

HTF RENTAL DEVELOPMENT APPLICATION

Anticipated Funds Available

2016 HTF Funds	\$490,576
2017 HTF Funds	\$489,501
Total	<u>\$980,077</u>

APPLICATION INSTRUCTIONS

The Municipality of Anchorage (Municipality) is announcing the release of the 2018 National Housing Trust Fund (HTF) Rental Development Application (Application). The total may be awarded for one project or split into multiple projects. This will be a competitive application process. Under this Application, the Municipality is interested in providing grants to successful applicants to provide housing to low-income persons. Projects may include new construction and/or rehabilitation of existing properties.

An eligible recipient of HTF funds will be required to comply with the uniform administrative requirements of 2 CFR Part 200 and the HTF regulations at 24 CFR Part 93. The Municipality will only award HTF funds for rental housing and/or operating cost assistance for rental housing rehabilitation projects. The maximum of operating cost is \$100,000. Projects must comply with underwriting provisions in the HTF federal regulations and be approved by the Municipality before an agreement may be executed. Applicants must provide acceptable assurances that they will comply with the requirements of the HTF program during the entire period, beginning upon selection of the recipient to receive HTF funds, and ending upon the conclusion of all HTF-funded activities at the end of the 30-year affordability period.

No funds, HTF, Municipal or other, may be committed to a project for which the applicant has applied before the environmental review is completed according to 24 CFR Part 93.301 and CPD Notice 16-14. Options to purchase a site executed prior to completion of the environmental review must comply with the NSP Policy Alert dated September 16, 2011. All buy/sell agreements must be reviewed and approved by Municipal staff. If the project has begun prior to the submitted Application, the project **MUST STOP ALL WORK** and no further expenditures may be incurred until the Application process has been completed which includes the environmental review. All funding awards, contracts or agreements made by the Municipality are conditional upon successful completion of the environmental review and receipt of a Release of Funds from HUD. The environmental review process takes at least 45 days from the date all supporting documentation is complete.

Application publication date: 8/21/2018

Pre-proposal conference date (at the CSD conference room, 825 L Street, Suite 506): 8/28/2018

Question cut-off date: 9/5/2018

All organizations that request an application will be provided with copies of all questions and answers.

ALL APPLICATIONS MUST BE RECEIVED BY THE DHHS CSD OFFICE AT 825 L STREET, ROOM 506 NO LATER THAN 4:00 PM, 9/12/2018.

Interested parties may review the application at <http://www.muni.org/Departments/health/PHIP/CSD/Pages/Default.aspx>. Potential applicants may obtain an electronic version of the Application by contacting Pat Monday at (907) 343-4822 or by email to mondaypc@muni.org. All questions must be submitted in writing to Pat Monday. Email is acceptable.

When in its best interest, the Municipality reserves the right to reject any and all applications at its sole discretion.

One complete hard-copy application package with original signatures and three (3) additional copies must be submitted by the due date/time to:

Municipality of Anchorage
Department of Health and Human Services
Housing and Community Services Division
Community Safety and Development (CSD)
825 L Street, Room 506
Anchorage, AK 99501
Mail: P.O. Box 196650
Anchorage, Alaska 99519-6650

Follow these instructions in completing your Application:

- Your proposal should be arranged in the order listed in the application checklist and must include each of the items listed on the application checklist.
- Include one (1) complete application package with original signatures and three (3) additional copies, all bound in three-ring binders.
- All application material should be bound in the order in which they are identified.
- Organize the application by using a cover page and a table of contents.
- Numbered tabs, should be placed between the application and each threshold and supporting application material item.
- Please prepare the proposal using 8½ x 11 inch paper. If maps need to be printed on a larger size paper, fold the map to an 8½ x 11 size and attach to the back of the proposal.
- Application must include a thumb drive containing the complete proposal in MS Word and the application Rental Development Program Excel Spreadsheets.

APPLICATION FORM

<p>Applicant Name & Mailing Address:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____, _____ _____</p>	<p>Contact Person Information:</p> <p>Name: _____</p> <p>Title: _____</p> <p>Phone: _____</p> <p>FAX: _____</p> <p>Email: _____</p>
<p>Funding Request: \$</p>	<p>Applicant's Tax ID#: _____</p> <p>Applicant's Duns#: _____</p>
<p>Eligible Activity Type: (Check as Applicable)</p> <p><input type="checkbox"/> Acquisition</p> <p><input type="checkbox"/> Rehabilitation</p> <p><input type="checkbox"/> New Construction</p> <p><input type="checkbox"/> Operating Cost</p>	<p>Project Information</p> <p>Project Name: _____</p> <p>Project Address: _____</p> <p>City, State Zip: _____, _____ _____</p>
<p>Occupancy:</p> <p><input type="checkbox"/> Permanent housing</p> <p><input type="checkbox"/> Permanent housing with supportive services</p>	<p>Preference:</p> <p>Permanent housing with supportive services</p>
<p>Applicant's Statement: <i>To the best of my knowledge and belief, all of the information contained in this application and attachments is true and correct, and the activities proposed in this application have been duly authorized by the governing body of the applicant.</i></p>	
<p>Type Name of Authorized Representative:</p> 	
<p>Signature of Authorized Representative:</p> 	
<p>Title of Authorized Representative:</p> 	

PROPOSAL COMPLETENESS CHECKLIST

Required Items:

- Signed letter of transmittal (A brief letter signed by a corporate officer or other individual who has the authority to bind the firm that includes a brief statement of your firm's understanding of the services to be performed, AND the name(s) of the person(s) who are authorized to make representations for your firm, their titles, address, and telephone numbers.
- Completed application (word document), including all certifications and all sections completed (1 complete application package with original signatures and 3 additional copies)
- Completed HTF Program Excel Spreadsheets
- Thumb drive containing the complete proposal in MS Word and the application HTF Program Excel Spreadsheets
- Most recent audited or unaudited financial statements
- Evidence of site control (non-acquisition projects)
- Displacement and Relocation Assistance Plan, General Information Notice (if applicable)
- Current Project Management Plan

Required Certifications:

- Certification that housing units assisted with the HTF will comply with HTF requirements

Project Description

Detailed Project Description

Describe the proposed project: a description of the eligible activities to be conducted with HTF funds, the physical project and all services that will be provided to residents, if any. Discuss the target clientele. If project includes rehabilitation, will any new housing-units be created?

Discuss the target clientele (for supportive housing) and tenants.

If project includes rehabilitation, are any new housing-units created?

Provide an assessment, at minimum, of the current market demand in the neighborhood in which the project will be located.

Describe how this HTF project will be administered in a manner that provides housing that is suitable from the standpoint of facilitating and furthering full compliance with the applicable provisions of title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d–2000d–4), the Fair Housing Act (42 U.S.C. 3601 et seq., E.O. 11063, 3 CFR, 1959–1963 Comp., p. 652) and HUD regulations issued pursuant thereto; and promotes greater choice of housing opportunities.

Provide a narrative how the proposed project meets the requirements in 24 CFR Part 93.150 - Site and Neighborhood Standards.

Units

Provide the following for the housing units.

For all projects with 5 or more units provide documentation that a minimum of 5% of the total unit count (fractional units rounded up), specifically equipped for persons with physical disabilities. All projects with 5 or more units must provide a minimum of 2% of the total unit count (fractional units rounded up), equipped for persons with hearing and sight. Separate units must satisfy these threshold conditions.

Provide documentation that the project will exclusively use certified Energy Star appliances.

The Violence Against Women Act (VAWA) requirements set forth in 24 CFR part 5, subpart L, apply to all rental housing assisted with HTF funds, as provided in 24 CFR Part 93.356. Provide a copy of the notice and certification form described in 24 CFR 5.2005 that will be used for this project.

Provide a copy of the VAWA lease term/addendum.

Provide a copy of the emergency transfer plan that meets the requirements in 24 CFR 5.2005(e).

Unit Information (Rental Development)

Unit Type	Total # of Units	Unit Size (Sq. Ft.)*	# of 30% Median Income Set-Aside Units	# of 50% Median Income Set-Aside Units	# of 60% Median Income Set-Aside Units	# of 80% Median Income Set-Aside Units				
SRO										
Efficiencies										
1 Bedroom										
2 Bedroom										
3 Bedroom										
4 Bedroom										
5 Bedroom										
Total Units										
Managers Unit (indicate only if not income set-aside, indicate # of Bedrooms _____)										
<i>Total Residential Units (Total all columns less Manager's Unit)</i>										
<table border="0"> <tr> <td style="vertical-align: top;"> <p>Development Design:</p> <p><input type="checkbox"/> Detached</p> <p><input type="checkbox"/> Townhouse</p> <p><input type="checkbox"/> 2-, 3- or 4-plex</p> <p><input type="checkbox"/> Multi Family (5+)</p> <p><input type="checkbox"/> Scattered Sites</p> <p># of Scattered Sites: _____</p> </td> <td style="vertical-align: top; padding-left: 20px;"> <p>#Units _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> </td> <td style="vertical-align: top; padding-left: 20px;"> <p>#Buildings _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> </td> <td style="vertical-align: top;"> <p>Other Amenities:</p> <p><input type="checkbox"/> Units contain Washer/Dryer Appliances</p> <p><input type="checkbox"/> Units contain Washer/Dryer Hook-ups only</p> <p><input type="checkbox"/> Common Laundry with: _____ washers and _____ dryers</p> <p><input type="checkbox"/> Blockheater plugs: # _____</p> <p><input type="checkbox"/> Units Contain Kitchens: # _____</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Other: _____</p> </td> </tr> </table>							<p>Development Design:</p> <p><input type="checkbox"/> Detached</p> <p><input type="checkbox"/> Townhouse</p> <p><input type="checkbox"/> 2-, 3- or 4-plex</p> <p><input type="checkbox"/> Multi Family (5+)</p> <p><input type="checkbox"/> Scattered Sites</p> <p># of Scattered Sites: _____</p>	<p>#Units _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>#Buildings _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Other Amenities:</p> <p><input type="checkbox"/> Units contain Washer/Dryer Appliances</p> <p><input type="checkbox"/> Units contain Washer/Dryer Hook-ups only</p> <p><input type="checkbox"/> Common Laundry with: _____ washers and _____ dryers</p> <p><input type="checkbox"/> Blockheater plugs: # _____</p> <p><input type="checkbox"/> Units Contain Kitchens: # _____</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Other: _____</p>
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Accessible Units:

of 504 Physically Equipped Units

of 504 Sight and Sound Units

Comparability

Will income set-aside units (HTF Units) contain the same amenities package as any market rate units?

Yes No.

Discuss:

Will any utilities other than telephone be paid directly by the tenant?

No

Yes. Attach the utility allowance you will use to determine the amount of rent the tenant will pay and list all tenant paid utilities. Utility allowance information can be found on Alaska Housing Finance Corporation's website. If utility company data is used and it is less than Public Housing Authority's Utility Allowance Schedule, you must also attach historical cost documentation to this application.

Utility allowance and list of tenant paid utilities is attached in Tab _____

Other amenities?

Broadband/WiFi

Cable

Furnished

PROJECT TIMELINE

Development Milestone	Scheduled Date (MM/YY)	Check if Complete
SITE:		
Site Control Secured (long term lease, earnest money paid, option to purchase executed)		<input type="checkbox"/>
Site Purchased/Leased		<input type="checkbox"/>
Zoning Approvals Obtained (if necessary)		<input type="checkbox"/>
ENVIRONMENTAL REVIEW:		
Municipality Environmental Review Complete		<input type="checkbox"/>
PLANS AND SPECIFICATIONS:		
Architect and Engineer Selected		<input type="checkbox"/>
Specifications, Schematic Drawings, Cost Estimate Complete		<input type="checkbox"/>
Local Building Code Review Complete		<input type="checkbox"/>
Final Plans and Specifications Complete		<input type="checkbox"/>
PERMANENT FINANCING:		
Permanent Financing Application Submitted		<input type="checkbox"/>
Permanent Financing Commitment Received		<input type="checkbox"/>
DEVELOPMENT FINANCING:		
Construction Loan Application Submitted		<input type="checkbox"/>
Construction Loan Commitment Received		<input type="checkbox"/>
CONSTRUCTION/REHABILITATION:		
Open Bid Process Complete		<input type="checkbox"/>
General Contractor Selected (required)		<input type="checkbox"/>
Construction to Begin		<input type="checkbox"/>
Construction Complete, Certificate of Occupancy		<input type="checkbox"/>
POST CONSTRUCTION:		
Tenants Selected		<input type="checkbox"/>
Rental Agreements Signed		<input type="checkbox"/>
Rent Up Completed		<input type="checkbox"/>

Summarize the development milestones made to date.

What challenges to the project development have been encountered so far? Have they been overcome? If so, how?

Summarize major development milestones that need to be accomplished prior to expending funds.

What foreseeable obstacles may prevent you from expending the funds in a timely manner?

Provide assurances that construction can reasonably be expected to start within 12 months of the agreement date with the Municipality.

NOTE: Municipality and the successful applicant(s) must have an executed agreement by March 2, 2019 for 2016 HTF funds and October 31, 2019 for 2017 HTF funds.

All 2016 HTF funds must be expended by March 2, 2022 and 2017 HTF funds must be expended by October 31, 2022.

Projects must have initial disbursement of funds within 12 months after setup in the HUD IDIS database.

Remaining HTF funds will be reduced or recaptured.

PROPERTY SITE CONTROL

Project Site Control

Provide evidence of site control for non-acquisition projects at the time of application for funding, and that site control is maintained until the environmental review, including all required public comment periods, is completed.

Site Street Address:

Municipal Property Tax ID number:

Site's Complete Legal Description:

What is the zoning for the site?

Is the site properly zoned for the proposed project? Yes No

Have you consulted the Municipality Planning Department regarding the site? Yes No

Describe any zoning obstacles you anticipate and how you will address those obstacles.

24 CFR Part 93.301 and CPD Notice 16-14, HUD funds may not be committed to a project that has been initiated before the environmental review is complete and the Municipality has received a Release of Funds from HUD. "Initiated" in this case includes any physical work that will limit the options of alternative sites, regardless of what source of funds has been used to do this work. **If the project has begun prior to the submitted Application, the project MUST STOP ALL WORK and no further expenditures are incurred until the Application process has been completed which includes the environmental review.** Options to purchase a site executed prior to completion of the environmental review must contain a clause, provided by the Municipality, that the purchase is conditional upon a successful environmental review. The closing date on an option must be six months from this application deadline. All funding awards, contracts or agreements made by the Municipality are conditional upon successful completion of the environmental review and receipt of a Release of Funds from HUD. The environmental review process takes at least 45 days from the date all supporting documentation is complete.

Property site control is evidenced by:

Supporting site control material can be found in tab _____.

Applicants for HTF funds must provide evidence of site control that is consistent with Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970. Specifically, the site control for a HTF funded project must evidence the appropriate notices regarding voluntary sale terms and the fair market value of the property being sold.

Deed (Applicant holds title to property)

Option to Purchase

A copy of the option with an expiration date no sooner than six months from application date.

The option includes a clause that the purchase is conditional upon a successful environmental review.

A specific site has not been selected. We have identified _____ (#) of potential locations

Photos of the site options

Zoning report

A brokers option of value on each site

Other. Please describe.

Property Status:

Improved (see below) Unimproved

If Improved, the property is:

Occupied (see below) Unoccupied

If Occupied, property is occupied by:

Owner Tenant- Household or Business. (If property is occupied by a tenant then the Applicant must comply with the Uniform Relocation Act, Violence Against Women Act and

Emergency Transfer Plan.)

APPLICANT AND DEVELOPER CAPACITY

Development Team

Additional information is included in Tab # _____. List key development team members and provide documentation - describing the team's experience within the past 10 years. Any substitution or change in partners or contract staff used to satisfy the experience requirements requires the Municipality's approval, in advance and in writing.

The General Contractor must be under contract before submitting the application.

<u>Team Position</u>	<u>Name</u>
<u>Sponsor/Developer (Applicant)</u>	
<u>General Contractor</u>	
<u>Architect</u>	
<u>Engineer</u>	
<u>Marketing</u>	
<u>Tax-Credit Consultant</u>	

Services performed by organizations/persons other than the Applicant or co-applicant above are subject to procurement requirements specified in 2 CFR Part 200.

Provide the following information for all projects which have been developed in the State of Alaska by the applicant or developer within the last 10 years. Attach additional pages in this section if necessary.

<u>Project Name</u>	<u>Alaska Location</u>	<u>Units (hsg) or Sq Ft. (other dev)</u>	<u>Year Developed</u>	<u>Project Status</u>

The Applicant shall have under contract all team members that will be contracted as part of the project prior to submitting the application. Provide information demonstrating experience and capacity of applicant to conduct an eligible HTF activity as evidenced by its ability to own and construct or rehabilitate an affordable multifamily rental housing development. Provide a brief narrative statement describing the experience the development team has in developing similar projects. Address both the organizational experience and the experience of specific individuals who will be involved in this project.

Development Team (Continued)

Provide evidence of legal organizational status, i.e., non-profit designation letter from the Internal Revenue Service (non-profits and municipalities) or authorizing legislation (Regional Housing Authorities).

Demonstrate applicant familiarity with the requirements of other Federal, State, or local housing programs that may be used in conjunction with HTF funds to ensure compliance with all applicable requirements and regulations of such programs.

Provide company history for the development entity and project management entity. Resumes for the following will be required to determine whether or not the property management firm passes the experience threshold.

Resumes Required for the Project Management firm's key staff.

Provide a list of any other similar projects that are or will be ongoing during the timeframe of this project. Demonstrate how both projects can be undertaken with current resources.

Describe any past monitoring findings and their resolutions.

Property Management Team

Additional information is included in Tab # ____.

<u>Name</u>	<u>Position Held</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Describe the Property Management Teams responsibilities which adequately demonstrates the ability of the applicant to manage the proposed project.

Describe any past monitoring findings and their resolutions.

Please list any other similar projects that are or will be ongoing during the timeframe of this project. Demonstrate how both projects can be undertaken with current resources.

ORGANIZATION FINANCIAL CAPACITY

With the application, provide the most recent audited financial statement.

Demonstrate the ability and financial capacity of applicant to undertake, comply, and manage the eligible activity. Disclose and describe your financial management system.

PROJECT REVIEW

To complete this section, you must complete the tables included in the HTF spreadsheets. Print out all completed sheets and attach hard copies to your hard copy application in this section. Also submit the electronic Excel spreadsheets on a disk along with your application.

- New Construction and Rehab Costs – Cost Estimates and Narrative
- Development Cashflow
- Development Sources and Costs
- Replacement Schedule (Capital Needs Assessment)
- Income and Expenses
- Rent-Up Reserves (Operating Cost Assistance-analysis of potential deficits after rent payments)
- Cashflow (the length of the 30-year Affordability Period)

Provide evidence demonstrating the financial feasibility of the proposed project. Both development feasibility (i.e., sources of development funds equal development costs) and operational feasibility (project revenue + other operating subsidies, if any, exceed in an acceptable amount the projects operating expenses and debt service requirements) must be evident.

All applicable Excel spreadsheets must be completed.

The current Anchorage maximum per unit subsidy limits for HTF program:

0 Bedrooms \$141,088
1 Bedroom \$161,738
2 Bedrooms \$196,672
3 Bedrooms \$254,431
4+ Bedrooms \$279,285

Minimally, this evidence should include:

Provide detailed scope write-ups in accordance with 2 CFR 200, detailed cost estimates and narratives. Provide a brief explanation of how your estimates were determined. If rehabilitation is proposed, a comprehensive property-inspection report in accordance with 24 CFR 93.301 to include health and safety; major systems; lead-based paint; accessibility; disaster mitigation; State and local codes, ordinances, and zoning requirements; Uniform Physical Condition Standards; capital needs assessments; and broadband infrastructure. Provide acceptable assurances using cash-flow analysis and narratives that applicant has adequate cash-flow for the duration of the project development period.

New Construction and Rehab Costs

Additional information is included in Tab #_____.

All costs (HTF and non-HTF) shall be detailed (materials, labor, fees, overhead), including but not limited to costs associated with: acquisition, A&E including any environmental reports and/or compliance activities, site preparation, construction (by item), finance costs, soft costs, and development fees. A cost narrative shall accompany the schedule detailing how costs occur and are driven, plus the sources for the estimates. Provide detailed work specifications for all construction.

Development Cashflow

Additional information is included in Tab #_____.

The Development Cashflow requires costs and sources to be entered at the estimated time of occurrence. The statement identifies the gap between non-HTF sources and uses, and provides for the allowable amount of HTF assistance. The spreadsheet also identifies any periods during the development phase when cash is short. The applicant may need to seek additional short-term financing or request adjustments to the construction loan.

Development Sources and Costs

Additional information is included in Tab #_____.

All sources must be committed. While commitments must be non-speculative and in the amounts necessary to complete the project, it is not necessary for the sources to have “closed” or been disbursed. Documentation may include award letters, offer letters, final term sheets, or other commitments which are conditioned upon the receipt of HTF funds. LIHTC applicants must have received a reservation from the Housing Credit Allocator and be able to provide a good faith offer of equity investment from an investor.

Provide a narrative of your source and the following documentation.

- Firm commitment letters with all terms and conditions for all mortgages, grants, bridge (interim) loans and investment tax credits (historical, low-income, if applicable);
- If the applicant is a partnership or limited liability corporation, a copy of the partnership agreement or operating agreement, which will indicate the cash contributions by the partner(s) or member(s); and
- If equity is committed by the developer or owner(s), evidence of available equity funds.

Replacement Schedule (Capital Needs Assessment)

Additional information is included in Tab # ____.

Provide a Capital Needs Assessment for all new construction and/or rehabilitation projects. Provide an assessment of the long-term physical needs of the project including all capital assets. In undertaking a Capital Needs Assessment, first identify the useful life of the facility's capital assets; provide backup. Then, calculate the payment stream necessary to replace each asset using the time-value of money. The applicant must insure the useful life of the project will exceed the compliance period for the project. Using your firm's rate of return, calculate the payment stream necessary to replace the assets using the time-value-of-money methodology. Transfer the results to the operating cashflow, with Year 1 going into the Income and Expenses schedule. Show your calculations.

Income and Expenses

Additional information is included in Tab # ____.

The Income and Expense statement requires you to identify all sources of revenue and reveal all operating costs. Provide a detailed narrative of your revenues and costs with documentation.

Rent-Up Reserves

Tab # ____.

Provide a narrative for the occupation-percentage assumptions with documentation. Operating Cost Assistance for HTF assisted units, for a period not to exceed 5-years, based on an analysis of potential deficits after rent payments.

Operations Cashflow

Tab # ____.

Provide a narrative for all assumptions in trend-percentage assumptions. Discuss what adjustments had to be made in cost and revenue assumptions for the project to be viable throughout the affordability period. Also, discuss what options may be taken if cashflow becomes negative.

TENANT ROLL

Tenant Roll (Use additional pages if necessary)

This schedule must be completed if you are acquiring or rehabilitating a project which is currently occupied by anyone other than the owner of the project, i.e., occupied by tenants. You must complete this schedule regardless of whether or not a tenant will actually be temporarily or permanently displaced.

A “General Information Notice” must have been delivered to each tenant, via certified mail, return receipt requested, or hand delivered with signature of receipt by the tenant obtained, prior to the submittal of this application.

Evidence of delivery of each tenant’s notice must be provided in the application package to be eligible for HTF funds.

Unit # (list numerically)	Tenant Name	Tenant Mailing Address	Number of Bedrooms	# of Members in the Household	Existing Monthly Rental Charge	Gross Household Income	Tenant To Be Temporarily Displaced (Y/N)
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No
							<input type="checkbox"/> Yes <input type="checkbox"/> No

UNIFORM RELOCATION ACT

If your proposed project is at a site that is improved and occupied by a tenant, you must comply with the Uniform Relocation Act and complete this section of the application.

Provide a Displacement and Relocation Assistance Plan for all applications which propose to undertake an activity which will involve acquisition or rehabilitation of a property occupied by a “person” other than the owner of that property (i.e., tenant, [including an individual, business or non-profit organization]). Provide copies of all tenant notifications, evidence of tenant notification (such as return receipt or other signature of delivery and receipt by tenant) and copy of tenant roll (as applicable).

Regulations require that the recipient of HTF funds (and in most cases, any other federal assistance) comply with the Uniform Relocation Act (URA), including, but not limited to, proper tenant notifications and relocation assistance. If development activity will result in business or residential tenant relocation, *you must attach a written relocation plan and fill out the tenant roll in this section.*

URA requires tenant notification even if relocation will not occur. For residential tenants, sample General Information Notices are included in this section. For other types of tenants, contact the Municipality or consult the URA regulations for an applicable General Information Notice. For projects applying for federal funds where tenants exist prior to the application date, *evidence of notification must be submitted with the application package.*

Note that “tenants” may refer to any lawful occupant of the property who is not the applicant or the current owner, including households, businesses, non-profit organization, etc...

URA Supporting Documentation

- A Displacement and Relocation Assistance Plan
- Copies of all tenant notifications
- Evidence of tenant notification (such as return receipt or other signature of delivery and receipt by tenant)
- Tenant roll is attached

General Information Notice (Gin): Residential Tenant that will not be Displaced

Dear _____:

On _____ (date), _____ (property owner) submitted an application to the Municipality for financial assistance to acquire and/or rehabilitate (specify proposed activity) the building which you occupy at _____ (address).

This notice is to inform you that, if the assistance is provided and the building is (specify activity), you will not be displaced. Therefore, we urge you not to move anywhere at this time. If you elect to move for reasons of your own choice, you will not be provided relocation assistance.

If the application is approved and Federal assistance is provided for the _____ (specify activity), you will be able to lease and occupy your present apartment (or another suitable, decent, safe and sanitary apartment in the same building) upon completion of the _____ (specify activity). Of course, you must comply with standard lease terms and conditions.

After the _____ (specify activity), your initial rent, including the estimated average monthly utility costs will not exceed the greater of (a) your current rent/average utility costs, or (b) 30 percent (30%) of your average monthly gross household income. If you must move temporarily so that the _____ (specify activity) can be completed, suitable housing will be made available to you for the temporary period, and you will be reimbursed for all reasonable extra expenses, including all moving costs and any increase in housing costs.

Again, we urge you not to move. If the project is approved, you can be sure that we will make every effort to accommodate your needs. Because Federal assistance would be involved, you would be protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

This letter is important and should be retained. You will be contacted soon. In the meantime, if you have any questions about our plans, please contact (name), (title), at (phone), (address).

Sincerely,

(Name and Title)

General Information Notice: Residential tenant that will be displaced

Dear _____:

On _____ (date), _____ (property owner) submitted an application to the Municipality for financial assistance to acquire and/or rehabilitate (specify proposed activity) the building which you occupy at _____ (address).

This notice is to inform you of your rights under Federal law. If (*property owner*) (*specify activity*) and you are displaced from the project, you will be eligible for relocation assistance under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended. However, do not move now. This is not a notice to vacate the premises. You should continue to pay your monthly rent to your landlord because failure to pay rent and meet your other obligations as a tenant may be cause for eviction and loss of relocation assistance. You are urged not to move or sign any agreement to purchase or lease a new unit before receiving formal notice of your eligibility for relocation assistance. If you move or are evicted before receiving such notice, you may not receive any assistance. Please contact us before you make any moving plans.

If (*property owner*) (*specify activity*) and you are eligible for relocation assistance, you will be given advisory services, including referrals to replacement housing, and at least 90 days advance written notice of the date you will be required to move. You should also receive a payment for moving expenses and may be eligible for financial assistance to help you rent or buy a replacement house. The assistance is more fully explained in the enclosed brochure, "Relocation Assistance to Tenants Displaced from Their Homes."

If for any reason any other persons move into this unit with you after this notice, your assistance may be reduced. If you have any questions, please contact (*name*), (*title*), at (*phone*), (*address*).

Again, this is not a notice to vacate and does not establish eligibility for relocation payments or other relocation assistance. You will receive further written notice regarding the plans to (*specify activity*) as these plans are further developed.

Sincerely,

(Name and title)

Enclosure

CERTIFICATIONS

Please attach the following certifications.

Debarment Certification (www.sam.gov)

Provide printouts from www.sam.gov for the applicant and all team members of the applicant. Printouts must be provided for all contractors and sub-contractors.

Certification that housing units assisted with the HTF will comply with HTF requirements

APPLICATION EVALUATION

Scoring the Evaluation Criteria

Below are the methodologies utilized in scoring the criteria. If a criterion is not discussed, then it will receive either all or none of the points available.

Some criteria will be scored using a mathematical formula. For example, under Project Description, the first criterion is “Target Clientele - percent of project 30% or less”. This will be a straight mathematical formula where the number of households at 30% or less than the median income is divided by the total number of households. The product will be multiplied by the total points available. This methodology will be used for the following criteria.

- Project Description, Target Clientele - percent of project 30% or less
- Project Review, Percentage of Sources Committed
- Leverage, Percent to HTF funds

Other criteria are subjectively scored. Each evaluator will employ a rating scale of 0 to 100% by 10% increments, to which the total available points will be multiplied and carried to 2 decimal points. For example, under Organizational Capacity, the Development Team has a total available score of 10 points. If a reviewer rated the criterion as earning 90%, the points earned would be $.9 \times 10 = 9$ points. The following criteria will be subjectively scored.

- Market Assessment of the Demand in the Neighborhood
- Project Description, Supporting Housing Services
- Organizational Capacity, Development Team
- Organizational Capacity, Similar Completed Projects
- Organizational Capacity, Project Management Team
- Organizational Capacity, Property Management Team
- Organizational Capacity, Organizational Financial Capacity
- Project Review, (All)

Lastly, Leverage criterion will compare the amount of HTF leverage (as determined by Municipal staff) among the proposals. The proposal offering the most leverage will receive the full 10 points. The proposal with the next highest amount of leverage will receive 8 points, and so on.

Evaluation Summary

Criteria	Sub-Criteria	Available	Received
Project Type - Select 1, 5 Pt. Max	New Construction/Rehab - Creating New Units	5	
	Rehabilitation of Existing Units	1	
Project Description - 15 Pt. Max	Target Clientele - percent of project 30% or less	5	
	Target Tenants - homeless or at-risk families	3	
	Supported by Market Assessment	2	
	Project based rental assistance (percent of units)	5	
Unit Info. - 10 Pt. Max	Units with bedrooms (1 or more)	1	
	Furnished	1	
	In Unit Kitchen Design	1	
	In Unit Laundry	1	
	Accessibility Beyond Required	1	
	Comparability to Market Units	1	
	Broadband/WiFi	1	
	Nonresidential Amenities	1	
	Parking Includes Accessibility to Block-Heater Plugs	1	
	Cable Paid by Landlord	1	
Market Assessment - 10 Pt. Max	Strength of rental market in neighborhood	5	
	Location of units	5	
Organizational Capacity - 25 Pt. Max	Development Team	10	
	Similar Completed Projects	3	
	Project Management Team	5	
	Property Management Team	5	
	Organizational Financial Capacity	2	
	Similar Ongoing Projects	-3	
	Monitoring Findings In Past 5 Years	-3	

Project Timeline - 10 Pt. Max		10	
Project Review - 55 Pt. Max	Construction/Rehab costs	10	
	Development cash flow	10	
	Development costs	5	
	Sources	5	
	Replacement schedule	5	
	Income and expense	5	
	Rent-up reserves	5	
	Cash flow	10	
	HTF funds percentage of project	5	
Leverage - 10 Pt. Max	Percent of non-federal funding sources	10	
Relocation - No Tenants Within Last 9 Months 10 Pt. Max		10	
Total Points		150	