####

2018 HOME Investment Partnership Program (HOME) and 2019 Low-Income Housing Trust Fund (LIHTF) Application

**Application Submission Timeline:**

|  |  |
| --- | --- |
| Application Released  | March 15, 2018 |
| Questions and Answers (E-mail) | March 29-April 19,2018 |
| **Application Submittal Deadline** | **April 20th, 2018 @5pm** |
| HOME/LIHTF Notification of Award  | May 15, 2018 |
| Grant Agreement to Sub-recipients | June 15, 2018 |

**Submit questions, an electronic application and one signed, original application to:**

aTTENTION: Martha welden

1830 cOLLEGE PARKWAY SUITE 200

CARSON CITY, nEVADA 89706

mwelden@housing.nv.gov

## project information:

1. Project/Borrower Name: Enter Text

2. Application Date: Enter Date

3. Purchase Date: Enter Date

4. Project Location (street address): Enter Text

 City/State/Zip code/County: Enter Text

5. Mailing Address: Enter Text

 City/State/Zip code/County: Enter Text

6. MSA: Enter Text

7. Census Tract: Enter Text

8. Assigned To: Division Staff

9. Property Type: Choose Applicable Number Below

 1. 1-4 Single Family

 2. Condominium

 3. Cooperative

 4. Manufactured Home

 5. Single Room Occupancy

 6. None of the Above

 ***NOTE:*** *Attach a legal description as* ***Exhibit A.***

10. Project Type: Choose Applicable Number Below

1. Rehabilitation Only

 2. Acquisition & Rehab

 3. Acquisition Only

 4. Moderate Rehabilitation

 5. Substantial Rehabilitation

 6. New Construction

## financing Plan:

 Amount Requested

HOME FUNDS $Enter Amount

TRUST FUNDS  $Enter Amount

 TOTAL HOME and TRUST FUND REQUEST $Enter Amount

 Other Fund Sources (Please site):

 Enter Fund Source $Enter Amount

 Enter Fund Source $Enter Amount

 Enter Fund Source $Enter Amount

 Enter Fund Source $Enter Amount

 Enter Fund Source $Enter Amount

Have applied for or intend to apply for tax credits [ ]  Yes [ ]  No

 If yes, application amount $Enter Amount

 TOTAL OTHER FUND SOURCES $Enter Amount

 TOTAL PROJECT COSTS $Enter Amount

*Applicants may not apply for discretionary funding if they have already received funding from another participating jurisdiction.*

**NOTE:** Please include project por formas for a minimum of the period of affordability with this application as **Exhibit B.**

Is the applicant a 501(c) (3) or 501(c) (4) non-profit organization pursuant to

Section 42 of the Internal Revenue Code? [ ]  Yes [ ]  No

**If "Yes", provide the following:**

1. Attach evidence of the non-profit status as **Exhibit C**.

2. Attach a description of the role of the non-profit organization in the project as **Exhibit D**.

3. Does the non-profit organization have an ownership interest in the project?

 [ ]  Yes [ ]  No

 a. State the interest in terms of a percentage: Enter Interest%

**(Limited Partnerships allowed with for-profit developers)**

1. Attach the names and addresses of the governing board of the non-profit organization as

**Exhibit E**.

5. Is the purpose of the non-profit organization, in part, to foster low-income housing?

 [ ]  Yes [ ]  No

6. Is the applicant a Community Housing Development Organization (CHDO)?

 [ ]  Yes [ ]  No

**If "Yes", complete the following:**

 a. What is the role of the CHDO?

 [ ]  Developer [ ]  Owner [ ]  Sponsor

 Explain the CHDO's role: Enter Text

 b. Is the CHDO certified by the state or other Participating Jurisdiction?

 [ ]  Yes [ ]  No

If “yes”, attach proof of most recent year’s CHDO certification as **Exhibit F**.

If “no”, contact the Division for certification information.

**Note: All CHDOs must be certified by the NHD at the time of commitment for funding. Please contact NHD for CHDO certification application.**

**For all applicants:**

1. Attach Project Budget (**Exhibit G**) and Budget Narrative (**Exhibit G-2**). Indicate specifically what costs HOME/LIHTF funding will cover.

2. Evidence of local government support (**Exhibit H**).

**Any HOME or Trust Fund activity must be in full agreement and cooperation with the local government**. **This includes a letter of support stating that the local government is aware of the HOME funds being provided for the project and that they are aware of the property tax exemption that is triggered by the infusion of HOME funds in the project.**

## Development Plan:

1. Number of Buildings: Enter Number

2. Total # of Units Planned: Enter Number

3. Number of HOME/LIHTF Units Planned: Enter Number

4. Total Floor Area Planned: Enter Square Footage

5. HOME Unit Individual Square Footage: Enter Square Footage

 a. One-bedroom unit sq ft: Enter Square Footage

 b. Two-bedroom unit sq ft: Enter Square Footage

 c. Three-bedroom unit sq ft: Enter Square Footage

 d. Four-bedroom unit sq ft: Enter Square Footage

6. All grouping/types of units are comparable in terms of the number of bedrooms, bathrooms, amenities, and configuration of the units: Y/N

7. Residential Floor area planned: Enter Square Footage

8. Targeting of Units: Number of Units Units for: \*Choose Applicable Number Below

9. Targeting of Units: Number of Units Units for: \*Choose Applicable Number Below

10. Targeting of Units: Number of Units Units for: \*Choose Applicable Number Below

(1) Disabled (2) Elderly (3) Family (4) Handicapped (5) Homeless (6) Undesignated (7) Battered Women (8) Developmentally Disabled (9) Other (10) Brain Injury (11) Drug Dependency (12) AIDS/HIV Related Illness (13) Mental Illness (14) Teen Pregnancy

(15) Victims of Domestic Violence (16) Single Room Occupancy

11. Type of Units: Choose Applicable Number Below

(1) Apartment (2) Townhome (3) Detached (4) Semidetached/Twin/Duplex

(5) Manufactured Home (6) Single Room Occupancy (SRO) (7) High-rise (8) Special Needs

(9) Single Family-Home (99) Other

12. Utility Type: Choose Applicable Number Below

(1) 2 and 3 story walkup (2) Row and Townhouse (3) Duplex and Twin (4) Detached

(5) High Rise (6) Mobile Home

13. Construction Type: Choose Applicable Number Below

(1) Wood Frame (2) Concrete Block Structure (3) Manufactured Home

14. Roof Type: Choose Applicable Number Below

(1) Composition (2) Tile (3) Shake

15. Foundation Type: Choose Applicable Number Below

(1) Slab on Grade (2) Open Crawl Space (3) Enclosed Crawl Space (4) Mixed

16. Roof Material: Choose Applicable Number Below

(1) Composition (2) Shingles (3) Metal (4) Other

17. Exterior Finish: Choose Applicable Number Below

(1) Wood (2) Stucco (3) Metal (4) Other

18. Type of Heating: Choose Applicable Number Below

(1) Electrical (2) Gas (3) Propane (4) Solar

19. Year Constructed: Enter Year

20. Land/Site Control Type: Choose Applicable Number Below

(1) Owner/Occupied (2) Leased/Lease (3) Option to Buy/Purchase Contract

(4) Option to Lease (5) Government Lease (6) Contract for Deed

21. Expiration Date: Enter Date

22. Purchase Price: $Enter Amount

23. Site in Acres: Enter Amount

24. Pre Rehab Value: $Enter Amount

25. FEMA Flood Zone: Enter Text

26. Post Rehab Value: $Enter Amount

27. Flood Plain: Enter Text

## Owner/contractor Data:

1. Owner Tax Identification Number (TIN): Enter Number

 From: Enter Date

 Name: Enter Text

 Mailing Address: Enter Text

 City/State/Zip Code/County: Enter Text

 DUNS Number: Enter Number

2. Contact Name: Enter Text

 Telephone Number: Enter Number

 Fax Number: Enter Number

 Email Address: Enter Text

3. Type of Entity: Choose Applicable Number Below

(1) Corporation (2) Individual (DBA) (3) Individual (4) Partnership, General

(5) Partnership, Limited (6) Non-Profit Organization (7) Partnership (8) Government Entity (9) Limited Liability Company (10) Subchapter S Corporation (11) Joint Venture

4. Minority Code: Choose Applicable Number Below

(1) African American/Black (2) Hispanic/Latino (3) Woman/WWBE (4) Disadvantaged/DBE (5) MBE/HUB (99) Other

## Partner data:

1. Owner Tax Identification Number (TIN): Enter Number

 From: Enter Date

 Name: Enter Text

 Mailing Address: Enter Text

 City/State/Zip code/County: Enter Text

2. Contact Name: Enter Text

 Telephone Number: Enter Number

 Fax Number: Enter Number

 E-mail: Enter Text

3. Type of Entity: Choose Applicable Number Below

(1) Corporation (2) Individual (DBA) (3) Individual (4) Partnership, General

(5) Partnership, Limited (6) Non-Profit Organization (7) Partnership (8) Government Entity (9) Limited Liability Company (10) Subchapter S Corporation (11) Joint Venture

4. Minority Code: Choose Applicable Number Below

(1) African American/Black (2) Latino/Hispanic (3) Woman/WWBE (4) Disadvantaged/DBE (5) MBE/HUB (99) Other

## Tenant paid utilities:

1. Source of Allowance: Choose Applicable Number Below

(1) Developer Estimate (2) Actual Cost (3) Local PHA Index (4) Utility Provider Estimate (5) FHA/HUD Supplied

Attach utility allowance verification documents as **Exhibit I.**

2. Effective Date of Source: Enter Date

 Energy/Fuel Bedroom Monthly

 Y/N Source **\*** Size Allowance

3. Heating Y/N \*Number 13. 0 $Enter Allowance

4. Air Conditioning Y/N \*Number 14. 1 $Enter Allowance

5. Cooking Y/N \*Number 15. 2 $Enter Allowance

6. Lighting Y/N \*Number 16. 3 $Enter Allowance

7. Hot Water Y/N \*Number 17. 4 $Enter Allowance

8. Water Y/N \*Number 18. 5 $Enter Allowance

9. Sewer Y/N \*Number 19. 6 $Enter Allowance

10. Trash Y/N \*Number 20. 7 $Enter Allowance

11. Range Y/N \*Number 21. 8 $Enter Allowance

12. Refrigeration Y/N \*Number 22. 9 $Enter Allowance

**\*Energy/Fuel Source (Choose Applicable Number):** (1) Electric (2) LP Gas (3) Natural Gas (4) Coal/Oil (5) Wood burning (6) Space Heater (7) Municipal (8) Well (9) Septic

## rent restrictions

1. Farmers Home Project: Y/N

2. Section 8 Project: Y/N

3. Tax Credit Project: Y/N

4. LIHTC Amount Requested: $Enter Amount

5. Treat as Federal Funds: Y/N

6. Period of Affordability: Enter Years

Agency Covenants Unit Designation ***HOME Units***

7. Enter Number Units at Rents of %AMI \*Choose Applicable Number Below [ ]

8. Enter Number Units at Rents of %AMI \*Choose Applicable Number Below [ ]

9. Enter Number Units at Rents of %AMI \*Choose Applicable Number Below [ ]

10. Enter Number Units at Rents of %AMI \*Choose Applicable Number Below [ ]

11. Enter Number Units at Rents of %AMI \*Choose Applicable Number Below [ ]

**\*Unit Designation:** (1) Very-Low Income (2) Low-Income (3) Market Rate

Address the scarcity of affordable housing for eligible families in the area where the project will be located, attach as **Exhibit J**. If the project will be a transitional program, include the transitional plan as **Exhibit J-2**.

## unit distribution $ rents of entire project:

1. Proposed Occupancy Date: Enter Date

 ***Please label HOME/LIHTF units***

 ------Tenant Paid Rent------

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| # of Units | # of Bedrooms | # of Bathrooms | Proposed Rent | Utility | Total | **\*Restriction** | Max rent |
| Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount |
| Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount |
| Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount |
| Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount | Enter Amount |

**\*Restriction (Choose Applicable Number):** (1) Very-Low Income (2) Low-Income (5) Fair Market Rent

2. Rental Income: $Enter Amount

3. Other Monthly Income: $Enter Amount

4. Vacancy Factor: Enter Amount%

Address whether an award of money from the fund will assist in making the project more affordable, attach as **Exhibit K**.

## construction sources of funds – fill out information for each funding source

1. Loan Position: \*Choose Applicable Number Below

2. Source Name: \*\*Choose Applicable Number Below

3. Type of Source: \*\*\*Choose Applicable Number Below

4. Type of Finance: \*\*\*\*Choose Applicable Number Below

5. Closing Date: Enter Date

6. Principal Amount: $Enter Amount

7. Interest Rate: Enter Amount%

**\*Loan Position:** (1) Existing 1st (2) Existing 2nd (3) Existing 3rd (4) Existing 4th (5) Refinanced 1st (6) Refinanced 2nd (7) Refinanced 3rd (8) Refinanced 4th (9) Proposed 1st (10) Proposed 2nd (11) Proposed 3rd (12) Proposed 4th (13) Proposed 5th (14) Other (15) Unsecured

**\*\*Source Name:**(1) State HOME Funds (2) Direct HOME funds (3) USDA Funds (4) Trust Funds (5) Conventional Loan (6) LIHTC (7) Other

**\*\*\*Type of Source:** (1) Federal (2) Conventional (3) HOME for project costs (4) Owner Contribution (5) State Appropriated (6) Local Appropriated (7) CDBG (8) Cash Match (9) Private Loan (10) Other (11) HOME (12) Other PJ, 0012 (13) HOME Program Income (14) State Tax Exempt Bonds (15) Local Tax Exempt Bond (16) Private Grant (17) Low Income Housing Tax Credits (18) CHDO TA Loan (19) CHDO SEED Loan (20) Energy Grant Fund (21) Historical Equity (22) HOME for Buy down

**\*\*\*\*Type of Finance:** (1) Loan, Amortizing (2) Grant (3) Loan, Deferred (In Ratio) (5) Loan, BMIR (Conventional Only) (6) Cash flow Note (7) Sinking Fund (8) Loan, Deferred (Not in Ratios) (9) Other (10) Loan, Balloon P&I (14) LIHTC Syndication Proceeds (16) Loan, Deferred until Sale (17) Loan, Balloon Interest Only

## construction sources of funds – fill out information for each funding source

1. Loan Position: \*Choose Applicable Number Below

2. Source Name: \*\*Choose Applicable Number Below

3. Type of Source: \*\*\*Choose Applicable Number Below

4. Type of Finance: \*\*\*\*Choose Applicable Number Below

5. Closing Date: Enter Date

6. Principal Amount: $Enter Amount

7. Interest Rate: Enter Amount%

**\*Loan Position:** (1) Existing 1st (2) Existing 2nd (3) Existing 3rd (4) Existing 4th

(5) Refinanced 1st (6) Refinanced 2nd (7) Refinanced 3rd (8) Refinanced 4th (9) Proposed 1st (10) Proposed 2nd (11) Proposed 3rd (12) Proposed 4th (13) Proposed 5th (14) Other (15) Unsecured

**\*\*Source Name:**(1) State HOME Funds (2) Direct HOME funds (3) USDA Funds (4) Trust Funds (5) Conventional Loan (6) LIHTC (7) Other

**\*\*\*Type of Source:** (1) Federal (2) Conventional (3) HOME for project costs (4) Owner Contribution (5) State Appropriated (6) Local Appropriated (7) CDBG (8) Cash Match (9) Private Loan (10) Other (11) HOME (12) Other PJ, 0012 (13) HOME Program Income (14) State Tax Exempt Bonds (15) Local Tax Exempt Bond (16) Private Grant (17) Low Income Housing Tax Credits (18) CHDO TA Loan (19) CHDO SEED Loan (20) Energy Grant Fund (21) Historical Equity (22) HOME for Buy down

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## construction sources of funds – fill out information for each funding source

1. Loan Position: \*Choose Applicable Number Below

2. Source Name: \*\*Choose Applicable Number Below

3. Type of Source: \*\*\*Choose Applicable Number Below

4. Type of Finance: \*\*\*\*Choose Applicable Number Below

5. Closing Date: Enter Date

6. Principal Amount: $Enter Amount

7. Interest Rate: Enter Amount%

**\*Loan Position:** (1) Existing 1st (2) Existing 2nd (3) Existing 3rd (4) Existing 4th

(5) Refinanced 1st (6) Refinanced 2nd (7) Refinanced 3rd (8) Refinanced 4th (9) Proposed 1st (10) Proposed 2nd (11) Proposed 3rd (12) Proposed 4th (13) Proposed 5th (14) Other (15) Unsecured

**\*\*Source Name:**(1) State HOME Funds (2) Direct HOME funds (3) USDA Funds (4) Trust Funds (5) Conventional Loan (6) LIHTC (7) Other

**\*\*\*Type of Source:** (1) Federal (2) Conventional (3) HOME for project costs (4) Owner Contribution (5) State Appropriated (6) Local Appropriated (7) CDBG (8) Cash Match (9) Private Loan (10) Other (11) HOME (12) Other PJ, 0012 (13) HOME Program Income (14) State Tax Exempt Bonds (15) Local Tax Exempt Bond (16) Private Grant (17) Low Income Housing Tax Credits (18) CHDO TA Loan (19) CHDO SEED Loan (20) Energy Grant Fund (21) Historical Equity (22) HOME for Buy down

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## permanent sources of funds – fill out information for each funding source

1. Pre-Rehab Units: Enter Number 2. Post Rehab Units: Enter Number

3. Source Name: \*Choose Applicable Number Below

4. Loan Position: \*\*Choose Applicable Number Below

5. Type of Source: \*\*\*Choose Applicable Number Below

6. Type of Finance: \*\*\*\*Choose Applicable Number Below

7. System Tracked: \_ Y

8. Principal Amount: $Enter Amount

9. Closing Date: Enter Date

10. Interest Rate: Enter Amount%

11. Payment Frequency: Choose Applicable Letter Below

 (M) Monthly (Q) Quarterly (Y) Yearly

12. Loan Term : Enter Number of Months

13. Amort Term: Enter Number of Months

14. Amort Start: Enter Date

15. Proposed Match: $Enter Amount

**\*Source Name:**  (1) State HOME Funds (2) Direct HOME funds (3) USDA Funds (4) Trust Funds (5) Conventional Loan (6) LIHTC (7) Other

**\*\*Loan Position:** (1) Existing 1st (2) Existing 2nd (3) Existing 3rd (4) Existing 4th

(5) Refinanced 1st (6) Refinanced 2nd (7) Refinanced 3rd (8) Refinanced 4th (9) Proposed 1st (10) Proposed 2nd (11) Proposed 3rd (12) Proposed 4th (13) Proposed 5th (14) Other (15) Unsecured

**\*\*\*Type of Source:** (1) Federal (2) Conventional (3) HOME for project costs (4) Owner Contribution (5) State Appropriated (6) Local Appropriated (7) CDBG (8) Cash Match (9) Private Loan (10) Other (11) HOME (12) Other PJ, 0012 (13) HOME Program Income (14) State Tax Exempt Bonds (15) Local Tax Exempt Bond (16) Private Grant (17) Low Income Housing Tax Credits (18) CHDO TA Loan (19) CHDO SEED Loan (20) Energy Grant Fund (21) Historical Equity (22) HOME for Buy down

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## permanent sources of funds – fill out information for each funding source

1. Pre-Rehab Units: Enter Number 2. Post Rehab Units: Enter Number

3. Source Name: \*Choose Applicable Number Below

4. Loan Position: \*\*Choose Applicable Number Below

5. Type of Source: \*\*\*Choose Applicable Number Below

6. Type of Finance: \*\*\*\*Choose Applicable Number Below

7. System Tracked: \_ Y

8. Principal Amount: $Enter Amount

9. Closing Date: Enter Date

10. Interest Rate: Enter Amount%

11. Payment Frequency: Choose Applicable Letter Below

 (M) Monthly (Q) Quarterly (Y) Yearly

12. Loan Term : Enter Number of Months

13. Amort Term: Enter Number of Months

14. Amort Start: Enter Date

15. Proposed Match: $Enter Amount

**\*Source Name:**  (1) State HOME Funds (2) Direct HOME funds (3) USDA Funds (4) Trust Funds (5) Conventional Loan (6) LIHTC (7) Other

**\*\*Loan Position:** (1) Existing 1st (2) Existing 2nd (3) Existing 3rd (4) Existing 4th

(5) Refinanced 1st (6) Refinanced 2nd (7) Refinanced 3rd (8) Refinanced 4th (9) Proposed 1st (10) Proposed 2nd (11) Proposed 3rd (12) Proposed 4th (13) Proposed 5th (14) Other (15) Unsecured

**\*\*\*Type of Source:** (1) Federal (2) Conventional (3) HOME for project costs (4) Owner Contribution (5) State Appropriated (6) Local Appropriated (7) CDBG (8) Cash Match (9) Private Loan (10) Other (11) HOME (12) Other PJ, 0012 (13) HOME Program Income (14) State Tax Exempt Bonds (15) Local Tax Exempt Bond (16) Private Grant (17) Low Income Housing Tax Credits (18) CHDO TA Loan (19) CHDO SEED Loan (20) Energy Grant Fund (21) Historical Equity (22) HOME for Buy down

**\*\*\*\*Type of Finance:** (1) Loan, Amortizing (2) Grant (3) Loan, Deferred (In Ratio) (5) Loan, BMIR (Conventional Only) (6) Cash flow Note (7) Sinking Fund (8) Loan, Deferred (Not in Ratios) (9) Other (10) Loan, Balloon P&I (14) LIHTC Syndication Proceeds (16) Loan, Deferred until Sale (17) Loan, Balloon Interest Only

Address the viability of the project without an allocation from the HOME/LIHTF, attach as **Exhibit L**.

## use of funds – land/site

**Land/Site Work** Actual Cost

1. Land Cost/Unit: $Enter Amount

**Buildings**

2. Existing Structure: $Enter Amount

3. Demolition: $Enter Amount

4. Specify Other: $Enter Amount

**Site Work**

5. On Site Work: $Enter Amount

6. Off Site Improvements $Enter Amount

7. Specify Other: $Enter Amount

## use of funds – construction costs

1. New Structures: $Enter Amount

2. Rehabilitation: $Enter Amount

3. Accessory Structures: $Enter Amount

4. General Requirements: $Enter Amount

5. Overhead: $Enter Amount

6. Profit: $Enter Amount

7. Construction: $Enter Amount

8. Rehab: $Enter Amount

## use of funds – professional fees

1. Architect, Design: $Enter Amount

2. Architect, Supervision: $Enter Amount

3. Attorney & Real Estate: $Enter Amount

4. Consultant/Agent: $Enter Amount

5. Engineer/Survey: $Enter Amount

## use of funds – construction interim costs

1. Hazard Insurance: $Enter Amount

2. Liability Insurance: $Enter Amount

3. Payment Bond: $Enter Amount

4. Performance Bond: $Enter Amount

5. Credit Report: $Enter Amount

6. Interest: $Enter Amount

7. Origination Points: $Enter Amount

8. Discount Points: $Enter Amount

9. Credit Enhancement: $Enter Amount

10. Inspection Fees: $Enter Amount

11. Title & Recording: $Enter Amount

12. Legal Fees: $Enter Amount

13. Taxes: $Enter Amount

14. Specify Other: $Enter Amount

## use of funds – permanent finance

1. Bond Premium: $Enter Amount

2. Credit Report: $Enter Amount

3. Discount Points: $Enter Amount

4. Origination Fees: $Enter Amount

5. Credit Enhancement: $Enter Amount

6. COI Underwrite Disc: $Enter Amount

7. Title & Recording: $Enter Amount

8. Legal Fees: $Enter Amount

9. Prepaid MIP: $Enter Amount

## use of funds – soft costs

1. Feasibility Study: $Enter Amount

2. Market Study: $Enter Amount

3. Environmental Study: $Enter Amount

4. Tax Credit Fee: $Enter Amount

5. Compliance Fee: $Enter Amount

6. Rent-Up: $Enter Amount

7. Appraisal: $Enter Amount

8. Costs Certification: $Enter Amount

9. Specify Other: $Enter Amount

## use of funds – developer fees

**Syndication**

1. Organization: $Enter Amount

2. Bridge Loan: $Enter Amount

3. Tax Option: $Enter Amount

4. PV Adjustment: $Enter Amount

5. Specify Other: $Enter Amount

**Developer Fee**

1. Overhead: $Enter Amount

2. Profit: $Enter Amount

3. Consultant: $Enter Amount

## use of funds – project reserves

**Project Reserves**

1. Rent-Up: $Enter Amount

2. Operating: $Enter Amount

3. Replacement: $Enter Amount

4. Escrows: $Enter Amount

**Working Capital**

5. Regular Project: $Enter Amount

6. Unit : $Enter Amount

7. Specify Other: $Enter Amount

## use of funds – annual expenses

**Administrative Expenses**

1. Accounting: $Enter Amount

2. Advertising: $Enter Amount

3. Legal: $Enter Amount

4. Leased Equipment: $Enter Amount

5. Management Fee: $Enter Amount

6. Management Salaries: $Enter Amount

7. Model Apartment Rent: $Enter Amount

8. Office Supply/Postage: $Enter Amount

9. Telephone: $Enter Amount

10. Annual Compliance Fees: $Enter Amount

11. Miscellaneous: $Enter Amount

12. Specify Other: $Enter Amount

13. Specify Other: $Enter Amount

**Operating Expenses**

1. Fuel (Heat/Water): $Enter Amount

2. Electrical: $Enter Amount

3. Water & Sewer: $Enter Amount

4. Gas: $Enter Amount

5. Garbage: $Enter Amount

6. Security: $Enter Amount

7. Cable TV: $Enter Amount

8. Specify Other: $Enter Amount

**Maintenance**

1. Elevator: $Enter Amount

2. Exterminating: $Enter Amount

3. Grounds: $Enter Amount

4. Repairs: $Enter Amount

5. Maintenance Salaries: $Enter Amount

6. Maintenance Supplies: $Enter Amount

7. Pool: $Enter Amount

8. Specify Other: $Enter Amount

**Fixed Expenses**

1. Real Estate Taxes: $Enter Amount

2. In Lieu of Taxes: $Enter Amount

3. Other Tax Assessments: $Enter Amount

4. Insurance: $Enter Amount

5. Specify Other: $Enter Amount

**Reserves**

1. Replacement: $Enter Amount

2. Specify Other: $Enter Amount

**Debt Service**

3. Debt Service: $Enter Amount

**Annual Increase Factors**

4. Rent: $Enter Amount

5. Expenses: $Enter Amount

6. Replacement Costs: $Enter Amount

## profit/loss recap

ANNUAL INCOME Pre-Rehab Post Rehab

1. Maximum Rent: Enter Amount Enter Amount
2. Other Income: Enter Amount Enter Amount
3. Vacancy Loss: Enter Amount Enter Amount
4. Administrative: Enter Amount Enter Amount
5. Operating: Enter Amount Enter Amount
6. Maintenance: Enter Amount Enter Amount
7. Fixed: Enter Amount Enter Amount
8. Debt Service: Enter Amount Enter Amount
9. Other: Enter Amount Enter Amount
10. Other: Enter Amount Enter Amount

## contractors summary

**Fill in table with applicable numbers from choices below**

 \*\*Ethnic Type, Number of

\*Capacity \*\*\*Minority Code Contracts Expenditures

1. \*Capacity \*\*,\*\*\* Enter Number $Enter Amount

2. \*Capacity \*\*,\*\*\* Enter Number $Enter Amount

3. \*Capacity \*\*,\*\*\* Enter Number $Enter Amount

4. \*Capacity \*\*,\*\*\* Enter Number $Enter Amount

5. \*Capacity \*\*,\*\*\* Enter Number $Enter Amount

**\*Capacity:** (3) Contractor (8) Subcontractor

**\*\*Ethnic Type:** (1) White (2) Black (3) Native American (4) Asian/Pacific Islands (5) Hispanic (9999) Not Available

**\*\*\*Minority Code:** (1) Black (2) Hispanic (3) Woman/MWBE (4) Disadvantaged/DBE

(5) MBE/HUB (99) Other

## relocation information:

1. Parcels Acquired: Enter Number $Enter Amount

2. Businesses Displaced: Enter Number $Enter Amount

3. Displaced Non-Profit: Enter Number $Enter Amount

4. Temporarily Relocated People: Enter Number $Enter Amount

Displaced People by Race/Ethnicity

5. White: Enter Number

6. African American/Black: Enter Number

7. Native American: Enter Number

8. Asian/Pacific Islander: Enter Number

9. Hispanic/Latino: Enter Number

10. All other races: Enter Number

Attach Relocation Plan (**Exhibit M**) and Relocation Tenant Letter (**Exhibit M-2**).

## project schedule:

1. Option/Contract: Enter Date

2. Acquisition: Enter Date

3. Zoning: Enter Date

4. Tax Abatement: Enter Date

5. Final: Enter Date

6. Closing/Property Transfer: Enter Date

7. Construction Start: Enter Date

8. Construction Completion: Enter Date

9. Lease up Start: Enter Date

10. Placed in Service: Enter Date

## loan schedule:

**GENERAL RESERVE TRUST**

1. Application: Enter Date

2. Conditional Commitment: Enter Date

3. Permanent Commitment: Enter Date

4. Close/Disburse: Enter Date

**CONVENTIONAL LOAN**

5. Application: Enter Date

6. Conditional Commitment: Enter Date

7. Permanent Commitment: Enter Date

8. Close/Disburse: Enter Date

**LIHTC**

9. Application: Enter Date

10. Conditional Commitment: Enter Date

11. Permanent Commitment: Enter Date

12. Close/Disburse: Enter Date

**STATE HOME FUNDS**

13. Application: Enter Date

14. Conditional Commitment: Enter Date

15. Permanent Commitment: Enter Date

16. Close/Disburse Date: Enter Date

**OTHER:** Specify

17. Application: Enter Date

18. Conditional Commitment: Enter Date

19. Permanent Commitment: Enter Date

20. Close/Disburse: Enter Date

**OTHER:** Specify

21. Application: Enter Date

22. Conditional Commitment: Enter Date

23. Permanent Commitment: Enter Date

24. Close/Disburse: Enter Date

Include letters from all funders indicating firm commitments to provide loans as **Exhibit N**.

match proposed for project

1. Allocation Year: Enter Year

2. Type of Match: \*Choose Applicable Number Below

3. Transaction Date: Enter Date

4. Amount of Match: $Enter Amount

5. Description of Match: Enter Text

**\*Type of Match:** (1) Cash (2) Taxes-Fees (3) Land Property (4) Infrastructure (5) Prep-Labor-Material (6) Bond Financing (7) BMIR Loans

## Market demographics:

1. Primary Zoning Type: Choose Applicable Letter Below Cite Source, Date

(C) Commercial (I) Industrial (R) Residential

2. Neighborhood Type: Choose Applicable Number belowCite Source, Date

(1) Declining (2) Emerging (3) Revitalizing

3. Prevalent Housing Type: Choose Applicable Number BelowCite Source, Date

(1) Mobile Home Park (2) Multifamily Residential (3) Single Family Residential (4) Transient

4. Prevalent Employment Type: Choose Applicable Number BelowCite Source, Date

(1) FT Student, Title IV Assisted (2) FT Student Job Training Program (3) FT Student, Married/joint return (4) FT Student, single parent with dependent, (5) FT Student, no special conditions (6) Unemployed (7) Retired (8) Self-Employed (9) Agriculture (10) Business/Office (11) Technical/Professional (12) Industrial/Manufacturing

(13) Government/Public Service (14) Skilled/Specialized (15) Unskilled/Not Specialized (0099) Other, Not full time student

5. Prevalent Race: Choose Applicable Number Below Cite Source, Date

 (1) White (2) African-American/Black (3) Native American (4) Asian/Pacific Islander (5) Hispanic/Latino (9999) Other

6. Prevalent Ethnicity: Choose Applicable Number BelowCite Source, Date

(1) African-American/Black (2) Asian/Pacific Islander (3) Chinese-American (4) Cuban-American (5) Hattian-American (6) Hispanic-American (7) Jewish (8) Korean-American (9) Mexican-American (10) Middle Eastern/Arab (11) Native American (12) Puerto Rican (13) Other (0099) None

7. Average Housing Age: Enter Number Cite Source, Date

8. Average Purchase Price: $Enter Amount Cite Source, Date

9. Average Monthly Rent: $Enter Amount Cite Source, Date

10. Total Non-Low Income Rentals: Enter Number Cite Source, Date

11. Total Low-Income Rentals: Enter Number Cite Source, Date

12. Other Low Income Housing Area within: Enter Number miles Cite Source, Date

13. Public Housing Authority in Area within: Enter Number miles Cite Source, Date

## market facilities:

**EDUCATION** **Miles**

1. Preschool/Daycare: Enter Number Cite Source, Date

2. Elementary/Grade School: Enter Number Cite Source, Date

3. Junior/Middle School: Enter Number Cite Source, Date

4. High School: Enter Number Cite Source, Date

5. Community College: Enter Number Cite Source, Date

6. Vocational/Technical: Enter Number Cite Source, Date

7. College University: Enter Number Cite Source, Date

**SHOPPING**

8. Convenience: Enter Number Cite Source, Date

9. Food & Staples: Enter Number Cite Source, Date

10. Health & Pharmacy: Enter Number Cite Source, Date

11. Other Items: Enter Number Cite Source, Date

**COMMUNITY**

12. Activity Center: Enter Number Cite Source, Date

13. Parks & Recreation: Enter Number Cite Source, Date

**RELIGIOUS WORSHIP**

14. Church/Temple: Enter Number Cite Source, Date

**MEDICAL**

15. Clinic/Dispensary: Enter Number Cite Source, Date

16. Doctor's Office: Enter Number Cite Source, Date

17. Emergency Care: Enter Number Cite Source, Date

18. Hospital: Enter Number Cite Source, Date

19. Public Health Agency: Enter Number Cite Source, Date

**TRANSPORATION**

20. Public Transportation: Enter Number Cite Source, Date

21. Major Highway: Enter Number Cite Source, Date

**EMPLOYMENT**

22. Major Employer: Enter Number Cite Source, Date

23. Other Full Time Employment: Enter Number Cite Source, Date

24. Part-Time Occasional Work: Enter Number Cite Source, Date

## HOME/LIHTF QUALIFICATIONS:

Projects will qualify based on the number of points accumulated (200 points minimum). Mark only the boxes in this section which apply to this project:

[ ]  Project qualifies for the federal tax credit for low-income housing (100 points);

[ ]  Project has an application pending for the receipt of money directly from the Federal Government, the success of which is conditioned on the project receiving matching state money (100 points -- see Other Fund Sources, page 4 of this application);

[ ]  Project demonstrates a commitment of support from the local government in whose jurisdiction the project will be located. (This commitment may take a variety of forms development block grant, a provision of real property as the site of a project, a change in the local government's zoning law, including a waiver of any requirements regarding the level of density of a housing project, direct financial assistance or significant technical assistance.) (100 points -- **Exhibit H**)

[ ]  Proposal addresses the scarcity of affordable housing for eligible families in the area where

 the project will be located. (**25 points - Exhibit J**)

[ ]  Proposal addresses whether an award of money from the fund will assist in making the

 project more affordable. (**25 points - Exhibit K**)

[ ]  Proposal addresses the viability of the project without an allocation of money from the fund.

(**25 points - Exhibit L**)

[ ]  Project will accommodate eligible families in 50 percent or more of its units.

(**50 points - DEVELOPMENT PLAN: Pg. 5-7**)

[ ]  Project which will accommodate eligible families in 25 to 49 percent of its units.

(**25 points - DEVELOPMENT PLAN: Pg. 5-7**)

[ ]  Project will accommodate eligible families in 15 to 24 percent of units.

(**15 points - DEVELOPMENT PLAN: Pg. 5-7**)

[ ]  Proposal requires private funding as part of its development costs and includes letters from

all funding sources indicating a firm commitment. (**20 points - Exhibit N**)

[ ]  Proposal identifies specifically the housing to be rehabilitated or acquired or the site where the new

 construction is to occur. (**20 points - PROJECT INFORMATION: Pg. 3**)

The 50 points available for leveraging will be awarded competitively with points awarded under the following procedure: Each application will be evaluated by dividing the total project cost by the total number of units produced in the project.

Projects will only be compared with like-type projects (i.e., New construction or Rehabilitation).

 Calculate the following:

 Total project cost: $Enter Amount

 Number of units: Enter Number

 Cost per unit: $Enter Amount

**Scoring:** the application within the top 20 percent on a lowest cost-per-unit basis will receive 50

points; 21 through 40 percent will receive 25 points; 41 through 60 percent will receive 15 points.

## Application Checklist

1. All sections of application are completed [ ]

2. All Exhibits are properly labeled and attached [ ]

3. Exhibit A: Legal Description of Property [ ]

4. Exhibit B: Project Pro Forma [ ]

5. Exhibit C: Evidence of Non Profit Status (Non-Profits and CHDO’s) [ ]

6. Exhibit D: Role of the Non-Profit Organization in the Project (CHDOs) [ ]

7. Exhibit E: Non-Profit Board Information (Non-Profits and CHDO’s) [ ]

8. Exhibit F: Current/Recent Evidence of CHDO Certification (CHDOs) [ ]

9. Exhibit G: Project Budget [ ]

10. Exhibit G-2: Budget Narrative [ ]

11. Exhibit G-3: Budget Template (Attached) [ ]

12. Exhibit H: Evidence of Local Support [ ]

13. Exhibit I: Utility Allowance Verification Documents [ ]

14. Exhibit J: Addressing Affordable Housing Scarcity [ ]

15. Exhibit J-2: Transitional Program Plan (Transitional Housing) [ ]

16. Exhibit K: Affordability of the Project with Award [ ]

17. Exhibit L: Viability of Project without HOME/LIHTF Award [ ]

18. Exhibit M: Relocation Plan [ ]

19. Exhibit M-2: Relocation Tenant Letter [ ]

20. Exhibit N: Letters of all Funders Firm Commitments [ ]

21. Exhibit O: Market Demand Survey within the last 12 Months [ ]

22. Exhibit P: Financial Statements and Audits [ ]

## Exhibit g-3 Budget Template

 *Costs estimates can be submitted with the application and updated when costs are finalized.*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Uses*** | ***Total Projected Cost*** | ***NHD - HOME*** | ***Other*** |
| *Land* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Building* | $Enter Amount | $Enter Amount | $Enter Amount |
| ***Sub Total Acquisition*** | $Enter Amount | $Enter Amount | $Enter Amount |
|  | $Enter Amount | $Enter Amount | $Enter Amount |
| *Off-Site* | $Enter Amount | $Enter Amount | $Enter Amount |
| *On-Site* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Building* | $Enter Amount | $Enter Amount | $Enter Amount |
| *General Requirements* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Insurance* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Contractor Overhead & Profit* | $Enter Amount | $Enter Amount | $Enter Amount |
|  *FF&E* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Hard Cost Contingency* | $Enter Amount | $Enter Amount | $Enter Amount |
| ***Sub Total Hard Costs*** | $Enter Amount | $Enter Amount | $Enter Amount |
|  |  |  |  |
| A&E | $Enter Amount | $Enter Amount | $Enter Amount |
| *CAN/Envir./Geotech/Survey* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Building Permits & Fees* | $Enter Amount | $Enter Amount | $Enter Amount |
|  *P&P Bond* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Impact Fees* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Other* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Construction Period RE Taxes* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Insurance During Construction* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Market Study/Appraisal* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Title & Recording* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Developer Legal* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Marking & Lease-Up* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Accounting & Audit* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Investor Due Diligence* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Construction Loan Fees* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Construction Loan Interest* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Development Consultant* | $Enter Amount | $Enter Amount | $Enter Amount |
|  *NHD Fee* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Soft Cost Contingency* | $Enter Amount | $Enter Amount | $Enter Amount |
| ***Sub Total Soft Cost*** | $Enter Amount | $Enter Amount | $Enter Amount |
|  |  |  |  |
| *Fees/Reserves* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Operating Reserve* | $Enter Amount | $Enter Amount | $Enter Amount |
| *Replacement Reserve* | $Enter Amount | $Enter Amount | $Enter Amount |
|  *Developer Fee* | $Enter Amount | $Enter Amount | $Enter Amount |
| ***Sub Total Fees/Reserves*** | $Enter Amount | $Enter Amount | $Enter Amount |
|  |  |  |  |
| ***Total*** | $Enter Amount | $Enter Amount | $Enter Amount |

## certification:

The undersigned applicant certifies that the information in this application is true.

 \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant (Signature) Co-applicant (Signature)

 \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name and Title (Typed or Printed) Name (Typed or Printed)

 \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Date