

NOTICE OF INTENT TO TRANSFER PARTNERSHIP/MEMBER INTEREST

To be completed prior change in partnership interest. Requested documentation from page 2 to be supplied before closing. Form must be completed and fee must be paid prior to processing.

PROJECT NAME ("PROJECT"): _____

AWARD YEAR: _____

AGENCY PROJECT #: _____

REQUEST DATE: _____

Current Owner's Information

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 #: _____

Contact Email: _____

Effective Date of Change: _____

☐ Proposed ☐ Actual

Indicate Type of Change:

☐ Transfer of Partnership Interest

☐ Other (Provide Explanation): _____

What is the purpose of the change in ownership structure?

☐ Exit of investor member or limited partner

☐ Addition of a nonprofit member or partner

☐ Other (Provide Explanation): _____

Does the Project participate in the Targeting Program: ☐ Yes ☐ No

If yes, does the new partner/member plan to continue to participate: ☐ Yes ☐ No

Is the Project in the nonprofit set-aside: ☐ Yes ☐ No

If yes (or if uncertain), list the tax-exempt status of proposed members/partners: _____

New or Updated Partner/Member Information

Partnership/Member Entity: _____

Federal Tax ID #: _____

Address: _____

Contact Person: _____

Title: _____

Phone #: _____

Fax #: _____

Email: _____



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 PARTNER/MEMBER:

_____, A North Carolina limited liability company/partnership

By _____, its managing member/general partner

By: _____

Name: _____

Title: _____

Date: _____

NEW PARTNER/MEMBER:

_____, A North Carolina limited liability company/partnership

By _____, its managing member/general partner

By: _____

Name: _____

Title: _____

Date: _____

Please provide the following documentation (Attach all that apply).

For transfer of partnership and for change in partnership name/status:

- ☐ Amended or new Partnership Agreement; OR
- ☐ Transfer and Transition Agreement; AND
- ☐ Draft Closing Statement or disclosure of any cash out, including an explanation of cash out
- ☐ **Required Fee:** A \$500 Partnership change fee for all properties *(Note: new fee schedule is for all changes with an effective date of 10/1/2025 or later)*

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:

NCHFA Signature: _____

Date: _____

