



**PRINCE GEORGE'S COUNTY
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
HOUSING DEVELOPMENT DIVISION**



Prince George's County
Department of Housing
& COMMUNITY DEVELOPMENT

RUSHERN L. BAKER, III
County Executive

ERIC C. BROWN
Director

HOME Investment Partnerships Program Project Development Funds APPLICATION

Applicant Name: _____

Project Name: _____

Project Type (check all that applies):

- Rental Housing
- Group Home
- Homeownership
- Acquisition
- Rehabilitation
- New Construction

Contact Information:

Pamela A. Wilson
Housing Development
Program Manager
Office: (301) 883-5570

Edna Krzyzaniak
Manager, HOME Program

Office: (301) 883-5577

**Housing Development Division (HDD)
9200 Basil Court, Suite 306
Largo, Maryland 20774**



Application: HOME Program Loan
Project Development Funds
2014

I. APPLICANT INFORMATION:

Applicant Name: _____ Tax I.D.: _____

Mailing Address: _____ DUNS No: _____

Contact Person: _____ Title: _____

Office Phone: _____ Cell: _____ Fax: _____

Email Address: _____

II. OWNERSHIP ENTITY INFORMATION:

Tax I.D.: _____

Owner/Borrower Name: _____ DUNS No: _____

Type of Ownership: Individual Limited Liability Company For Profit Non Profit
 Corporation Limited Partnership CHDO Other: _____

Additional Principals (if any) and Percentage of Ownership:

Name	Tax I.D	Ownership	Non Profit	For Profit	CHDO
_____	_____	____%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	____%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. PROJECT INFORMATION

Project Name: _____ # Units: ____ Year Built: ____

Street Address: _____

If no street address: Lot(s): _____ Parcel(s): _____ Tax Map: _____

Name of Current Property Owner: _____

Councilmanic District: _____ Census Tract: _____ Tax Account No: _____

Type of Project: New Construction Acquisition Rehabilitation Acquisition/Rehab

Construction Type: Multifamily Garden Apartment. Elevator Group Home

Single Family Detached Townhouse Condominium Other _____

Residential Residential/Commercial Other: _____

Population Served: Elderly Families Singles Other: _____

Application: HOME Program Loan
 Project Development Funds
 2014

SPECIAL NEEDS: Mobility Accessible Units # Existing: _____ # Proposed: _____
 Sensory Accessible Units # Existing: _____ # Proposed: _____

Other (describe): _____

Leasing Preference to Families on Section 8 Waiting List: Yes No

IV. PROJECT NARRATIVE

The following elements should be fully described in Attachment C:

- Provide a description of the project, including its purpose and neighborhood context (current conditions, demographics, and anticipated impact), population to be served, challenges and opportunities;
- Proposed use of HOME funds;
- How the project addresses the preservation of affordable housing;
- How the project addresses needs identified in the County's Consolidated Plan for Housing and Community Development (<http://www.princegeorgescountymd.gov/Government/AgencyIndex/HCD/index.asp>); and
- How the project addresses other housing and economic development objectives of Prince George's County (i.e., Transit Oriented Development and/or Transforming Neighborhood Initiatives).

V. OCCUPANCY TARGETING

Number & Percentage of Units that will serve Low and Moderate Income Households: _____ # _____ %

30% of median and below	_____ #	_____ %
31-50% of median	_____ #	_____ %
51-60% of median	_____ #	_____ %
61-80% of median	_____ #	_____ %
Market Rate units	_____ #	_____ %
On-site staff units	_____ #	_____ %
TOTAL UNITS:	_____ #	_____ %

Unit Description (also identify market rate, or on-site staff units, if applicable):

Unit Type (# Bdrm/Bath)	No. of Units	Rentable Sq. Ft.	Median Income	Current Rent	Proposed Rent	Units to be HOME Assisted
_____	_____	_____	_____ %	\$ _____	\$ _____	_____
_____	_____	_____	_____ %	\$ _____	\$ _____	_____
_____	_____	_____	_____ %	\$ _____	\$ _____	_____
_____	_____	_____	_____ %	\$ _____	\$ _____	_____
_____	_____	_____	_____ %	\$ _____	\$ _____	_____
TOTALS:	_____	_____		TOTAL HOME Assisted	Units:	_____

Check all utilities to be paid by the tenant: () Household Electric () Air Conditioning
 () Cooking/Type _____ () Heat/Type _____ () Hot Water/Type _____ () Other: _____

Application: HOME Program Loan
 Project Development Funds
 2014

Check all utilities to be paid by the owner: () Household Electric () Air Conditioning
 () Cooking/Type_____ () Heat/Type_____ () Hot Water/Type_____ () Other: _____

VI. BUILDING INFORMATION:

Gross Square Footage:

Residential Units: Low Income: _____ sq. ft.
 Residential Units: Market: _____ sq. ft.
 Non-residential & staff units: _____ sq. ft.
 Common Space/Amenities: _____ sq. ft.
 (Hallways, stairways, recreation, etc)
 Commercial Space: _____ sq. ft.
 Other: _____ sq. ft.
TOTAL Gross Sq. Ft. _____

Amenities if Located in Separate Buildings:

Laundry Facilities: _____ sq. ft.
 Community Rooms: _____ sq. ft.
 Other: _____ sq. ft.
 Other: _____ sq. ft.
TOTAL Separate Amenities Sq. Ft. _____

Existing Building Information:

Year Built: _____

Are units currently occupied Yes No If yes how many occupied: # _____ Percent: _____%

Does Project require: Permanent Relocation of tenants? Yes No
 Temporary Relocation of tenants? Yes No

If the answer is "No" and the Project includes rehabilitation of occupied units, please explain why:

Has a Physical Needs Assessment report been completed? Yes No

Number of Residential Buildings: Type	<u>Existing</u>			<u>Proposed</u>		
	# Bldgs.	# Floors	#Units	# Bldgs.	#Floors	#Units
Garden (Walk-Up)	_____	_____	_____	_____	_____	_____
Units Stacked-No Elevator	_____	_____	_____	_____	_____	_____
Buildings with Elevator	_____	_____	_____	_____	_____	_____
Condominium	_____	_____	_____	_____	_____	_____
Townhouse	_____	_____	_____	_____	_____	_____
Single-Family Detached	_____	_____	_____	_____	_____	_____
Single-Family Semi-Detached	_____	_____	_____	_____	_____	_____

Describe any space used for Commercial use within the Project:

Commercial: _____ sq. ft. Specify Uses: _____

(Note: HOME funds cannot be used for commercial space)

Total Land Area _____ Total parking Spaces: _____

Application: HOME Program Loan
 Project Development Funds
 2014

Are there Existing Mortgages on the Project? Yes No. If yes list below:

Mortgagee	Original Amount	Original Date	Current Balance	Indicate if to be Paid-off Refinanced or Assumed
1. _____	_____	_____	\$ _____	_____
2. _____	_____	_____	\$ _____	_____
3. _____	_____	_____	\$ _____	_____

VII. FUNDING

Total Development Cost (TDC)	\$ _____			HOME Funding Requested:	
Less other funding-list	-\$ _____			() Pre-Development	\$ _____
(Indicate Debt Financing(DF) or Cash Flow (CF))		DF	CF	() Gap Financing	\$ _____
_____	-\$ _____	___	___	() New Construction	\$ _____
_____	-\$ _____	___	___	() Acquisition	\$ _____
_____	-\$ _____	___	___	() Rehabilitation	\$ _____
_____	-\$ _____	___	___	() Development Costs	\$ _____
_____	-\$ _____	___	___	() Closing Costs	\$ _____
_____	-\$ _____	___	___	() Other	\$ _____
HOME Funds Requested:	\$ _____			TOTAL	\$ _____

Summary of Proposed Sources and Uses of Funds:

EXAMPLE ONLY

SOURCES:		Amount	USES:		Amount
Name 1 st Mortgage Lender			Construction Costs		
Name 2 nd Mortgage Lender			A&E & Constr. Fees		
LIHTC			Acquisition		
Developer Equity			Developer Fee		
Seller Note			Financing Fees		
Other Funds			Guarantees & Reserves		
HOME Loan			Syndication Costs		
TOTAL SOURCES:		\$ _____	TOTAL USES:		\$ _____

Has an application been submitted for other proposed financing? Yes No

Source	Amount	Rate	Term	Special Conditions	Status
_____	\$ _____	___	___yrs	_____	_____
_____	\$ _____	___	___yrs	_____	_____
_____	\$ _____	___	___yrs	_____	_____

VIII. HOMEBUYER – SALE OF HOME ASSISTED UNITS

The following elements should be fully described in Attachment I:

- Detailed description of the units and amenities and listing by type and proposed sales prices
- Primary Lender Name, Address, Contact Person, Phone and Email
- Amount and terms of lender financing
- Breakdown of purchasers estimated monthly payment (PITI, MIP, HOA fees, etc)
- Minimum and Maximum Qualifying Incomes
- Estimated Down Payment Required
- Estimated Settlement Costs
- Minimum Purchaser Cash
- Describe how the HOME funds will benefit the purchaser

IX. OTHER

- A. Are there any lawsuits pending against the Applicant, sponsor or ownership entity? Yes No
- If "Yes" please include a detailed description of the lawsuit as **Attachment "X"**.
- B. Has Applicant, sponsor or ownership entity ever been subject to a federal or state audit? Yes No
- If "Yes" please include a detailed description as **Attachment "Y"**.
- C. Has the Applicant, sponsor or ownership entity, or any other entity in which they had an ownership interest, ever been debarred or suspended by any Federal, State or local government or other such entity? Yes No
- If "Yes" please include a detailed description as **Attachment "Z"**.
- D. Has this project previously been assisted with HOME Funds? Yes No
- If "Yes" is the project's "affordability period" still in effect? Yes No
 - If "Yes" was the project activity completed on schedule? Yes No
- If the project activity was not completed on schedule, please explain.
- If "Yes" was the project completed within budget? Yes No
- If the project was not completed within budget, please explain.

Application: HOME Program Loan
Project Development Funds
2014

E. Has Applicant, sponsor or ownership entity ever been awarded any of the following Federal funds for any project in the past?

- HOME Investment Partnerships (HOME) Yes No
- Community Development Block Grant (CDBG) Yes No
- Neighborhood Stabilization Partnership (NSP) Yes No
- Community Development Block Grant Recovery (CDBG-R) Yes No
- Homelessness Prevention and Rapid Re-housing Program (HPRP) Yes No

If answered "Yes" to any of the items listed above, please describe the project(s) that were funded by program year and include as **Attachment "AA"**.

F. If Applicant, sponsor or ownership entity were ever awarded HOME funds, please answer the following questions:

- Have you or any entity in which you have an ownership interest defaulted on any Loan? Yes No
- Have you or any entity in which you have an ownership interest ever requested a waiver, for any reason, under the HOME Program? Yes No
- If a waiver was requested, was the waiver granted? Yes No

If you answered "Yes" to any of the items listed above, please provide a detailed description for each "Yes" box marked and include as **Attachment "BB"**.

(THE BALANCE OF THIS PAGE WAS INTENTIONALLY LEFT BLANK)

Application: HOME Program Loan
Project Development Funds
2014

X. CERTIFICATION AND AGREEMENT

The undersigned applicant hereby makes application to the Prince George's County, Department of Housing and Community Development for a loan in the amount of \$ _____ for a term of ____ years pursuant to the regulations of the HOME program. . The undersigned acknowledges that if the HOME loan is approved it will be secured by a lien on the property herein described and evidenced by a promissory note. Applicant acknowledges that the HOME loan will be subject to certain restrictive covenants

Applicant certifies that the purpose of the HOME loan is to () acquire, () construct, () rehabilitate housing for occupancy by lower income households for _____% of the dwelling units in the development. The undersigned certifies that housing produced with the proceeds of the HOME loan will be () rented or () sold to income eligible households within the income limits set by the county for the specific program for a specified period.

Equal Opportunity: The applicant agrees they will not discriminate against any person on the basis of race, color, religion, national origin, sex, marital status, physical or mental handicap or age in any aspect of the program and will comply with all applicable federal, State and local laws regarding discrimination and equal opportunity in employment, housing and credit practices including Titles VI and VII of the Civil Rights Act of 1964 and regulation pursuant thereto, of Fair Practices, as amended, and will comply with the County's Minority Business requirements, as applicable.

Tenant Relocation: Applicant certifies that no tenant living in any residential unit in the property to be rehabilitated with the proceeds of a HOME loan has been forced to move by the applicant without cause in the twelve month period preceding the submission of this application, and that no tenants will be forced to move without cause prior to loan closing except to rehabilitate the project in compliance with an approved relocation plan. Applicant further agrees to comply with the relocation requirements of the County if any residential tenant is required to be temporarily or permanently displaced as a result of the rehabilitation undertaken pursuant to this loan application.

The undersigned hereby certifies that the development proposed in this application can be developed in accordance with the development budget set forth herein and operated in accordance with the operating budget set forth herein and further certifies that the information set forth herein and in any attachment in support hereof is true, correct and complete to the best of his/her knowledge and belief, and that he/she is duly authorized to sign this application. Further, he/she by their signature acknowledges that any materially false, fraudulent or misleading statement in this application or the concealment of any material fact related to this application may subject him/her to criminal penalties under federal or state law.

The undersigned, on behalf of the applicant, certifies that neither the applicant nor any of its affiliates are delinquent on any obligation or indebtedness for which an agency of federal, state, local government or municipality is the creditor, including any obligation or indebtedness related to taxes, direct loans or guaranteed loans.

The undersigned authorizes the County to obtain credit information for the purpose of evaluating this application.

IN WITNESS WHEREOF, the applicant has caused this document to be duly executed in its name on the ____ day of _____, 20____.

Company or Organization: _____
(Full legal name of Applicant)

Signature: _____ Date: _____

Printed Name: _____

Application: HOME Program Loan
 Project Development Funds
 2014

XI. APPLICATION CHECKLIST

All applicants are required to submit the attachments listed below, as applicable to the proposed project (check if applicable).

- Attachment: A HOME Application Form
- Attachment: B CDA Form 202 – Multifamily Rental Financing Application (form provided on MD DHCD website)
- Attachment: C Project Narrative
- Attachment: D Evidence of other funding (application(s) to lenders, conditional commitment(s), etc.)
- Attachment: E Project Sources and Uses of Funds
- Attachment: F 15-Year (minimum) Operating Pro forma (Rental Projects)
- Attachment: G Cash Flow Analysis (Homebuyer Projects)
- Attachment: H Spreadsheet of Unit Types and Rent Schedules (Rental Projects)
- Attachment: I Spreadsheet of Unit Types, Sale Prices, Closing Costs, etc (Homeowner Projects)
- Attachment: J Description of Applicant/Owner/Borrower (with organizational documents and evidence of Good Standing with SDAT, Audited Financial Statements for the last three (3) years, copy of most recent Dunn & Bradstreet profile and, if applicable, current CHDO certification)
- Attachment: K Development Team Members - Contact Information
- Attachment: L Evidence of Partnerships with other Non-profits or Community Housing Development Organizations
- Attachment: M Background and Experience of Development Team-Summary of Projects last 10 years (Identify minority/women business partners)
- Attachment: N Market Feasibility Study
- Attachment: O Evidence of Site Control: () Deed () Purchase Option () Contract of Sale () Other____
- Attachment: P Evidence of Zoning/land use approval (if pending, submit evidence of application & status)
- Attachment: Q Preliminary Plans/Site Plan/Scope of Work (and Physical Needs Assessment if rehabilitation)
- Attachment: R Anticipated Development Schedule
- Attachment: S Letters of Support from Community Stakeholders
- Attachment: T Management Plan and Marketing Plan for Affordable Housing Component
- Attachment: U Identification of Supportive Services or Plan
- Attachment: V Relocation Plan
- Attachment: W Certification and Agreement (attachment provided in Section X of this Application)

ADDITIONAL ATTACHMENTS REQUIRED BY SECTION IX OF THE APPLICATION (check if applicable)

- Attachment: X Lawsuits pending
- Attachment: Y Federal or State Audit
- Attachment: Z Debarment or Suspension
- Attachment: AA Awards of Federal Funds
- Attachment: BB Previous HOME funds - loan default or waivers

NOTE: Additional documentation that must be submitted prior to any commitment and/or loan approval will include, but not be limited to: , Final Architectural Plans/Site Plan/Scope of Work, Environmental Assessment, Evidence of Firm Financing Commitments, Building Permit, Appraisal, Affirmative Marketing Plan, Updated Certificates of Good Standing, Certificates of Hazard, Liability and Workman’s Comp. Insurance; Commitment for Title Insurance on any HOME loan; Operating Agreements and/or Management Agreements, Loan Documents for superior lien holders, Evidence of Adequate Utilities, etc. *(All financial statements and Dunn & Bradstreet profiles will be handled confidentially.)*