**CERTIFICATION OF PURCHASER**

**OF COMPLIANCE WITH THE AGE RESTRICTION REQUIREMENTS OF THE HOUSING FOR OLDER PERSONS EXCEPTION FROM THE FEDERAL FAIR HOUSING AMENDMENTS ACT OF 1988**

**Pursuant to P.L. 2008, c.71**

I (we) by signing as grantees below hereby certify that the property known as       commonly described as       in the community known as       will be occupied by a person of an age to ensure compliance with the “housing for older persons” exception from the Fair Housing Amendments Act of 1988”, Pub.L. 100-430 (42 U.S.C. ss.3601 et seq.) as set forth in section 100.301 of Title 24, Code of Federal Regulations.

I (we) hereby certify that this addendum will be recorded in the County of       as part of the deed for the property described above.

The property as described in this addendum is a resale or a transfer by operation of law. A “resale” is defined for the purposes of this certification as the sale of a dwelling unit within an age restricted community, other than the initial sale of the unit made by the developer.

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| By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(All grantees must sign and be acknowledged)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       |

STATE OF      :

COUNTY OF     :

BE IT REMEMBERED that on the       day of      ,       before me, the subscriber, the undersigned authority personally appeared the persons named above as grantees who, being by me duly sworn on his oath certifies and makes proof to my satisfaction that he/she/they are the purchaser of the property described above; that the execution as well as the making of this Certification has been duly authorized.

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| By notary or attorney at law: | Grantees: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      |
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| **For County Clerk Use Only** **Date Filed\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date Recorded\_\_\_\_\_\_\_\_\_\_\_\_\_** **Page\_\_\_\_\_\_\_\_\_\_** |