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**NOTICE OF INTENT TO TRANSFER OWNERSHIP, TO CHANGE OWNER NAME OR STATUS**

*Notice to be completed prior to transfer of title, change in partnership name, corporate name or status.   
Requested documentation from page 2 to be supplied after closing.*

Project Name:      (“Project”)

Agency Project #:

Award Year:

Request Date:      , 20

* Legal name of project owner or ownership entity to whom credits were allocated:
* Legal name of current project owner or ownership entity (if different from above):
* Current Owner Federal Tax ID #:
* Contact Person Name
* Contact Phone #       Contact Email
* Effective Date of Change:      , 20      (Actual or Proposed?      )

**Indicate Type of Change:**

      Change in Owner Name/Status (Entity Type)

      Sale of Property

      Transfer of Partnership Interest

      Other – Provide Explanation:

Explain other change, if applicable.

Does the Project have an NCHFA Loan?       If so what is the source?

Is the Project in the nonprofit set-aside?       If so (or if the Owner is uncertain) please list the tax-exempt status of proposed members/partners:

**New or Updated Owner’s Information:**

Ownership Entity

Tax ID#

Address

Contact Person

Contact Title

Telephone #

Fax #

Email Address

The execution and delivery of this form has been duly authorized by all necessary corporate action and, to the best of Borrower’s knowledge, will not cause a default under or conflict with any other agreement. Owner understands and agrees that the changes described herein must:

1) comply with the applicable Qualified Allocation Plan and

2) not materially change the experience level described in the Project application under which credits were awarded, unless variations from either or both are approved by NCHFA (which approval is granted by execution of this form).

**Transferring Owner/Partner:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, a North Carolina limited liability company / partnership

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, its managing member / general partner

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:   , 20

**New Owner/Partner:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, a North Carolina limited liability company / partnership

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, its managing member / general partner

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:   , 20

**Please provide the following documentation (Attach all that apply):**

**For transfer of ownership and for change in partnership name/status**

* Amended or new partnership agreement; or
* Articles of Incorporation and By-Laws; or
* LP/LLC Organizational Documents of the new ownership entity; and
* Certificate of Good Standing from the NC Secretary of State no older than 90 days from the date of this notice, if applicable;

**Additional submissions for transfer of ownership**

* Assignment and assumption agreement
* Purchase agreement
* Recorded contract for deed or warranty deed transferring the benefits and burdens of ownership of the buildings to the purchaser, or title policy indicating ownership
* Closing statement showing the sources and uses of funding
* Resolutions from both the original borrower and the new entity concerning the transfer and assumption of debt
* Request for approval of management company, if applicable
* **Required Fee:** A $250 transfer fee for Tax Credit only or a $500 transfer fee when transferring an Agency loan to new Ownership Entity.

**Agency Approval Authorized:**

This will be executed by the authorized person from NCHFA once completed form is received, along with required pre-closing documentation and appropriate fees:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
Date: \_\_\_\_\_\_\_\_\_\_\_, 20