The undersigned, in order to participate in the NEW START Loan Program operated by the Tennessee Housing Development Agency, supplies the following information and certifies to the accuracy of such information.

Please be advised disclosure does not automatically bring denial of participation. However, failure to comply with this disclosure or to provide false information on this form can subject the individual signing such form to criminal sanctions under state law. All questions are to be answered to the best of signatory’s knowledge with no requirement to investigate.

1. ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, have never been convicted of a felony in Tennessee or any other state; OR
   ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, have been convicted of a felony in Tennessee or in another state. The details of which are as follows:

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

2. ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, have not been fined, suspended, debarred, nor been the subject of a disciplinary investigation by a federal agency (including FHA, VA, USDA/RD (formerly FmHA), IRS, etc.) involving financial or housing activities; OR
   ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, have been fined, suspended, debarred, or been the subject of a disciplinary investigation by a federal agency (including FHA, VA, USDA/RD (formerly FmHA), IRS, etc.) involving financial or housing activities and the details are as follows:

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

3. ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, have not filed for bankruptcy or reorganization at the present time; OR
   ☐ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity, am in or have filed for bankruptcy or reorganization at the present time (or within seven years) and the details are as follows:

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
4. □ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity hold the following licenses from a state regulatory authority. Please provide license numbers:


5. □ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity have never had a license issued by a state regulatory authority suspended or been the subject of a disciplinary investigation; OR

□ I, or any entity with which I am or have been affiliated in an ownership or decision making capacity have had a license issued by a state regulatory authority suspended or been the subject of a disciplinary investigation and the details are as follows:


One of these forms must be completed by each of the individuals listed below and all such forms must be filed with THDA along with the New Start Loan Program Partner Application for the Application to be considered complete. THDA will not review any Application that is not complete. Forms, fully completed and executed, must be included from each of the following:

Executive Director or Chairman of the Board on behalf of the entity making the Application; by the Chairman of the Board personally; by all Board members; by the Executive Director personally; by all senior management and all persons (employees or volunteers) who will be involved in the New Start Loan Program.

Applications may be mailed, emailed or faxed to:

Tennessee Housing Development Agency
Attention: New Start Loan Program
502 Deaderick Street
Third Floor
Nashville, TN 37243
615-815-2100 (office)
615-649-2794 (fax)
SFASK@thda.org

[EXECUTION PAGE Follows]
THDA New Start Loan Program Partner Disclosure and Certification Execution Page

__________________________________________  Date: ___________________________

Typed/Printed Name

Title: __________________________

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me the within named ____________________________, for ____________________________, who made oath that [she][he] has read the foregoing THDA New Start Loan Program Partner Disclosure and Certification and the things and matters contained therein are true and correct. The Affiant did further acknowledge that [she][he] executed the within described document for the purpose herein described.

Witness my hand and official seal this _____ day of __________________________, 20____.

__________________________

NOTARY PUBLIC

My Commission Expires: ___________________