

ARCHITECT'S CERTIFICATION

Project Name: _____ **PHFA No.:** _____

Check Appropriate Type: _____ New Construction _____ Rehabilitation
 _____ Elevator _____ Non-Elevator

I, _____, to the best of my knowledge and
(Architect's Name, Printed)
 professional judgment, do hereby certify to the following:

1. The referenced project contain(s) _____ () complete residential units;

2. _____ have (has) no interest in
(Architectural Firm)
 a proprietary system of construction, patented building design or business that manufactures _____ materials _____ specified _____ for _____ the _____ and;
(Project Name)

3. The working drawings and specifications are for the project identified above and described as follows: (Provide a brief description of the project, including the number of buildings, unit breakdown, type of buildings, and non-residential areas, if any)

4. The plans and specifications have been titled _____
(Project Name)
 and stamped with my seal as the Architect responsible for their preparation and are more particularly described as follows:
 Plans consisting of _____ sheets, dated _____, 20____, designated as PHFA Project No. _____, consisting of sheets lettered and/or numbered:

Attach a list of drawings in the following format.

Project Name: _____ PHFA No.: _____

	Drawing #	Original Date	Latest Revision Date
Cover Sheet:	_____	_____	_____
Site Plans:	_____	_____	_____
Architectural Drawings:	_____	_____	_____
Structural Drawings:	_____	_____	_____
Mechanical Drawings:	_____	_____	_____
Plumbing Drawings:	_____	_____	_____
Fire Protection Plans:	_____	_____	_____
HVAC Drawings:	_____	_____	_____
Electrical Drawings:	_____	_____	_____

Specifications consisting of _____ pages, dated _____ 20____,
Revision Dates: _____

Addenda:

No.:	_____	Date:	_____	No. of Pages:	_____
No.:	_____	Date:	_____	No. of Pages:	_____
No.:	_____	Date:	_____	No. of Pages:	_____
No.:	_____	Date:	_____	No. of Pages:	_____
No.:	_____	Date:	_____	No. of Pages:	_____

5. The proposed construction and/or rehabilitation described by these plans and specifications are in compliance with all applicable zoning, building, housing and other Federal, State and Local laws, codes, ordinances and regulations, including, but not limited to, all applicable accessibility standards, all HOME Program requirements, the PHFA Submission Guide for Architects or local standards, where more restrictive, as modified by waivers obtained from the appropriate officials.

The following waiver(s) of codes, etc., were obtained*:

Accepted by PHFA:

By: _____
License Number: _____
Firm: _____
Title: _____
Date: _____

By: _____
Title: _____

*Include attachments as necessary.