



CLASS 2-SRO

2018 ANNUAL AFFIDAVIT

AS THE OWNER OF CLASS 2-SRO PROPERTY, YOU ARE REQUIRED BY LAW TO ANNUALLY FILE SPECIFIC INFORMATION WITH THE COOK COUNTY ASSESSOR'S OFFICE. PLEASE FILE ALL INFORMATION, AS REQUESTED, BY **MONDAY APRIL 30, 2018**.

FAILURE TO FILE THIS NOTARIZED AFFIDAVIT ON TIME MAY RESULT IN THE TERMINATION OF YOUR PROPERTY'S CLASS 2-SRO STATUS.

Complete the following information:

CONTROL #: _____

(Affiant's Name)

(Property Address)

(Property Index Numbers)

Having first been duly sworn, _____ states that he/she is the owner of the subject property described above and that the following statements and requested documentation are true, complete, and correct:

1. The subject property is in substantial compliance with applicable building, safety and health codes. (Submit copies of any building, safety or health code violation citations, or copies of any code-related lawsuits that have been served upon you.)
2. Submit completed SRO Occupancy and Rent Information Forms for all units for each month of the period **March 2017 through February 2018**. (See attached form and sample.)
3. Submit **most recent income and expense statements** for the subject property. (CPA certified statements, or a copy of the Federal Tax Return are preferred. However, income and expense statements prepared in the course of business are acceptable.)

4. Submit a description of use and approximate square footage for all building areas that are not residential units, such as lobbies, offices, meeting rooms and storefronts.

5. Rents for the subject property for the next twelve months will not exceed the rent requirements of the Cook County Real Property Classification Ordinance, as described in the Class 2-SRO Eligibility Bulletin. (See attached **2018 SRO Fair Market Rents**)

6. Submit a copy of current **SRO Business License** (***) **Note – new requirement**)

7. Complete and submit the **Occupancy and Rent Data Summary** (***) **Note – new requirement**)

8. Complete and submit the **SRO Contact Information Sheet**

9. If **no change in the ownership** of this property status has occurred, complete the following:

Current Owner: _____

Address: _____

Telephone: _____

Email: _____

If a **change of ownership** has occurred, complete the following:

Date of transfer: _____

Purchaser: _____

Address: _____

Telephone: _____

Email: _____

Certification

The undersigned owner(s) certifies that he/she has read this Affidavit and that the statements set forth in this Affidavit, the Occupancy and Rent Information Forms, and all other documents provided in support of this application are true and correct. The undersigned further certifies that he/she understands the Class 2-SRO requirements of the Ordinance and Eligibility Bulletin including, specifically, the requirements for filing an annual affidavit prior to the filing deadline, maintenance of SRO units in the building at ninety percent of the total units, compliance with the occupancy and rent level requirements, and compliance with all local building, safety and health codes, and that failure of compliance with any of these requirements may result in termination of the incentive by the Assessor's Office.

Subscribed and sworn to before me this

_____ day of _____, 20__.

Notary Public _____

Signature: _____

Print Name: _____

Title: _____

Phone: _____

Email: _____

Return To:

**Cook County Assessor's Office
ATTN: Incentives Dept. - Room 301
118 N. Clark St.
Chicago, Illinois 60602**

For any questions please contact – (312) 603-3430

Occupancy and Rent Data Summary

Please complete the following summary form from the information supplied on the Occupancy and Rent data sheets and return with your affidavit.

1. Total Number of dwelling units _____
2. Number of units occupied by management employees _____
3. Number of SRO units _____
4. Number of SRO units occupied annually for monthly terms _____

***** GROSS RENTS - SHOULD REFLECT ALL SUBSIDIZES**

5. Maximum GROSS rent for SRO units occupied annually for monthly terms \$ _____
6. Average GROSS rent for SRO units occupied annually for monthly terms \$ _____
7. Number of SRO units occupied annually for monthly terms leased out at 80% (or less) of the current FMR Schedule for Existing Housing for SRO units as set by HUD _____

SRO Contact Information Sheet

Please complete form and return with your affidavit

Control Number: _____

Property PIN(s): _____

Property Name: _____

Property Address: _____

Property Phone: _____

Property Email Address: _____

Contact Person: _____

Title: _____

Contact Firm Name (if any): _____

Contact Address: _____

Contact Telephone Number: _____

Contact Email Address: _____

2018 SRO Fair Market Rents (FMR)

SRO Rent level requirements are:

***** ALL RENTS INCLUDE SUBSIDIZES**

- At least one-third of the SRO units are leased at no more than 80% of the current "Fair Market Rent Schedule for Existing Housing for single room occupancy units as set by the United States Department of Housing and Urban Development.
- The overall maximum average rent per unit for all SRO units in the building does not exceed 90% of the current HUD Rent Schedule for SROs.
- No SRO unit rent exceeds 100% of the current HUD Rent Schedule for SROs.

The allowable **GROSS RENTS (INCLUDING SUBSIDIZES)** for Class 2-SRO for 2017 and 2018 follow:

% of FMR	<u>2018</u>	<u>2017</u>
100%	660	684
90%	594	616
80%	528	548

INSTRUCTIONS FOR COMPLETING THE CLASS 2-SRO OCCUPANCY AND RENT INFORMATION FORM

You must complete the attached Occupancy and Rent Information Form for all units and all months for the twelve month period preceding application, up to and including the most recent month for which data is available.

We suggest that you first complete the form, for all units, with data which is the same throughout the twelve month period. Then copy the partially completed forms in sufficient quantity to cover the twelve months, completing each month's form with data which has changed from month to month, if any.

If the building has been recently converted, rehabbed or newly constructed and does not have a twelve month occupancy and rent history, supply the requested data for as many months as are available. Thereafter, monthly data must be submitted to the Assessor's Office each month until a twelve month history is completed.

Explanation of Terms:

Column 3, "Use": for each residential unit, list the use for each month. "Use" categories are:

Long-term (LT) unit: occupancy by the same tenant for the entire month. The rent term may be -week-to-week so long as occupancy was by the same tenant for entire month.

Short-term (ST) unit: occupancy, consecutively, by more than one tenant for the current month.

Employee (E) unit: residence for building staff.

Office (O) unit: residential unit used for building offices

Vacant (V) unit: no occupancy for the current month.

Column 6, "Name of occupant, if Long-Term": if the unit's use for the current month is "Long-Term", that is, occupancy was by the same tenant for the entire month; supply the tenant's name in this space. Otherwise, leave this space blank.

