



WASHINGTON STATE
**HOUSING FINANCE
 COMMISSION**

Opening doors to a better life

**2017 9% Competitive Housing Credit Application
 Application Checklist**

This checklist includes all the items from the CFA application and the LIHTC Addendum that are required for the 2017 9% Application round.

Tab 1: Project Summary

Section 1	<input type="checkbox"/>	Project Summary
Form 1	<input type="checkbox"/>	Project Summary

Tab 2: Project Description

Section 2	<input type="checkbox"/>	Project Narrative
Form 2A	<input type="checkbox"/>	Building Information
Form 2B	<input type="checkbox"/>	Square Footage Details
Form 2C	<input type="checkbox"/>	Evergreen Sustainable Development Standard v3.0 Checklist
Attachments		
	<input type="checkbox"/>	Architect Certification of Gross Residential Square Footage (must be consistent with Form 2B)
	<input type="checkbox"/>	Preliminary Drawings and Site Plan <ul style="list-style-type: none"> • For New Construction projects, include elevations, typical floor plans, descriptive building sections, site plan, and roof plan • For projects that involve interior reconfiguration, exterior improvements, or newly constructed additions, include typical floor plans, primary elevations, descriptive building section, site plan and roof plan • For projects in existing buildings, provide current floor plans, for each floor if they differ • For all projects include a Site Plan of Off-Site Improvements if applicable
	<input type="checkbox"/>	Documentation of Site Control
	<input type="checkbox"/>	Title Report
	<input type="checkbox"/>	Evergreen Owner Certification (Non-HTF Funded Projects only)

Tab 3: Need & Populations Served

Section 3	<input type="checkbox"/>	Need & Populations Served
Form 3	<input type="checkbox"/>	Populations to be Served
Attachments		
	<input type="checkbox"/>	Market Study
	<input type="checkbox"/>	Document of consistency with the Consolidated Plan
	<input type="checkbox"/>	Notification of Public Housing Authority

Tab 4: Relocation

Section 4	<input type="checkbox"/>	Relocation
Form 4	<input type="checkbox"/>	Relocation Budget
Attachments		
	<input type="checkbox"/>	Tenant Relocation Plan
	<input type="checkbox"/>	Samples of the General Information Notice issued to all current occupants
	<input type="checkbox"/>	Drafts of Move-In Notices
	<input type="checkbox"/>	Drafts of Notices re: displacement and benefits
	<input type="checkbox"/>	Approval letter from local government agency with jurisdiction over tenant relocation issues
	<input type="checkbox"/>	List of existing residential and commercial tenants (include all occupants, with or without leases). Include the following information: <ul style="list-style-type: none"> For residential occupants, include type of occupancy (renter vs homeowner), household size, unit size, and household income and rent information that is current as of the date of application. Vacant units should also be listed with the move-out date of the last tenant. For commercial occupants, include name and type of business, length of occupancy, and current lease terms
	<input type="checkbox"/>	Attach a list of all occupants who moved from the site within the past 90 days. Include the name of the business or household, the household size, and explain the reason for their move.

Tab 5: Project Schedule

Form 5	<input type="checkbox"/>	Project Schedule
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Tab 6: Development Budgets

Section 6	<input type="checkbox"/>	Development Budget Narrative
Form 6A	<input type="checkbox"/>	Development Budgets
Form 6B	<input type="checkbox"/>	Development Budget Details
Form 6C	<input type="checkbox"/>	LIHTC Budget (Basis Calculation)
Form 6D	<input type="checkbox"/>	LIHTC Calculation
Form 6E	NA	Fee Schedule – NOT REQUIRED
Attachments		
	<input type="checkbox"/>	Documentation of QCT Status for 130% basis boost
	<input type="checkbox"/>	Appraisal or Property Tax Assessment (Related Party Transactions)

Tab 7: Project Financing

Section 7	<input type="checkbox"/>	Project Financing
Form 7A	<input type="checkbox"/>	Financing Sources
Form 7B	<input type="checkbox"/>	Estimate of Cash Flow During Development
Attachments		
	<input type="checkbox"/>	Funding Commitment Letters
	<input type="checkbox"/>	Letters for Committed Donations (including Sponsor Donations)
	<input type="checkbox"/>	Capital Campaign Plan, if funding includes a Capital Campaign
	<input type="checkbox"/>	Projects eligible for Historic Rehabilitation Tax Credits: <ul style="list-style-type: none"> • Itemized breakdown of the residential Qualified Rehabilitation Expenses, the commercial or other non-residential Qualified Rehabilitation Expenses, the total Qualified Rehabilitation Expenses • Explanation of any differences in the residential Qualified Rehabilitation Expenses and the Total Project Costs • Detailed calculation of the Historic Rehabilitation Tax Credit proceeds for the Residential portion of the Project

Tab 8: Project Operations

Section 8	<input type="checkbox"/>	Project Operations
Form 8A	<input type="checkbox"/>	Proposed Rents and AMIs Served
Form 8B	<input type="checkbox"/>	Operating, Service and Rent Subsidy Sources
Form 8C	<input type="checkbox"/>	Personnel (Service and Operating) and Non-Personnel Service Expenses
Form 8D	<input type="checkbox"/>	Rental Assistance Schedule
Form 8E	<input type="checkbox"/>	Operating Pro Forma
Form 8F	<input type="checkbox"/>	Operating Pro Forma Details
Attachments		
	<input type="checkbox"/>	Documentation of Utility Allowance calculations and schedule. If using a Utility Allowance based on an Energy Consumption Model, attach evidence of selected engineer as well as a copy of the energy consumption modeling plan
	<input type="checkbox"/>	Projects with Rental Assistance: documentation of rental assistance

Tab 9: Development Team

Section 9	<input type="checkbox"/>	Development Team
Form 9A	<input type="checkbox"/>	Project Team
Form 9B	<input type="checkbox"/>	Identity of Interest Matrix
Form 9C	<input type="checkbox"/>	Project Sponsor Experience
Form 9D	<input type="checkbox"/>	Project Development Consultant Experience
Form 9E	<input type="checkbox"/>	Project Property Management Firm Experience
Attachments		
	<input type="checkbox"/>	Development Consultant Agreement
	<input type="checkbox"/>	Signed board resolution authorizing application submittal (if applicable)
	<input type="checkbox"/>	Secretary of State Certification of Existence (RCW 24.03) of Applicant
	<input type="checkbox"/>	Certification Regarding Financial Solvency and Litigation Status
	<input type="checkbox"/>	Consent Granting Signature Authority
	<input type="checkbox"/>	Property management agreement or letter of intent
	<input type="checkbox"/>	IRS notification of Ownership Entity's federal identification number
	<input type="checkbox"/>	Secretary of State Certification of Existence for Ownership Entity
	<input type="checkbox"/>	Organizational chart identifying each entity or individual with an ownership interest in the Project, including percentage of ownership.

Tab 10: Services

Section 10	<input type="checkbox"/>	Services (if applicable) Only complete this section if the project is providing Housing for the Homeless.
Attachments		
	<input type="checkbox"/>	Document confirming consistency with local Plan to End Homelessness
	<input type="checkbox"/>	Memorandum of Understanding with service provider(s) or on-site services partnership letter.
	<input type="checkbox"/>	Examples of assessment tools used
	<input type="checkbox"/>	Services funding commitment letters

Tab 11: LIHTC Addendum

Addendum	<input type="checkbox"/>	Attach LIHTC Addendum Forms
Attachments		
	<input type="checkbox"/>	Units designated at 30% AMI and below: demonstration of feasibility
	<input type="checkbox"/>	Certification of Ability to Contribute Equity to the Project
	<input type="checkbox"/>	Local Funding Commitment Points: If using rental assistance to meet the threshold, provide the calculation used to determine the total value.
	<input type="checkbox"/>	At Risk of Loss or Market Conversion: documentation of eligibility under the applicable scenario
	<input type="checkbox"/>	Historic Property Points: documentation of eligibility
	<input type="checkbox"/>	Eligible Tribal Area Points: site map documenting eligibility
	<input type="checkbox"/>	Location Efficiency Points: list of services with addresses and a site map documenting required walking distance
	<input type="checkbox"/>	Area Targeted by a Local Jurisdiction: documentation of eligibility and site map
	<input type="checkbox"/>	Transit Oriented Development: site map documenting eligibility
	<input type="checkbox"/>	Job Center Points: site map documenting eligibility
	<input type="checkbox"/>	Nonprofit Sponsor Points: <ul style="list-style-type: none"> • Nonprofit Organization’s IRS determination letter • Articles of incorporation as filed with the Secretary of State • Bylaws and/or other governing instruments of the organization • Documentation of ownership and Material Participation • Certification of Non-Affiliation • Board Member list
	<input type="checkbox"/>	Urban Type Projects – Documentation of eligibility
	<input type="checkbox"/>	Acquisition Credit – Documentation of compliance with 10 year rule
	<input type="checkbox"/>	Municipal Participation – Evidence of eligibility
	<input type="checkbox"/>	Energy Consumption Model Utility Allowance: <ul style="list-style-type: none"> • Evidence of selected engineer • Plan for energy consumption model
	<input type="checkbox"/>	Pre-approvals or waivers granted by the Commission
	<input type="checkbox"/>	Application fee

Tab 12: LIHTC Rehab Addendum

Forms	<input type="checkbox"/>	Rehab Addendum Forms
Attachments		
	<input type="checkbox"/>	Documentation of Project Age
	<input type="checkbox"/>	Capital Needs Assessment
	<input type="checkbox"/>	Evidence of Existing Use Restrictions (if any)
	<input type="checkbox"/>	Appraisal (Related Party Transactions)
	<input type="checkbox"/>	Documentation of Project Reserve Balances

Self-Certification of Threshold Requirements

I, [NAME], [TITLE (Authorized Official)] of [SPONSOR ORGANIZATION], acknowledge that I have reviewed the application and checklist and that all the required documentation necessary to review this application has been included.

ORIGINAL SIGNATURE OF AUTHORIZED OFFICIAL

Signature: _____	Title: _____
Name: _____	Date: _____
Organization: _____	Project: _____