



**CITY OF CLEARWATER, FLORIDA
HOME INVESTMENT PARTNERSHIP PROGRAM
2009 APPLICATION FOR DEVELOPMENT OF RENTAL HOUSING PROJECTS
FUNDED THROUGH THE
STATE OF FLORIDA'S LOW INCOME HOUSING TAX CREDIT PROGRAM**

SECTION I. APPLICANT and CO-SPONSOR

Applicant and Co-Sponsor Information

1.1 Applicant

Applicant Name _____

Applicant Address _____

City _____ State _____ Zip _____

Contact Name _____ Title _____

Phone _____ Fax _____

Email _____ FEIN _____

TIN _____

1.2 Co-Sponsor

Co-Sponsor Name _____ Not Applicable

Co-Sponsor Address _____

City _____ State _____ Zip _____

Contact Name _____ Title _____

Phone _____ Fax _____

Email _____ FEIN _____

If awarded funds pursuant to this application, will the applicant or co-sponsor be the recipient of funds? Yes No

If "No", please indicate type of entity-to-be-formed and anticipated name: _____

1.3 Please check appropriate Applicant type:

- Individual For-Profit Entity Non-Profit Entity
- Partnership * Limited Liability Company
- Housing Authority Community Development Corporation *
- Other _____

*Date Corp or Partnership was established: _____

1.4 Please check appropriate Co-Sponsor type

- Individual For-Profit Entity Non-Profit Entity
- Partnership * Limited Liability Company
- Housing Authority Community Development Corporation *
- Other _____

*Date Corp or Partnership was established: _____

If joint venture, explain the role of the non-profit:



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1.5 Organizational Documents

If the applicant or co-sponsor is a legally existing organization, submit a copy of any incorporation documents and bylaws, including (if applicable) documentation of non-profit status and certificate of legal existence for the current year.

1.6 Management Changes

Yes No

Has there been any management or ownership changes in the Applicant and/or Co-Sponsor entity in the last twelve-month period? (if "Yes" describe below) Yes No

1.7 Financial Statements

Attach the last three years audited financial statements or personal financial statements (include notes and projections) for both the applicant, co-sponsors, and principals. If the Applicant and Co-Sponsor is newly formed with no historical financial statements, then please provide financial statements for the parent organization.

1.8 Applicant and Co-Sponsor's Capacity and Experience

1.8.a. Please provide a written description of the Applicant's and Co-Sponsor's record of performance, qualifications and capacity to perform its responsibilities for this development.

1.8.b. Work Completed and in Process

On the Applicant Capacity form (Exhibit A) provided, please identify:

1. All developments currently underway by the Applicant or co-sponsor
2. Developments completed in the last five years
3. Five completed developments of similar type and scale in the last five years

1.9 Bankruptcy

1.9.a Has the Applicant, Co-Sponsor, or any members of its development team, ever declared bankruptcy? Yes No

1.10 Taxes

Are the applicant and Co-Sponsor current on all local, state, and federal taxes? Yes No

SECTION II. DEVELOPMENT TEAM

2.1 Qualified Development Team Contact Information

Provide information identifying the proposed qualified development team members on the form provided (Exhibit B). Provide descriptions of relevant experience and qualifications for each team member. Include resumes for all development team members.

SECTION III. DEVELOPMENT

3.1 Development Information

Development Name _____

Development Address _____ County _____

City _____ State _____ Zip _____

Is Development Located in Neighborhood Revitalization Strategy Area or CRA? Yes No

3.2 Development Narrative

Each application must contain a project narrative that summarizes the scope of the proposal and the roles of the development team. This narrative should include: A description of the proposal, including its location(s), development type, unit mix and unit size; description of project design; proposed rents; a description of need and the target market; a description of special amenities and services; a summary of proposed construction and permanent financing, anticipated start and completion dates; and the project must address local housing needs and priorities, as documented in the City's 2005-2010 Consolidated Plan. Located at www.myclearwater.com/gov/depts/econ_devel/pdf/consolid_plan_06



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3.3 Development Schedule

Complete a development schedule based on key events (acquisition, site plan approval, construction, occupancy, etc.) (Exhibit C).

3.4 Does the Applicant and/or Co-Sponsor have a previous financial involvement or history with this property? Yes No

3.5 Has the Applicant and/or Co-Sponsor met with the Planning Department regarding this project? Yes No

3.6 Site Control (check all that apply)

Please attach copies of all site control documents received to date.

	Number of Parcels
Deed	
Option Agreement*	
Purchase Contract*	
Ground Lease	
Other (i.e. -- designated/preferred developer agreement)	

Deed	Acquisition Price	_____	Acquisition Date	_____
Option Agreement*	Expiration Date	_____		
Purchase Contract*	Expiration Date	_____		
Ground Lease	Ground Lessor	_____	Maturity Date	_____
Other (i.e. -- designated/preferred developer agreement)		_____		

3.7 Site Plan

Please provide a preliminary site plan including building footprint(s) and all site improvements (identify scale on the drawings).

3.8 Schematic Drawings

Please provide elevations and proposed floor plans, if available (identify scale on the drawings).

SECTION IV. FINANCING

4.1 Labor Standards/Prevailing Wages

For projects that trigger federal prevailing wage requirements, the bid and construction documents must include all standard federal Labor Compliance clauses and the cost estimate must be based on Davis-Bacon costs. Contact your Project Representative prior to submission of the application to determine if Federal Labor requirements will be triggered. Developers, Consultants, Contractors and Subcontractors must be cleared from State and Federal Suspended and Disbarred Contractor Lists.

Will Davis Bacon wage raters be required for this project? (Check "Yes" if there will be 12 or more HOME assisted units)

Yes No

4.2 Attach Development and Operating Pro-formas Including Sources and Uses of Funds (Submit own forms)

Applicant Signature _____

_____ Date

Co-Sponsor Signature _____

_____ Date