## **EXHIBIT N**

Credit Summary					Exhibit N - IFA Form 116		
1		Project Num	ber:	Applicant Name:			
Applicant's Address		!			Telephone Number:		
Describe Your Affiliation with	the Project:						
Credit References:	Include a	II Bank, Fin	ance.	Trade and Supply Creditors			
Firm Name:		Addr		aac aa Capp., C.ca			
Telephone Number:	Account Number:	·		Present Balance:	Terms:		
Firm Name:			ess:				
Telephone Number: Account Number:		•	Present Balance: Terms:				
Firm Name:			Address:				
Telephone Number: Account Number:				Present Balance:	Terms:		
Firm Name:		Addre	ess:				
Telephone Number:	lumber: Account Number:			Present Balance:	Terms:		
Firm Name:		Addre	ess:				
Telephone Number: Account Number:				Present Balance:	Terms:		
Firm Name:		Addre	ess:				
Telephone Number:	Account Number:			Present Balance:	Terms:		
Other References:	Provide other refer	rences on a	separa	ate sheet			
Are you or have you been de any Federal debt? If yes, attac Agency that the debt is satisfie	ch a letter from the	Yes eement.		No 5. Are there judgements record against you?	ded Yes	No	
Delinquent on any development loan?		Yes	No 6. Have you ever been convicted of Yes No a felony?		No		
Are you or have you been a defendant in any suit or legal action?		Yes	7. Any outstanding Tax Credit Yes No		No		
Have you ever claimed bankruptcy or made settlements with creditors?  Yes				No compliance problems? If the to any of the questions 1 throws this block and give the	ough 5 is yes,		
Bank Deposits							
				Address:			
Telephone: Address:					Present Balance:		
Bank Name:			Addres	ss:			
Telephone: Address:			•		Present Balance:		
•	ditional information on a						
Authority's Community Housing correct to the best of my knowle	and Services for Perso dge and belief. I furthe that it is true, and have	ns with Disabil r state that I ha fully authorize	lities RL ave app	n, submitted to obtain a mortgage P and Chapter 16 of the Code of lied for a mortgage loan and/or ta o verify said information through c	lowa, as amended, are true a x credits, and have provided	and	
Name, Signature and Date:			Social Security Number or Employer I.D. Number:				