

HDF APPLICATION

Revised 2023

This application is for funding for affordable housing development. Prior to completing the application, please contact the OHCD Director at (610) 891-4014 to notify the County of intent to apply.

	1. APPLICANT INF	ORMATION	
Applicant			Date
Address, City, Zip			
Executive Director		Email / Phone	
Contact Person / Title		Email / Phone	
Telephone		Fax	
Federal ID #		DUNS #	
Type of Organization	Non-ProfitFor-ProfitG	overnment Agen	av Darthorshin
	Other (Specify)Other (Specify)Other (Specify)	-	yPartnersnip
Certification	I, (Name/Title) of the applicant organization, am authorized to sign for the applicant and certify that the information contained in this application is correct and accurate.		
	Signature	Date	
Required Attachment	Board Resolution authorizing the app	plication and fund	ling request.

	2.	FUNDING RE	QUEST	
Amount Requested	\$		Terms	
TOTAL Project Cost	\$		Number of Units	# TOTAL Units # HOME Units
Brief Project Description				

3. PROJECT IDENTIFICATION			
Project Name		Project Municipality	
Project Address City, Zip			
Required Attachments	 a) Project location map b) Description of specific street or na c) Photographs If multiple sites, provide information for ed 		dering site

4. TARGET POPULATION

Income Levels	For each income level, indicate:	<u># Households</u>	Percent (%) Total Units
	At or below 60% Area Median Income		
	At or below 50% Area Median Income		
	At or below 40% Area Median Income		
	At or below 30% Area Median Income		
	At or below 20% Area Median Income		
	At least 20% of HOME-assisted units must be rented All other units must be rented to households at or b		or below 50% AMI.
Family Type	Indicate the number of units designated for:		
	SeniorsFamilies with Children	I	
	DisabledOther (Describe)

	5. BUDGET & COST
Budget & Cost Tables	Indicate Budget Uses, Funding Sources, Annual Operating Expenses, Projected Income and Development Costs on the attached Budget & Cost tables . Completed tables must be attached with signed application and supporting documentation.
Required Attachments	 A digital template (.xls) of the Budget & Cost tables is available upon request. a) HDF Budget Uses b) Project Funding Sources Attach documentation verifying commitment of other funds Attach application status documentation for pending funds c) Annual Operating Expenses – RENTAL d) Annual Operating Expenses – HOMEOWNER e) Projected Income – RENTAL
	Attach Cash Flow Analysis f) Projected Income – HOMEOWNER g) Development Costs

6. PROJECT DESCRIPTION			
Number & Type of Structures	Indicate # of Buildings: Rowhouses/Townhouses Midrise/Highrise (# Floors) Single Family Detached Single Family Semi-Detached (Twin) Two Family (Duplex) Accessory Buildings (Garage, etc.)	Project Type	Check all that apply: New Construction Rehabilitation Acquisition Preservation
TOTAL # Buildings		Age of Existing Buildings	
Units	Indicate # units: Ho Unit Type # Units 0 BR (Efficiency) 1 Bedroom 2 Bedroom 3+ Bedroom SRO	meownerRent <u>Anticipated Sa</u> \$ \$ \$ \$ \$	es / Rental Price
Affordability Period	For how many years will the units be affor	dable?Yea	ırs

	7. SCHEDULE	
Key Dates	Indicate anticipated work completion dates j Closing, 2) Construction Start and 3) Substan	for key activities. Must include dates for: 1) Initial tial Completion. Attach if necessary.
	<u>Activity</u>	Anticipated Completion Date (Month/Year)

	8. PROJECT REA	DINESS		
Zoning	Current site zoning:	Zoning Variance Needed	Yes	No
Project Readiness Checklist	Indicate if the following have been obtained/conducted:	<u>YES</u>	<u>NO</u>	<u>N/A</u>
	 Ownership of Property Site Control Market Study Appraisal Cost Estimates Building Permits Utility Service Confirmation Environmental Audit Architectural Plans/Specs Survey Land Development Plans Construction Contract Title Insurance Payment/Performance Bond Builder's Risk Insurance 			
	 16. Worker's Comp/Liability Insurance 17. General Liability Insurance 18. Management Plan 19. Marketing Plan 	ce		
Bonded	<i>Is the construction company bonded?</i> YesNo	Current Occupancy	Are units currenYes	tly occupied? NoN/A
Required Attachments	 a) Evidence that the site is properly a b) If relevant, evidence that a variant been scheduled. c) If existing units occupied, provide assistance. d) Supporting documentation for about standing mortgages, prelimina estimates, permits, utility confirm insurance binders, etc. 	ce request has been a relocation plan f ove responses (i.e ry plans and speci	en filed and a hea that includes ava . deed, sales agre fications, scope c	ilable relocation eement, option, of work, cost

Complete Sections 9-14 as a narrative <u>attachment</u>.

Address all requested information and attach supporting documentation as required.

9. PROJECT NEED		
Housing Market	 Provide a detailed assessment of the current housing market in the project area that includes: The demand for proposed housing development in relation to existing housing and economic conditions in the geographic area. Explain how the proposed number and type of units will address the need. Information regarding surrounding area rents and/or home values, Area Median Income, and housing and construction market trends. 	
Required Attachment	Relevant supporting housing data, appraisal and market study.	

10. SITE SELECTION / PROJECT DESIGN		
Area Analysis	Describe the proposed project area and evaluate advantages and disadvantages of the area. Include:	
	1. Types and condition of existing housing in the market area.	
	2. Availability of public transportation to the project site.	
	3. Location and quality of schools.	
	4. Access to shopping and employment centers.	
	5. Information on crime and other information relevant to the site.	
Project Design	Describe any special architectural design features and site planning elements or considerations, particularly regarding open space and historical character.	

	11. MARKET / INCOME TARGETING		
Tenant Marketing	 Describe how the project will be marketed to the eligible populations. Include details on: Populations accommodated/served. Marketing to eligible participants, particularly to those least likely to apply including households with Limited English Proficiency (LEP) and households without access to the internet. Affordability of housing in terms of monthly rent or mortgage costs. 		

	12. SELF-SUFFICIENCY	
Training & Services	Describe training and/or services that will be provided to foster resident self-sufficiency, including:	
	 Type of service(s) and how will it be accessed (i.e. referral, case management, etc.) Name of the organization providing service(s). How often and/or for how long will services be offered. Number of individuals expected to benefit from service(s). 	
	5. Funding available to support provision of service(s)?	
Required Attachment	Relevant service or funding commitment letters from the providers.	

13. COMMUNITY INVOLVEMENT							
Community Involvement	 How has the HDF applicant has served the community in which the project will be located? Include the number of years active in the community and describe in what capacity. Describe support or letters of commitment for the proposed project from local elected officials, community groups, potential project residents and community residents 						
Required Attachment	Letters or evidence of local support for the project.						

	14. APPLICANT CAPACITY
Capacity /Experience	 Describe the objective/mission, management structure, and staffing of the applicant organization. Explain the organization's previous experience as a developer and ability to implement and manage affordable housing including projects completed of a similar nature to proposed project. Describe the role of the third-party involved in the management or service provision.
Required Attachments	 a) Most recent certified financial statement/audit b) Articles of Incorporation and By-Laws c) Board of Directors d) Annual Report e) Partnership agreements f) Names, addresses, and contact information for members of the development team including architect, engineer, processing agent, property manager, attorney, etc.

15. ENVIRONMENTAL REVIEW

This section will assist in determining the extent of environmental review that will be needed for the proposed project, allowing the County to identify major environmental issues and assist the applicant in complying with all requirements so that funding delays may be avoided.

Refer to the attached Environmental No Effect Activities and Historic Preservation State Programmatic Agreement.

			<u>YES</u>	<u>NO</u>	<u>N/A</u>	
1.	Will the project s	support an increased number of residents?				
2.		involve a change in land use? m Industrial to Residential.				
3.	Does the project	involve ground disturbing activities?				
4.	for or listed on t	involve the reuse/rehab of an historic building eligible ne National Register of Historic Places, or designated a dmark by municipal ordinance historic structure?				
	declaration of hi	ach relevant documentation including by not limited to storical significance by local ordinance, state designation, on of eligibility letter.				
5.		e located in, or will the proposed activities affect, a plain/wetland area?				
	maintained for a	tach a statement assuring that flood insurance will be ny structure located in the floodplain. Activities that occur sociated with a 100-year floodplain are ineligible.				
If YES to	any of the above	please explain:				
Require	d Attachments	a) Attach map and/or plans detailing the exact loginal including proposed land use change, construct disturbances.				
	b) Documentation related to historical significance (if relevant).c) Statement regarding flood insurance (if relevant).					

16. OTHER FEDERAL REQUIREMENTS

Delaware County Housing Development Funds may include HOME Program entitlement funds which are subject to federal cross-cutting requirements including but not limited to those related to Davis Bacon and Section 3.

Projects receiving more than \$200,000 in HOME funding will be required to cooperate during construction with weekly Davis Bacon reporting requirements, Section 3 goals including opportunities for low-income workers and certified MBE/WBE employees and contractors and any other relevant federal requirements.

	17. CHECKLIST
Required Attachments	Section 1 – Applicant Information
	Board Resolution authorizing the application and funding request.
	Section 3 – Project Identification
	 a) Project location map(s) b) Description(s) of specific street or natural boundaries bordering site c) Photographs
	If multiple sites, provide information for each site location.
	Section 5 – Budget & Cost Tables
	a) HDF Budget Uses
	b) Project Funding Sources
	Attach documentation verifying commitment of other funds
	Attach application status documentation for pending funds
	c) Annual Operating Expenses – RENTAL
	d) Annual Operating Expenses – HOMEOWNER
	e) Projected Income – RENTAL
	Attach Cash Flow Analysis
	f) Projected Income – HOMEOWNER
	g) Development Costs
	Section 6 – Project Funding
	a) Documentation verifying commitment of other funds, including the terms, any conditions governing the funds, and lender/grantor contract.
	b) For funds pending a commitment, please indicate the status of the application and provide a lender/grantor contact.
	Section 8 – Project Readiness
	a) Evidence that the site is properly zoned for the proposed use.
	b) If relevant, evidence that a variance request has been filed and a hearing date has been scheduled.
	c) If existing units occupied, provide a relocation plan that includes available relocation assistance.
	d) Supporting documentation for above responses (i.e. deed, sales agreement, option, outstanding mortgages, preliminary plans and specifications, scope of work, cost estimates, permits, utility confirmation letters, environmental studies, studies, insurance binders, etc.
	<u>Section 9 – Project Need</u> Relevant housing data, appraisal, market study, housing authority waiting list, etc.

	Relevant service or funding commitment letters from the providers.
<u>Sec</u>	<u>ction 13 – Community Involvement</u>
	Relevant letters or evidence of local support for the project.
<u>Sec</u>	<u>ction 14 – Applicant Capacity</u>
	a) Most recent certified financial statements
	b) Articles of Incorporation and By-Laws
	c) Board of Directors
	d) Annual Report
	e) Partnership agreements.
tea	f) Names, addresses, and contact information for the key members of the development m (i.e. architect, engineer, processing agent, property manager, attorney, etc.)
<u>Sec</u>	tion 15 – Environmental Review
 pro	a) Attach a map and/or plans detailing the exact location of all project activities includ oposed land use change, construction starts and stops, ground disturbances, etc.
	b) Documentation related to historical significance (if relevant).
	c) Statement regarding flood insurance (if relevant).

Section 5: Budget & Cost Tables

Indicate Budget Uses, Funding Sources, Annual Operating Expenses, Projected Income and Development Costs on Tables 5a-f below. Completed tables must be submitted with the signed HDF application and supporting documentation.

Project:

5a. HDF Budget Uses							
For the total amount of HDI	⁻ funds requested, indicate the	buc	dget uses:				
	Acquisition	\$					
	Pre-development	\$					
	New construction	\$					
	Rehabilitation	\$					
	Lead Paint Remediation	\$					
	Financing fees	\$					
	Developer's fee	\$					
	Services	\$					
	Other:	\$					
	TOTAL FUNDS REQUESTED:	\$					

5b. Funding Sources

	SOURCE		COMMITTED*	APPLI	ED/PENDING*
Federal Funds		\$		\$	
State Funds		\$		\$	
Local Government Funds		\$		\$	
Private Grants		\$		\$	
Private Loans		\$		\$	
Applicant's Funds		\$		\$	
Other		\$		\$	
TOTAL		\$	-	\$	-
	HOUSING DEVELOPM	IENT FU	NDS REQUESTED	\$	
		TOTA	L OTHER FUNDS	\$	
		ΤΟΤΑ	L PROJECT COST	\$	-
*Required Attachments -	a) Documentation ver terms, any conditions gove b) For funds pending a application and provide a le	rning the	e funds, and lender/ tment, please indica	grantor co	ntract.

Project:

5c. Annual Operating Expenses - RENTAL						
		YEAR 1	YEAR 2	YEAR 3		
<u>ADMINISTRATIVE</u>				-		
Advertising / Marketing	\$	\$	\$			
Management Fee:	_					
% of Gross Annual	Income \$	\$	\$			
Office Supplies / Expenses	\$	\$	\$			
Legal	\$	\$	\$			
Audit	\$	\$	\$			
Permits, Licenses, Misc. Taxes	\$	\$	\$			
Insurance	\$	\$	\$			
Payroll (incl. FICA, medical, etc.)	\$	\$	\$			
Other:	\$	\$	\$			
SUBTO	TAL \$_	- \$	- \$	-		
		YEAR 1	YEAR 2	YEAR 3		
MAINTENANCE	A	A	<u>Å</u>			
Exterminating	\$	\$	\$			
Elevator Maintenance	\$_	\$	\$			
HVAC Maintenance	\$_	\$	\$			
Trash Removal	\$_	\$	\$			
Painting / Decorating	\$_	\$	\$			
Electrical Repairs / Supplies	\$_	\$	\$			
Plumbing Repairs / Supplies	\$_	\$	\$			
Roof Maintenance / Repairs	\$	\$	\$			
Grounds Maintenance / Supplies	\$_	\$	\$			
Miscellaneous Maintenance / Supplies	\$	\$	\$			
Other:	\$_	\$	\$			
SUBTO	TAL \$_	- \$	- \$	-		

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	. Annual Operating Expen	363 1		macay	
			YEAR 1	YEAR 2	YEAR 3
UTILITIES PAID BY OW	/NER				
Oil		\$	\$	\$	
Electric		\$_	\$	\$	
() elevators	() heat () hot water				
() public space	() cooking				
() air conditioning	() household electric				
Sewer		\$	\$	\$	
Water		\$	\$	\$	
Gas		\$	\$	\$	
() heat	() hot water				
() household					
Other:		\$	\$	\$	
	SUBTOTAL	\$	- \$	- \$	
ADM	INISTRATIVE SUBTOTAL	\$	- \$	- \$	
M	AINTENANCE SUBTOTAL	\$	- \$	- \$	
	UTILITIES SUBTOTAL	\$	- \$	- \$	
		ć	ć	÷	
	REAL ESTATE TAXES	\$_	\$_	\$	
		\$_	\$	\$	
		\$_	\$	\$	
	OPERATING RESERVE	\$_	\$	\$	
	OTHER:	\$_	\$	\$	
TOTAL ANNUA	AL OPERATING EXPENSE	\$	- \$	- \$	-

5c. Annual Operating Expenses - RENTAL (Continued)

Project:

5d. Annual Operating Expen	ses - HOMEOWN	ERSHIP
Enter annual costs anticipated for the homeowner:		
REAL ESTATE TAXES		\$
UTILITIES		\$
() Oil		\$
() Gas		\$
() Electric		\$
() Water		\$
() Sewer		\$
() Other		\$
INSURANCE		\$
HOMEOWNERS ASSOCIATION FEE		\$
OTHER HOMEOWNER COSTS:		
		\$
		\$
		\$
		\$
		\$
		\$
	TOTAL	\$-

Project Name: _____

	5e. Proj	ected Income - I	RENTAL			
1-BR 2-BR 3-BR	# of Units units x units x units x units x units x NCOME	Monthly Rent \$\$ \$\$ \$\$	x 12 = \$ x 12 = \$	Annual Rent - - - - - ç		
Indicate vacar	ncy as percent (%) o	of gross income:	%			
OTHER ANTICIPATED RENTAL REVENUE						
		TOTAL RENTAL R	REVENUE	ç	-	
Required Attachment	a) Cash flow and	alysis including as	sumptions			

5f. Projected Revenue - HOME SALES

Unit Type	# Units		ι	Init Sales Price	Total Revenue
 TOTA	L HOME SALE F	x x x x REVENU	\$ \$ \$ E	\$ \$ \$ \$	-

Project:

5g. Development Costs				
ACQUISITION COSTS				
Building acquisition	\$	per unit	\$	
Land	\$	per unit	\$	
Off-site improvements			\$	
Carrying charges			\$	
Relocation costs			\$	
Legal (for acquisition)			\$	
Title and recording (for acquisition)			\$	
Other:		_	\$	
	SUBTOTAL		\$	
PRE-DEVELOPMENT FEES				
Architect's fee-design			\$	
Architect's fee-supervision			\$	
Legal			\$	
Loan packaging/processing			\$	
Marketing			\$	
Engineering			\$	
Environmental			\$	
Market study			\$	
Appraisal			\$	
Other:			\$	
	SUBTOTAL		\$	
CONSTRUCTION/REHABILITATION COSTS				
Residential buildings			\$	
Non-residential buildings			\$	
	SUBTOTAL		\$ -	
			·	
General requirements		% of subtotal	\$	
Builder's general overhead		% of subtotal	\$	
Builder's profit		% of subtotal	\$	
Bond premium () or Letter of credit co			\$	
	SUBTOTAL		\$ -	

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5g. Development Costs (Continued)				
FINANCING FEES & CHARGES				
Construction interest (% formonths on				
\$estimated initial draw)	\$			
Real estate taxes (during construction)	\$			
Insurance premium (during construction)	\$			
Mortgage insurance premium (during construction)	\$			
Title recording (non-acquisition)	\$			
Financial contingency	\$			
Lender's legal fee	\$			
Closing fees	\$			
Developer's fee	\$			
Other:	\$			
SUBTOTAL	\$			
ACQUISITION SUBTOTAL	\$			
PRE-DEVELOPMENT FEES SUBTOTAL	\$			
CONSTRUCTIONS/REHAB SUBTOTAL	\$			
FINANCING FEES/CHARGES SUBTOTAL	\$			
TOTAL DEVELOPMENT COST	\$			
DEVELOPMENT COST PER UNIT # Units:	\$ <u>#DIV/0</u> !			