

OID REFUNDING/REFINANCE REQUEST FORM
Nonprofit Housing & Facilities Programs

The Washington State Housing Finance Commission will use the information below to issue an inducement resolution that will satisfy the requirements under Section 1.150-2 of the United States Treasury Regulations.

If 501(c)(3) bonds previously issued by the Commission are to be reissued or refunded, a new application fee will not be required. Please use this form to help staff understand your new financing.

A new OID will be generated.

1 Project Name:	
Street Address:	
City:	State: Zip:
County:	
Congressional District:	
State Legislative District:	
Tax Parcel ID Number(s):	
Abbreviated Legal Description:	

If the original financing had multiple sites, use page 2.

2. Previous Commission Financing

Has the project been previously funded with 501(c)(3) Bonds?

Yes If yes, enter OID#

3. Is there more than one building or street address for the site?

Yes No

If yes, please list all applicable street addresses:

4. Who is the current bank/Credit Enhancement Provider?

5. Who is the current holder of the Bond(s)?

6. Who is the new bank contact (Name, Phone, Email)?

7. Will Bond proceeds be used for anything other than the refinancing (please list other uses)?

8. Main Project Contact:

Company:	
Street Address:	
City:	State: Zip:
Telephone:	Fax:
Email:	
Relationship to Project:	

9. Requested Bond Amount

Tax-Exempt:

Taxable:

10. Anticipated Bond Closing Date:

The undersigned hereby certifies that the above information is true, accurate and complete.

Signature:

Name (print):

Title:

Organization: