**Exhibit A to RFA 2017-114– Housing Credit Financing for the Preservation of Existing Affordable Multifamily Housing Developments**

**1. Submission Requirement:**

a. Application Withdrawal Disincentive:

|  |  |
| --- | --- |
|  | (1) $25,000 Application Withdrawal Cash Deposit.If applicable, to whom should the refund check be made payable?Click here to enter text. Or |

|  |  |
| --- | --- |
|  | (2) $25,000 Letter of Credit. |

b. Provide the Applicant Certification and Acknowledgement, executed by the Authorized Principal Representative, as **Attachment 1**.

**2. Demographic Commitment:**

|  |  |
| --- | --- |
|  | a. Family |
|  | b. Elderly ALF |
|  | c. Elderly Non-ALF |
|  | d. Persons with a Disability |

**3. Contact Person, Applicant, Developer, and Management Company**

a. Contact Person

(1) Authorized Principal Representative contact information (required)

First Name: Click here to enter text.

Middle Initial: Click here to enter text.

Last Name: Click here to enter text.

|  |  |
| --- | --- |
| Street Address: | Click here to enter text. |

City: Click here to enter text.

State: Click here to enter text.

Zip: Click here to enter text.

Telephone: Click here to enter text.

Facsimile: Click here to enter text.

|  |  |
| --- | --- |
| E-Mail Address: | Click here to enter text. |
| Relationship to Applicant: | Click here to enter text. |

(2) Operational Contact Person information (optional)

First Name: Click here to enter text.

Middle Initial: Click here to enter text.

Last Name: Click here to enter text.

|  |  |
| --- | --- |
| Street Address: | Click here to enter text. |

City: Click here to enter text.

State: Click here to enter text.

Zip: Click here to enter text.

Telephone: Click here to enter text.

Facsimile: Click here to enter text.

|  |  |
| --- | --- |
| E-Mail Address: | Click here to enter text. |
| Relationship to Applicant: | Click here to enter text. |

b. Applicant

(1) Name of Applicant:

Click here to enter text.

(2) Provide the required documentation to demonstrate that the Applicant is a legally formed entity qualified to do business in the state of Florida as of the Application Deadline as **Attachment 2**.

(3) Non-Profit Applicant qualifications

Does the Applicant or the General Partner or managing member of the Applicant meet the definition of Non-Profit as set forth in Rule Chapter 67-48, F.A.C. or Rule Chapter 67-21, F.A.C.?



If “Yes”, provide the required information for the Non-Profit entity as **Attachment 3.**

c. General Developer Information

(1) Name of each Developer (including all co-Developers):

Click here to enter text.

Click here to enter text.

Click here to enter text.

(2) For each Developer entity listed in question (1) above (that is not a natural person), provide, as **Attachment 4**, the required documentation demonstrating that the Developer is a legally formed entity qualified to do business in the state of Florida as of the Application Deadline.

(3) General Development Experience (5 Points)

(a) To be eligible for funding, for each experienced Developer entity, provide, as **Attachment 4**, the required prior experience chart for at least one (1) experienced natural person Principal of that entity.

(b) To receive five (5) points, the Applicant must meet the Development Experience Withdrawal Disincentive criteria outlined in Section Four A.3.c.(3) of the RFA.

d. Principals Disclosure for the Applicant and for each Developer (5 points)

(1) Eligibility Requirement

To meet the submission requirements, the Applicant must upload the Principals of the Applicant and Developer(s) Disclosure Form (Form Rev. 08-16) (“Principals Disclosure Form”) with the Application and Development Cost Pro Forma, as outlined in Section Three of the RFA.

(2) Point Item

Applicants will receive 5 points if the uploaded Principal Disclosure Form was stamped “Approved” during the Advance Review Process provided (a) it is still correct as of Application Deadline, and (b) it was approved for the type of funding being requested (i.e., Housing Credits or Non-Housing Credits).

e. General Management Company Information:

(1) Name of the Management Company:

Click here to enter text.

(2) Provide, as **Attachment 5**, the required prior experience chart for the Management Company or a principal of the Management Company reflecting the required information.

**4. General Proposed Development Information**

a. Name of the proposed Development:

Click here to enter text.

b. Development Category/Rental Assistance (RA) Level:

(1) Select the Development Category:

|  |  |
| --- | --- |
|  | Preservation |
|  | Acquisition and Preservation |

(2) The Development Category requirements are outlined in Section Four.

(3) Rental Assistance (RA) Level

The Corporation will calculate the Rental Assistance (RA Level) based on the Development Category Qualification Letter provided as **Attachment 6** and using the criteria described in Section Four.

c. Select the Development Type

|  |  |
| --- | --- |
|  | Garden Apartments |
|  | Townhouses |
|  | Duplexes |
|  | Quadraplexes |
|  | Mid-Rise, 4-stories |
|  | Mid-Rise, 5 to 6-stories |
|  | High Rise |

d. Concrete Construction Qualifications

(1) Does the proposed Development meet the requirements to be considered Concrete Construction as outlined in Section Four A.4.d.(1) of the RFA?



(2) Concrete Construction Funding Preference

The Corporation will determine whether the Development qualifies for the Concrete Construction Funding Preference using the criteria described in Section Four.

**5. Location of proposed Development:**

a. County: Choose a county.

b. Address of Development Site:

Click here to enter text.

c. Does the proposed Development consist of Scattered Sites?



d. Latitude and Longitude Coordinates:

(1) Development Location Point:

Latitude in decimal degrees, rounded to at least the sixth decimal place

Click here to enter text.

Longitude in decimal degrees, rounded to at least the sixth decimal place

Click here to enter text.

(2) If the proposed Development consists of Scattered Sites, identify the latitude and longitude coordinate for each site, rounded to at least the sixth decimal place:

Click here to enter text.

e. Proximity

(1) PHA or RD 515 Proximity Point Boost

(a) Does the proposed Development qualify for the PHA Proximity Point Boost?



If “Yes”, provide the required letter as **Attachment 7.**

(b) Does the proposed Development qualify for the RD 515 Proximity Point Boost?



(2) Transit Services

Applicants may select Private Transportation or provide the location information and distance for one (1) of the remaining four (4) Transit Services on which to base the Application’s Transit Score.

(a) Does the Applicant commit to provide Private Transportation?



(b) Other Transit Services:

|  |  |  |  |
| --- | --- | --- | --- |
| Service | Latitude | Longitude | Distance (rounded up to the nearest hundredth of a mile) \* |
| Public Bus Stop | Latitude Coordinates | Longitude Coordinates | Distance |
| Public Bus Transfer Stop | Latitude Coordinates | Longitude Coordinates | Distance |
| Public Bus Rapid Transit Stop | Latitude Coordinates | Longitude Coordinates | Distance |
| SunRail Station, MetroRail Station, or TriRail Station | Latitude Coordinates | Longitude Coordinates | Distance |

\*Distance between the coordinates of the Development Location Point and the coordinates of the service. The method used to determine the latitude and longitude coordinates must conform to Rule 5J-17, F.A.C., formerly 61G17-6, F.A.C. All calculations shall be based on “WGS 84” and be grid distances. The horizontal positions shall be collected to meet sub-meter accuracy (no autonomous hand-held GPS units shall be used).

(3) Community Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Service | Name and Address of Service | Latitude | Longitude | Distance (rounded up to the nearest hundredth of a mile):\* |
| Grocery Store | Address of Service | Latitude coordinates | Longitude coordinates | Distance |
| Medical Facility | Address of Service | Latitude coordinates | Longitude coordinates | Distance |
| Pharmacy | Address of Service | Latitude coordinates | Longitude coordinates | Distance |
| Public School | Address of Service | Latitude coordinates | Longitude coordinates | Distance |

\*Distance between the coordinates of the Development Location Point and the coordinates of the service. The method used to determine the latitude and longitude coordinates must conform to Rule 5J-17, F.A.C., formerly 61G17-6, F.A.C. All calculations shall be based on “WGS 84” and be grid distances. The horizontal positions shall be collected to meet sub-meter accuracy (no autonomous hand-held GPS units shall be used).

**6. Units**

a. Total number of units in the proposed Development: Click here to enter text.

b. Select the applicable item below:

|  |  |
| --- | --- |
|  | (1) Proposed Development consists of 100% rehabilitation units |
|  | (2) Proposed Development consists of a combination of new construction units and rehabilitation units. State the quantity of each type: |

Click here to enter text. new construction units

Click here to enter text. rehabilitation units

c. The existing affordable development must be at least 75 percent occupied as of the Application Deadline.

d. Set-Aside Commitments

(1) Select one (1) of the following minimum set-aside commitments:

|  |  |
| --- | --- |
|  | 20% of units at 50% Area Median Income (AMI) or lower  |
|  | 40% of units at 60% AMI or lower |

(2) Total Set-Aside Breakdown Chart

Note: To enter data into the Total Set-Aside Breakdown Chart below, the Applicant must double click within the desired chart.



e. Unit Mix Chart

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Bedrooms per Unit** | **Number of Baths per Unit** | **Number of Units per Bedroom Type** | **Number of Units that are ELI Set-Aside Units** |
| Enter Number | Enter Number | Enter Number | Enter Number |
| Enter Number | Enter Number | Enter Number | Enter Number |
| Enter Number | Enter Number | Enter Number | Enter Number |
| Enter Number | Enter Number | Enter Number | Enter Number |
| Enter Number | Enter Number | Enter Number | Enter Number |
| Enter Number | Enter Number | Enter Number | Enter Number |

**7. Readiness to Proceed**

a. Site Control

Provide the required documentation to demonstrate site control as **Attachment 8**.

b. Ability to Proceed documents

(1) Provide the required documentation to demonstrate the status of site plan or plat approval as **Attachment 9**.

(2) Provide the required documentation to demonstrate zoning as **Attachment 10**.

(3) Provide the required documentation to demonstrate availability of electricity as **Attachment 11**

(4) Provide the required documentation to demonstrate availability of water as **Attachment 12**.

(5) Provide the required documentation to demonstrate availability of sewer as **Attachment 13**.

(6) Provide the required documentation to demonstrate availability of roads as **Attachment 14**.

**8. Construction Features**

a. Federal requirements and State Building Code requirements for all Developments are outlined in Section Four.

b. General feature requirements for all Developments are outlined in Section Four.

c. Accessibility feature requirements for all Developments are outlined in Section Four.

d. Green Building Features:

Applicants must select enough of the following Green Building Features so that the total point value of the features selected equals at least 10, in addition to committing to the required Construction Features listed in Section Four.

[ ]  Programmable thermostat in each unit (2 points)

[ ]  Humidistat in each unit (2 points)

[ ]  Water Sense certified dual flush toilets in all bathrooms (2 points)

[ ]  Light colored concrete pavement instead of or on top of asphalt to reduce the heat-island effect (2 points)

[ ]  Energy Star certified roof coating (2 points) \*

[ ]  Energy Star certified roofing materials (metal, shingles, thermoplastic polyolefin (TPO), or tiles) (3 points) \*

[ ]  Eco-friendly cabinets – no added urea formaldehyde and material must be certified by the Forest Stewardship Council, the Environmental Stewardship Program, or a certification program endorsed by the Programme for the Endorsement of Forest Certification (3 points)

[ ]  Eco-Friendly flooring for entire unit – Carpet and Rug Institute Green Label certified carpet and pad, FloorScore certified flooring, bamboo, cork, 80% recycled content tile, and/or natural linoleum (3 points)

[ ]  High Efficiency HVAC with SEER of at least 16 (2 points) \*\*

[ ]  Energy efficient windows in each unit (3 points)

* For all Development Types except Mid-Rise and High Rise: Energy Star rating for all windows in each unit;
* For Development Type of Mid-Rise and High Rise:
* U-Factor of 0.50 or less and a SHHGC of 0.25 or less where the fenestration is fixed; and
* U-Factor of 0.65 or less and a SHHGC of 0.25 or less where the fenestration is operable (i.e., the window opens)

[ ]  Florida Yards and Neighborhoods certification on all landscaping (2 points)

[ ]  Install daylight sensors, timers or motion detectors on all outdoor lighting attached to buildings (2 points)

\*The Applicant may choose only one option related to Energy Star certified roofing.

\*\*Applicants who choose high efficiency HVACs must meet the standards listed here, which exceed the minimum Green Building Features required of all Developments Section Four A.8 of the RFA.

**9. Resident Programs:**

a. Applicants that select the Family Demographic must commit to provide at least three (3) of the following resident programs:

[ ]  After School Program for Children

[ ]  Literacy Training

[ ]  Employment Assistance Program

[ ]  Family Support Coordinator

[ ]  Financial Management Program

[ ]  Homeownership Opportunity Program

b. Developments serving the Elderly (ALF or Non-ALF) Demographic:

(1) Required Resident Programs for all Applicants that select the Elderly Demographic (ALF or Non-ALF) are outlined in Section Four.

(2) Additional required Resident Programs for all Applicants who select the Elderly ALF Demographic Commitment are outlined in Section Four.

(3) Applicants that select the Elderly (ALF or Non-ALF) Demographic must commit to at least three (3) of the following resident programs, in addition to the required resident programs stated in Section Four:

[ ]  Literacy Training

[ ]  Computer Training

[ ]  Daily Activities

[ ]  Assistance with Light Housekeeping, Grocery Shopping and/or Laundry

[ ]  Resident Assurance Check-In Program

c. Developments serving the Persons with a Disability Demographic

(1) Required Resident Programs for all Applicants that select the Persons with a Disability Demographic are outlined in Section Four.

(2) Applicants that select the Persons with a Disability Demographic must commit to at least one (1) of the following resident programs:

[ ]  24 Hour Support to Assist Residents In Handling Urgent Issues

[ ]  Employment Services

[ ]  Resident Health Care Coordination Program

**10. Funding:**

a. Corporation Funding

(1) Competitive Housing Credits

(a) Housing Credit Request Amount (annual amount): $ Click here to enter text.

The Maximum Housing Credit Request Chart is provided in Section Four A.10. of the RFA.

(b) Is the proposed Development the first phase of a multiphase Development?

 

(c) Basis Boost Qualifications:

(i) Is the proposed Development a subsequent phase of a multiphase Development and eligible for the basis boost?



If “Yes”, state the Corporation-assigned Application Number for the Development where the first phase was declared: Click here to enter text.

(ii) Are any buildings in the proposed Development located in a SADDA?



If “Yes”, provide the SADDA ZCTA Number(s): Click here to enter text.

(The Applicant should separate multiple SADDA ZCTA Numbers by a comma.)

(iii) Is the proposed Development located in a non-metropolitan DDA?



(iv) Is the proposed Development located in a QCT?

 

If “Yes”, indicate the QCT Number: Click here to enter text. and provide the required letter from the local planning office or census bureau as **Attachment 15**.

(d) The HC equity proposal must be provided as **Attachment 16**.

(2) Other Corporation Funding

(a) If a PLP loan has been awarded for this Development, provide the following information:

|  |  |  |
| --- | --- | --- |
| Corporation File # |  | Amount of Funding |
| Click here to enter text |  | $ Click here to enter text |

(b) If any other Corporation funds will be incorporated as a source of financing for the proposed Development, provide the information in the chart below:

|  |  |  |
| --- | --- | --- |
| **Corporation Program** | **Corporation File No.** | **Amount of Funding** |
| SAIL | Enter file No. | $ Enter file No. |
| HOME-Rental | Enter file No. | $ Enter file No. |
| MMRB | Enter file No. | $ Enter file No. |
| EHCL | Enter file No. | $ Enter file No. |

b. Non-Corporation Funding

(1) If the proposed Development is assisted with funding under the United States Department of Agriculture RD 515 Program and/or the RD 538 Program, indicate the applicable program(s) below and provide the required documentation as **Attachment 17** to Exhibit A.

[ ]  RD 515 [ ]  RD 538

(2) Other Non-Corporation Funding Proposals

The Applicant must attach all funding proposals executed by the lender(s) or by any other source. Insert the documentation for each source as a separate attachment to Exhibit A, beginning with **Attachment 18,** and continuing with sequentially numbered attachments for each additional funding source.

c. Development Cost Pro Forma

To meet the submission requirements, the Applicant must upload the Development Cost Pro Forma with the Application and Principals of the Applicant and Developer(s) Disclosure Form (Form Rev. 08-16) (“Principals Disclosure Form”), as outlined in Section Three of the RFA.

d. Per Unit Construction Funding Preference

Does the proposed Development qualify for the Per Unit Construction Funding Preference?



\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**B. Addenda**

The Applicant may use the space below to provide any additional information or explanatory addendum for items in the Application. Please specify the particular item to which the additional information or explanatory addendum applies.

Click here to enter text.