

**COMPANY QUESTIONNAIRE**

**HMFA #:** \_\_\_\_\_  
**PROJECT:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_  
**SERVICE:** \_\_\_\_\_  
**PREVIOUS HMFA PROJECT REFERENCE, IF applicable:** \_\_\_\_\_

**NEW JERSEY HOUSING & MORTGAGE FINANCE AGENCY  
CERTIFICATION AND QUESTIONNAIRE**

**(Corporation, Partnership, Limited Liability Company, Other: \_\_\_\_\_)  
(Circle or Select One)**

**State of Formation:** \_\_\_\_\_

This information is necessary to obtain the approval of the NJHMFA, and it will be expressly relied upon. Complete each item, using *NONE* or *NOT APPLICABLE* where necessary. If more space is needed to answer any specific item, use a separate sheet.

A. Applicant (use official names without abbreviations):

Name			
Street		City	
County		State	Zip Code
Telephone #		Employer's I.D. No.	
Organizational ID No. (from State of formation)			

B. Please describe the type of services to be provided to the project and the amount and method of compensation:

C. Is the Applicant a subsidiary or direct or indirect affiliate of any other organization? If so, indicate name of related organization and relationship.

D. Management: **List all officers, directors, general partners and managing members of applicant, even if no ownership interest is held, and also list all owners, partners, members and any stockholders that have a 10% interest or more in applicant.** If the applicant is a publicly held corporation, please provide the latest proxy statement indicating stock ownership. For NON-PROFIT entities, provide information for each board officer noting percentage of ownership as 0%. Complete all columns for each person and entity showing the percentage of ownership interest. (Use additional sheet if necessary).

<u>NAME</u>	<u>HOME ADDRESS</u>	<u>BIRTH DATE</u>	<u>PLACE BIRTH</u>	<u>OFFICE HELD</u>	<u>PERCENTAGE OWNERSHIP</u>
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E. For all individuals named in Item D above list all other companies, partnerships or associations in which such persons have **more than 10% interest** or in which such person is an officer, director or partner. Complete all columns for each person showing the percentage of ownership interest. (If none, so state. Use additional sheets if necessary).

<u>NAME</u>	<u>COMPANY, PARTNERSHIP, ASSOCIATION</u>	<u>HELD</u>	<u>% INTEREST</u>
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- F. Other than as described above, does the applicant or any person listed in Items D or E have any present or past interest in or relationship with the project or the property on which it is located or with the owner or manager of same? Do any of the parties have any identity of interest whatsoever now existing or which will exist in connection with the project?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- G. Has the applicant or any person listed in Items D or E above, shared or accepted any compensation or will they share or accept any compensation directly or indirectly in any form or with any other party with an interest in or a relationship to the project?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- H. Has the applicant or any person listed in Items D and E above, entered into any agreement, participated in a collusion, or otherwise taken any action in restraint of free and competitive bidding or negotiation in connection with the services to be provided?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- I. Have any of the above parties, within the last five years, been a party defendant in litigation or administrative proceedings involving laws governing hours of labor, minimum wage standards, discrimination in wages, child labor, worker's compensation, payroll or withholding taxes, employment discrimination or occupational safety and health?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- J. Is applicant or management of applicant or any of the persons listed in Items D or E now a plaintiff or defendant in any civil or criminal litigation?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- K. Have any of the persons listed in Items D or E been subject to any disciplinary action, past or pending, by any administrative, governmental or regulatory body?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on separate attachment
- L. Have any of the persons listed in Items D or E been or are they now subject to any order resulting from any criminal, civil or administrative proceedings brought against them by any administrative, governmental, or regulatory agency?  
 \_\_\_\_\_yes \_\_\_\_\_no If yes, furnish details on a separate attachment
- M. Have any of the persons listed in Items D or E been denied any license by any

administrative, governmental, or regulatory agency on the grounds of moral turpitude?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- N. Has the applicant or management of applicant or any of the persons listed in Items D or E been informed of any current or on-going investigation of the applicant or management of the applicant for possible violation of State or Federal laws, or has the applicant or management of the applicant been indicted or subpoenaed by any grand jury or investigative body or had any records subpoenaed by any grand jury investigative body?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- O. Has the applicant or any person listed in Items D or E above or any concern with which any person(s) listed in Items D or E has been connected, ever been in receivership or adjudicated a bankrupt?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- P. Has the applicant or any person listed in Items D or E above been denied a business related license or had it suspended or revoked by an administrative governmental or regulatory agency?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- Q. Has the applicant or any person listed in Items D or E above been debarred, suspended or disqualified from contracting with any federal, state or municipal agency?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- R. Has the applicant, if a corporation, had its charter revoked or suspended in the State of New Jersey?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- S. Are any of the persons listed in Items D and E above, or any of the applicant's supervisory employees or any members of their respective families, employed with the NJ Housing and Mortgage Finance Agency?

\_\_\_\_\_yes \_\_\_\_\_no      If yes, furnish details on a separate attachment

- T. Does any employee or member of the NJ Housing and Mortgage Finance Agency have any interest, direct or indirect, in the applicant's business?



**CERTIFICATION:** I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto, to the best of my knowledge, are true and complete. I acknowledge that the New Jersey Housing and Mortgage Finance Agency is relying on the information contained herein and thereby acknowledge that the undersigned entity is under a continuing obligation, from the date of this Certification through the completion of any contracts with the Owner of subject Project, to notify the Agency in writing of any changes to the answers or information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am and/or the undersigned entity is subject to criminal prosecution under the law and that it will also constitute a material breach of any agreement between the undersigned entity and the Owner of the subject Project and that either the Owner or the New Jersey Housing and Mortgage Finance Agency, at its option, may declare all such contracts associated with the subject Project void and unenforceable.

The undersigned entity authorizes the New Jersey Housing and Mortgage Finance Agency to verify any answer(s) contained herein, to investigate the background and credit worthiness of the undersigned entity and to enlist the aid of third parties including State police checks which may be completed by the New Jersey Housing and Mortgage Finance Agency in its investigative process. The undersigned entity further authorizes the New Jersey Housing and Mortgage Finance Agency to disclose any of the foregoing information and any information discovered in any investigation pursuant to this certification to any party which has entered or is entering into any contract with the undersigned entity in connection with the subject Project.

**COMPANY NAME** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**NAME (PRINT)** \_\_\_\_\_

**TITLE** \_\_\_\_\_

**DATE** \_\_\_\_\_

BE IT REMEMBERED, that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ before me personally appeared \_\_\_\_\_, who, I am satisfied is the person named in the within instrument and who, being duly sworn upon his/her oath has executed the same as his/her voluntary act and deed.

\_\_\_\_\_  
Notary Public