amount of PAB cap that was sold and issued: _____

Date that PAB cap was allocated from the State Board of Finance to this project: _____

Total number of apartments units at complex: _____

Vacancy rate at complex for each of the last five years: _____

Median area local income for family of four: \$ _____

LOW INCOME UNITS

a) Units available to households at 50% of median local income:

Number of Units: _____

Percent of Total Units: _____

Duration at this level (months/years): _____

b) Units available to households at 60% of median local income:

Number of Units: _____

Percent of Total Units: _____

Duration at this level (months/years): _____

CERTIFICATION OF ISSUING AUTHORITY OF USER of PAB ALLOCATION

Signature: _____

Title: _____

Date: _____