

HARP – DURP/LPOA Project Certification	
Loan #:	
Applicant's Name:	
Project Name:	
Property Address:	
City, State, Zip:	

Project Information			
1	Does the project operate as a Condo Hotel/Motel, allow short term rentals or provide any type of hotel services?	YES	NO
	1a. If YES, please describe:		
2	Is the Master HOA Insurance Dec Page attached?	YES	NO
<i>Coverage must meet the requirements of page 2 of the Project Insurance Request Form</i>			

Management Company & Preparer Information	
I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on the form and the attachments are true and correct.	
Company Name:	
Address:	
Preparer's Name:	Title:
Preparer's Signature:	Phone #:
Email Address:	Date Completed:

(Internal use only) Complete if verbally verified with above HOA contact by NPF	
Verifier's Name:	Title:
Phone #:	Date Completed: