



# Housing Trust Fund of Johnson County Revolving Loan Fund Application

(Please remain within the given format of the application. Page layout may not be changed.)

Date: \_\_\_\_\_ Project Name: \_\_\_\_\_

## Type of Project

- |   |   |
|---|---|
| <input type="checkbox"/> Development of Owner-Occupied Housing      | <input type="checkbox"/> Rehab of Owner-Occupied Housing      |
| <input type="checkbox"/> Development of Transitional/Rental Housing | <input type="checkbox"/> Rehab of Transitional/Rental Housing |
| <input type="checkbox"/> Development of Emergency Shelter           | <input type="checkbox"/> Rehab of Emergency Shelter           |
| <input type="checkbox"/> Homeowner Assistance (Downpayment, etc.)   |   |
| <input type="checkbox"/> Other – Describe: _____                    |   |

## Lead Applicant Information

Name: \_\_\_\_\_ Federal Tax ID#: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

## Secondary Applicant Information (if applicable)

Name: \_\_\_\_\_ Federal Tax ID#: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

## Organization Type of Lead Applicant (check one)

- |  |  |
|--|--|
| <input type="checkbox"/> Community Housing Devel. Org.       | <input type="checkbox"/> Private For-profit Organization |
| <input type="checkbox"/> Private Non-profit Organization     | <input type="checkbox"/> Public Organization             |
| <input type="checkbox"/> Individual or Partnership Applicant |  |
| ↪ Type of partnership _____ Status _____                     |  |

## Funds Requested

Total Loan Requested: \$ \_\_\_\_\_

## Terms Requested (Must provide sufficient supporting information to comply with said terms)

Proposed repayment terms: \_\_\_\_\_  
(Elaborate on any unique circumstances)

# Housing Trust Fund of Johnson County Application

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**Project Name:**

**Project Neighborhood:**

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**Project Address / Street Boundaries:**

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## I. APPLICANT

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Describe the applicant's mission, programs and years in existence. Provide a description of its experience with other projects. Include organization staffing and budget. Attach list of Board Members and their occupations.

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## II. IDENTIFICATION OF DEVELOPMENT & MANAGEMENT TEAM

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Please provide complete relevant contact information, as applicable, for members of the overall development team such as the Developer, General Partner, General Contractor, Architect, Property Management, etc. Complete as fully as possible given the development team may not be fully formed.

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## III. PROJECT DESCRIPTION

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***If requested information is not available provide statement detailing project & status.*** Describe the major components of the project (location, what will be accomplished, who will it serve, when will it start/finish, total project cost). Describe neighborhood and surrounding community. Indicate why this site was selected. Attach Location Map indicating project location. Attach Project Development Timetable that outlines the stages of the project (i.e. acquisition of site, temporary relocation, financial closing, construction start, construction completion, rent up, etc.). For downpayment assistance programs, include a detailed description of the criteria the applicant will use to identify assistance recipients, how the program will be managed and who will be in charge of administering it.

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## IV. DEGREE OF NEED

Describe the need for the activity proposed and demonstrate the need for the financial assistance requested. Without the requested level of funding, what changes/modifications would be made to the project? For downpayment assistance programs, describe how the proposed program meets a need not addressed by similar programs in Johnson County.

## V. BENEFITS

Identify the population and income groups to be served and services provided by the project. Identify the proposed term of affordability. Is the proposed development permanent, transitional or emergency housing?

## VI. DEVELOPMENT INFORMATION

*Type of Activity (check all that apply):*

Acquisition     
  Conversion /Adaptive Re-Use     
  Demolition     
  Historic Pres. / Renov.  
 New Construction     
  Refinance     
  Rehabilitation     
  Other

## VII. BUILDING INFORMATION

Total Number of Buildings \_\_\_\_\_ Total Site Area (square feet) \_\_\_\_\_  
 Year Built \_\_\_\_\_ Acres \_\_\_\_\_  
 Are Buildings Vacant or Occupied? \_\_\_\_\_ Density (Units/Acres) \_\_\_\_\_  
 Number of Bedrooms per Unit \_\_\_\_\_

Types of Structures Housing Space	Type of Building (1)	Number of Buildings (2)	Number of Stories	Number of Dwelling Units (DU)	Gross Square Ft. (3)	Const. Costs	Cost/ Square Ft.	% TDC (4)
New Construction								
Rehabilitation								

Types of Structures Non-Housing Space	Type of Building (1)	Number of Buildings (2)	Number of Stories	Number of Dwelling Units (DU)	Gross Square Ft. (3)	Const. Costs	Cost/ Square Ft.	% TDC (4)
Administration								
Programmatic								
Other (5)								

<b>TOTALS</b>								
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- (1). Walk-up (WU), Townhouses (TH), Elevator (E), Single Family (SF), Duplex (DP)
- (2). Total number of residential structures, excluding detached garages and detached accessory buildings
- (3). Count basements and balconies at 1/2 square footage
- (4). Percent of Total Development Costs
- (5). Other includes: common space, commercial, congregate dining, day care, etc.

## VIII. SITE CONTROL

Has a market study been conducted for the project?  Yes  No

If yes, please give a brief overview of its conclusions. \_\_\_\_\_

Is the property a vacant lot?  Yes  No

Does the applicant currently have site control of the property/building?  Yes  No  
*(Attach As-Is Appraisal, Attach Evidence of Site Control)*

**If yes, what type of site control: (Include Attachments III. A-B)**

<input type="checkbox"/> Own	Date and Purchase Price	
<input type="checkbox"/> Lease	Please Outline Terms	
<input type="checkbox"/> Option	Please Outline Terms	

**If no, explain your plans and timeline for obtaining site control:**

## IX. PROPERTY ZONING

Is the property in compliance with current zoning requirements?  Yes  No  
*If no, please explain necessary zoning changes and the progress of the re-zoning process.*

	Present zoning/classification
	Purchase price
	Max units/acre

Are variances, conditional use permits, or special use permits required?  Yes  No

Is property located in historic district or designated a historic building?  Yes  No

**Unusual Site Features (check all that apply)**

<input type="checkbox"/> 30 year Flood Plain	<input type="checkbox"/> None
<input type="checkbox"/> 100 year Flood Plain	
<input type="checkbox"/> Industrial / Envir. Hazard	Explain: _____
<input type="checkbox"/> Other	Explain: _____

## X. CURRENT INDEBTEDNESS

Are Property Taxes on the property/building(s) current?  Yes  No  
*(If no, please include in the chart below)*

Name & Address of Lender	Original Loan Amount	Monthly Payment	Term	Int. rate	Fixed or Variable	Unpaid Balance	Maturity Date

## XI. PROPOSED SOURCES OF FUNDING

Identify proposed sources of funding for the project and the status of securing proposed funding. Attach funding commitments, preliminary loan commitments, etc.

Funder/Program	Amount	Uses	Describe Type & Terms (1)	Committed? (yes/no) (2)	% Total Sources
HTFJC					
CDBG					
HOME					
<b>TOTAL AMOUNT</b>					

(1). Deferred, Amortizing, Grant, Loan, etc., Maturity & Terms (2). Funds Awarded

## XII. TAX INCREMENT FINANCING

Is Tax Increment Financing being considered? Describe proposed TIF assumptions and status of application.

## XIII. ESTIMATED ANNUAL INCOME AND EXPENSES (Transitional and Rental Only)

Attach the 10-year Cash Flow Proforma –PROGRAM TEMPLATE IS AVAILABLE AT WWW.HTFJC.ORG (if mixed use: housing and commercial cash flows should be provided separately).

Unit Type (0BR, 1BR, 2BR, etc.)	# of Dwelling Units	Approx Size (Net Rentable Sq. Ft.) of Units	Proposed Monthly Contract Rent / Unit	Total Annual Contract Rent (# x rent x 12)	Est. Cost of Mo. Utilities Paid by Occupant	Monthly Gross Rent (Proposed Contract Rent + Utilities)	Income Limit (% AMI)	Rent Limit (% AMI)
<b>TOTALS</b>								

Utilities to be paid by occupant (excluding telephone):

Water & Sewer		Heat - Type	
Hot Water		Air Conditioning	
Household Electric		Other - Specify	

## XIV. REPAYMENT PLAN (All Other)

For projects without rental income, provide information regarding the sources of income that applicant will use for repayment of loans awarded by HTFJC. Applicants that will rely on fundraising or other private donations must demonstrate a track record of raising the funds necessary to support the project.

## XV. DEVELOPMENT BUDGET

NOTE: If mixed use, please separate Housing and Non-Housing Costs. Applicant may submit a development budget created for another funding source for the same project. HTFJC may require additional information from applicants who use alternative forms and for projects in excess of \$500,000.

1. CONSTRUCTION COSTS	HOUSING	NON-HOUSING
a. Hard		
b. Soft		
c. Contingency		
d. Construction Interest		
<b>TOTAL CONSTRUCTION</b>		
2. FEES		
a. Architectural / Engineering		
b. Developer's Fee		
c. Legal / Appraisal		
d. Other (Specify)		
<b>TOTAL FEES</b>		
3. OTHER	HOUSING	NON-HOUSING
a. Construction Period Interest		
b. Marketing		
c. Initial Equipment and Furniture Budget (Submit Detail)		
d. Real Estate Taxes During Construction		
e. Feasibility Study		
f. Appraisal		
g. Soil Borings		
h. Lead Risk Assessment (For units built before 1978)		
i. SAC/WAC Charges		
j. Survey		
k. Rental Attainment Gap		
<i>[Difference between income and expenses from completion of construction (i.e.; Certificate of Occupancy) to breakeven].</i>		
l. Prepaid Interest		
m. Interest Rate Buy Down		
n. Relocation Expenses		
o. Construction Contingency <i>(10% of [1. A. a.] for rehab; 3% of [1. A. a.] for new)</i>		
p. Off Site Construction Costs		
q. Letter of Credit Fees (Specify)		
r. Developer Fee		
s. Developer Overhead (Please Submit Detail & Fee)		
t. Debt Service Reserve		
u. Perm. Interest		
v. Other		
<b>TOTAL OTHER</b>		

<b>4. LAND</b>		
a. Land Cost		
b. Value of Improvements on Land		
c. Special Assessments		
d. Demolition		
e. Other (Specify)		
<b>TOTAL LAND</b>		
<b>5. TOTAL DEVELOPMENT COST OF PROJECT (TOTAL 1-4)</b>		

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## XVI. CERTIFICATIONS

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The undersigned applicant hereby certifies with respect to this application and the project for which the Housing Trust Fund assistance is requested as follows:

- All information and representations contained in this application and the attachments hereto are true and accurate.
- Applicant will comply with all the applicable federal, state, and local laws and regulations in completing and operating the project/program, including, without limitation, local zoning laws and codes and Fair Housing Laws.
- Applicant certifies that the funds requested will be use only for eligible costs associated with the project/program.
- Applicant has the ability and capacity to implement the project/program and have duly committed its own human and financial resources to the project/program as described in the application.
- No costs for which HTFJC assistance is requested have been incurred by the applicant to the date hereof (outside of costs associated with project feasibility), or will be incurred by applicants prior to HTFJC approval of the project.
- Applicant has identified local housing needs in the area in which the project/program will be located, and the project is designed to meet such needs and to be consistent with local laws, codes and housing plans.
- Applicant hereby gives permission to the HTFJC to research applicant's history, request additional financial information and perform other related activities necessary for the reasonable evaluation of this application.
- Applicant certifies that they understand the RFP and all of its requirements and that this application will be incorporated into the /Loan Agreement if approved for funding.
- Applicant understands that information submitted to the HTFJC relating to this application may be public information.
- Applicant understands that awards are made at the discretion of the Board of Directors of the HTFJC.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

## **XVII. ATTACHMENTS**

Include the following clearly readable attachments. Attachments must be submitted in the following sequence and be printed on 8.5" x 11" paper. If requested document is not available provide detailed explanation to substantiate its absence.

- I. Applicant Attachments
  - A. One of the following financial documents\*
    1. HUD Previous Participation Form for general partner or applicant
    2. Financial statement
    3. Audit letter
    4. Letter from financial institution indicating net worth is at least twice the worth of the loan request.
  - B. List of Board Members and their occupations
- II. Project Description Attachments
  - A. Location Map
  - B. Project Development Timeline
  - C. If rehabilitation, a description of the proposed scope of work
- III. Site Control Attachments (If applicable)
  - A. As-Is Appraisal
  - B. Evidence of Site Control
- IV. All Funding Commitments
- V. 10-year Cash Flow Projections - if mixed use, Housing and Commercial projections should be submitted separately
- VI. Evidence of Prior Fundraising Experience (If applicable. See Part XIV.)
- VII. Relocation Plan (as applicable)

### **Application Instructions**

**Funding is made available on a quarterly basis\*. The application deadlines for FY11 are 5:00 PM on:**

September 21, 2010  
December 21, 2010  
March 21, 2011  
June 21, 2011

The HTFJC Board of Directors will determine the amount of funding available, if any, approximately a month before each deadline. Funding decisions will usually be made approximately 30 days following the application deadline.

\*HTFJC recognizes that occasionally unanticipated opportunities arise and an applicant's need for funding may not fit this quarterly schedule. HTFJC will consider exceptions to these deadlines in special circumstances.

**Please submit one electronic copy of the application and one hard copy of the application including all attachments.**

**Contact Tracey Achenbach at 358-0212 prior to submitting an application.**