

RENTAL PRODUCTION APPLICATION

LOUISVILLE METRO GOVERNMENT REVITALIZATION DIVISION

Last Date Modified:

Project/IDIS #:

A. General Information

Development Information

Project Name: <input style="width: 95%; height: 20px;" type="text"/>			
Street Address: <input style="width: 70%; height: 20px;" type="text"/>		Neighborhood: <input style="width: 25%; height: 20px;" type="text"/>	
Louisville, KY	Zip: <input style="width: 15%; height: 20px;" type="text"/>	Council District: <input style="width: 25%; height: 20px;" type="text"/>	Census Tract: <input style="width: 15%; height: 20px;" type="text"/>

You Must Input # of Units in this Section

Total Rental Units:	<input style="width: 50px;" type="text"/>	Construction Type:	<input style="width: 100px;" type="text" value="Rehabilitation"/>
# of HOME Units:	<u>0</u>	Fixed or Floating HOME Units?	<input style="width: 100px;" type="text"/>
Low Income Housing Tax Credit Project?	<input style="width: 50px;" type="text"/>	Type of LIHTCs:	<input style="width: 50px;" type="text"/>
Funding Source Sought:	<input style="width: 150px;" type="text"/>		

Project Summary Briefly describe your project.

Assistance Requested (info comes from other worksheets)

Total Project Development Costs (TDC)	\$0	#DIV/0!
HOME Permanent Subsidy	\$0	#DIV/0!
CDBG Permanent Subsidy	\$0	#DIV/0!
Other Permanent Subsidy	\$0	#DIV/0!
Total Permanent Subsidy	\$0	#DIV/0!
HOME Construction Loan	\$0	#DIV/0!
CDBG Construction Loan	\$0	#DIV/0!
Other Construction Loan	\$0	#DIV/0!
Total Construction Loan	\$0	#DIV/0!
Potential \$ Repaid to LMG	\$0	

Applicant & Affiliates

Entity Name: <input style="width: 300px;" type="text"/>	Federal I.D. #: <input style="width: 100px;" type="text"/>
Contact Person: <input style="width: 300px;" type="text"/>	Phone: <input style="width: 100px;" type="text"/>
Address: <input style="width: 300px;" type="text"/>	Email: <input style="width: 100px;" type="text"/>
City: <input style="width: 100px;" type="text"/>	State: <input style="width: 50px;" type="text"/>
	Zip: <input style="width: 50px;" type="text"/>

Legal Form:

If non-profit, registered with the State of KY?

Non-profit determination been made by the Internal Revenue Service?

If yes, indicate IRS designation:

Community Housing Development Organization (CHDO)?

Is the CHDO designation from Louisville Metro?

Explain the role and activities of the non-profit sponsor in the development. Check which apply

Developer	<input type="checkbox"/>	Marketing	<input type="checkbox"/>	Other:
General Contractor	<input type="checkbox"/>	Carries Liability Insurance	<input type="checkbox"/>	
Owner	<input type="checkbox"/>	Carries Liability/Property	<input type="checkbox"/>	

Please describe the ownership structure for the proposed project.

General Partner/Corporate Officer Information (if applicable)

(List Managing General Partner on first line.)

Name:	Fed. ID #	Ownership %

Affiliated Entities

List any legally affiliated entities. Attach a list if additional space is needed.

- Name: Fed. ID #:
Relationship to Applicant:
- Name: Fed. ID #:
Relationship to Applicant:
- Name: Fed. ID #:
Relationship to Applicant:
- Name: Fed. ID #:
Relationship to Applicant:

Properties Currently Owned by Applicant & Affiliate Entities

On the worksheet "A.1) Properties" enter all properties owned by the applicant and its affiliated entities. LMG will check each address for outstanding taxes, non-compliance, code violations, etc.

B. Development Plan Information

Primary Unit Type: Target Population:

Additional Unit Type: Group Home?

Total Residential Square Feet: 0 Avg Square Feet Per Unit: -

Total number of Buildings planned buildings

Age of existing Building(s) years old

Structural System Basement Exterior

Parking

Energy and Equipment Information

	Energy Star?	Other Green Certification(s)
Heating System:		
Air Conditioning System:		
Domestic Hot Water:		

Equipment included with Income Restricted Units *(check those that apply)*

<input type="checkbox"/> Microwave	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Kitchen Exhaust Duct	Other:
<input type="checkbox"/> Range & Oven	<input type="checkbox"/> Ceiling Fans	<input type="checkbox"/> Common On-site Laundry	
<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> Fireplace	<input type="checkbox"/> Security Alarm	
<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Blinds/Drapes	<input type="checkbox"/> Laundry Equipment	

Davis Bacon Wage Determination & Reporting

Below are the thresholds for a project to trigger Davis Bacon. If over these thresholds, your project will be required to pay at rates at/above prevailing wages as determined by the Dept. of Labor. This will require regular reporting. More info at: (www.dol.gov/whd/govcontracts/dbra.htm#UOsi8W-Cm9Q)

Davis Bacon Thresholds: HOME = 12 units or more CDBG = 8 units or more

of units in project: **0** Funding Source Sought: **0**

If Davis Bacon is triggered, please describe your previous experience with compliance and reporting.

C. Site Information

On the worksheet "1a)Properties" enter all properties included in the project site(s).

Does the project build upon LMG's revitalization efforts and investments in neighborhoods across Metro Louisville?

If yes, please explain:

Is the project located in a non-Low to Moderate income census tract, promoting mixed-income neighborhoods (census tract with less than 50% of residents below 80% of the Area Median Income)?

If yes, please explain:

Will the project incorporate energy efficient, renewable, and sustainable building materials, practices, and designs? Furthermore, will the project achieve Energy Star, LEED, Green Enterprise Community and/or similar nationally-recognized certifications?

If yes, please explain:

[Redacted]

Are any properties for the proposed project currently owned by LMG, through the VAP program and/or other Metro-affiliated real estate program?

[Redacted]

Please list addressed owned by LMG and through which program.

[Redacted]

Are any of buildings in a National or local historic district?

[Redacted]

If yes, identify which properties are in the National or local district and what efforts you will undertake to preserve the historic integrity of the building/property.

[Redacted]

project?

[Redacted]

Have you already acquired the project property?

[Redacted]

Was the property occupied at the time you obtained ownership?

[Redacted]

If yes, please identify the current status of the property and explain what happened to any tenants who are no longer living there.

[Redacted]

Did/will you acquire the property with clear title and no debt?

[Redacted]

If you plan to purchase existing residential buildings, are they occupied?

[Redacted]

Is this an "Arms-Length" Transaction, meaning the buyer and seller are acting independently and have no relationship to one another?

[Redacted]

If this is not an Arm's Length Transaction, explain the relationship between buyer and seller.

[Redacted]

Current Zoning:

[Redacted]

Design Form District:

[Redacted]

Find the project's zoning & form district at this website: <http://ags2.lojic.org/lojiconline/>

If the project requires a zoning change/waiver, explain where you are in this process.

[Redacted]

Does the applicant have all final LMG Planning and Design approvals?

[Redacted]

If no, please explain the current status of approvals and when they are anticipated to be received.

Will the current site(s) require lots to be subdivided?

Are the following utilities now located on the site?

Public Water Supply	<input type="text"/>	<input type="text"/>	Feet from Site
Public Sewer System	<input type="text"/>	<input type="text"/>	Feet from Site
Natural Gas Distribution System	<input type="text"/>	<input type="text"/>	Feet from Site
Electric Power System	<input type="text"/>	<input type="text"/>	Feet from Site
Cable Television System	<input type="text"/>	<input type="text"/>	Feet from Site
Telephone System	<input type="text"/>	<input type="text"/>	Feet from Site
High Speed Fiber internet Connection	<input type="text"/>	<input type="text"/>	Feet from Site

Are the following conditions present at the proposed development site?

All or part in 100-yr. floodplain	<input type="text"/>	Standing water	<input type="text"/>
Railroad tracks within 300 feet	<input type="text"/>	Creek, lake, river frontage	<input type="text"/>
High tension wires	<input type="text"/>	Ravines or steep grades	<input type="text"/>
High noise levels	<input type="text"/>	Industrial sites	<input type="text"/>
Hazardous waste sites	<input type="text"/>	Commercial sites	<input type="text"/>
Distance to nearest airport	<input type="text"/>		

Describe any unusual site conditions:

D. Neighborhood & Market Information

Applicants must submit some form of in-house or 3rd party market analysis demonstrating demand for the proposed project. An appraisal supporting acquisition price will be required.

Explain the need/market demand for the proposed project that insures units will be "absorbed" within program deadlines?

Explain how you arrived at the projected rents:

How will you insure lease-up to eligible tenants within 18 months?

Describe how this project builds on existing and emerging neighborhood anchors (hospital, university, regional park, school, etc.):

Describe how this project has been coordinated with other neighborhood projects, investments or redevelopment initiatives.

If this project located in such a manner that there is a safe walkable path to adequate public transit service within .25 miles? If yes, provide the address of the closest public transit service stop.

E. Development & Draw Schedule

In the chart below, enter the date the item was accomplished, or when it is expected to be accomplished. If an item does not apply to your development, enter N/A or leave blank. NOTE: This or a revised schedule will be included in your written agreement with LMG should you be funded.

<i>IDIS Commitment Date (For LMG to input)</i>		Month	Year	Anticipated LMG Draw Amount
Site Control & Predevelopment	Option			
	Contract			
	Closing			
	Zoning			
	Site Analysis			
	Working Construction Drawings			
Construction Loan Closing				
Construction Start				
Construction 1/2 Completed & Drawn				
Marketing Start-Up				
Construction Complete (Certificate of Occupancy)				
All Units Leased				
Total Development Schedule:			<i>months</i>	\$0

F. Experience & Affiliates

Previous Development Experience

Has the developer completed other residential development projects?

How many housing development projects has the developer completed?

How many rental units has the developer been responsible for producing?

New Construction # units:

Rehab # units:

How many full-time equivalent staff does developer employ?

List most recently completed projects:

Project Name	Address	Construction Type	Tenure Type	Target Residents	# Units	Total Devel. Costs

List projects currently underway:

Project Name	Address	Construction Type	Tenure Type	% Complete	# Units	Total Devel. Costs

Describe how you will staff this project. Please name specific staff members and/or consultants/contractors.

Ongoing Management Experience, Structure & Capacity

Who will perform property management?

Name of management staff/company:

How many units is your staff or 3rd party mgt company currently managing?

How many HUD income-restricted units is your staff/mgt company currently managing?

Describe staff/mgt company's experience managing HUD income-restricted rental units.

Describe how the roles of property management, asset management & ongoing compliance will be delegated.

G. Development Team Information

	Name	Address	Phone	Worked Together Previously?
Project Mgr:				
Contractor:				
Consultant:				
Attorney:				
Tax Accountant:				
Architect:				
Engineer:				
Property Mgr:				
Other:				

Track record of primary contractor — list the contractor's five most recently completed projects:

1.	
2.	
3.	
4.	
5.	

Are there any identities of interest between team members? *(An identity of interest is a legal, financial, business, or familial relationship that may make it difficult for parties to act independently or "at arm's length" from one another.)*

If yes, provide details of the relationship(s):

Is the Developer, Sponsor, or any other Development Team Member related to a Louisville Metro Government elected official or employee?

If yes, provide details:

Is the Developer, Sponsor, or any other Development Team Member, including any of their owners, partners, or board members CURRENTLY debarred from Federal contracting opportunities by any agency of the Federal Government? ([search at www.sam.gov](http://www.sam.gov))

If yes, provide details:

Has the Developer, Sponsor, or any other Development Team Member listed on the previous page, including any of their owners, partners, or board members EVER been debarred from Federal contracting opportunities by any agency of the Federal Government?

If yes, provide details:

H. Relocation

Relocation is the moving of existing residential or commercial occupants from their current space.

Will your development require any households to move temporarily (rental rehab)?

of households to move temporarily:

Will your plans require any occupants to move permanently?

of households to move permanently:

Will your development require any commercial occupants to move?

of commercial occupants to move:

If you answered yes to any of the above questions, describe your relocation plan.

I. Required Application Attachments *(in addition to this Excel file)*

In addition to submitting this Excel file to Louisville Metro Government's Office of Housing and Community Development, applicants must submit a hard copy along with a number of supporting attachments. Please see the full list on the "Instructions" tab of this workbook.

J. Applicant Certification

I certify that submission of this application has been duly authorized by the governing body of the applicant and that all information contained in this application, to the best of my knowledge, is true and accurate.

I understand that Louisville Metro Government has no obligation to make a grant or loan to the applicant. I am aware that incomplete or late applications will not be accepted or considered for federal funding. I understand that awards will be made on a competitive basis and Louisville Metro Government may award an amount less than requested.

Applicant Signatures:

Owner, Developer, Executive Director:

[Redacted Name Field]

Printed Name

X

Signature

[Redacted Signature Field]

Title

[Redacted Title Field]

Date

Chief Elected Officer Signature (Board Chair)

[Redacted Name Field]

Printed Name

X

Signature

[Redacted Signature Field]

Title (Board Chair, President, etc.)

[Redacted Title Field]

Date