pplicant or Consultant Name:				Date:			
oposed Project Name:			_				
gible Applicants must demor uthority's 2020 Small Rental I e type of project being propo e consultant complete this ex	nstrate they meet the minimum experi Development Application Manual. Application in the application. Applicants using hibit and submit it with the application the development team in planning, fin	ience requirements located in the plicants must demonstrate they has the experience of a consultant to along with a copy of the execute	ave the exp o meet thre ed consultan	erience shold re it contra	e to successf equirements act. Success	ully develop s must have fully	
Owner Entity & Ownership Interest	Project/Development Name & Address	Funding Source(s) & Contact Information	# Units	SF or MF	Placed in Service Date	Date of Stabilized Occupancy	
e additional sheets if needed.	, 1		Į.		J	1	
Name of Authorized Repres	sentative:						
Name of Authorized Repres				ato.			

SRDP Exhibit 4

Experience Certification