
PASCO COUNTY HOUSING FINANCE AUTHORITY

2020 Bonds with SAIL & Local Contribution Application

THIS APPLICATION IS SOLELY FOR THE USE OF APPLICANTS SEEKING BOND FINANCING FROM THE PASCO COUNTY HOUSING FINANCE AUTHORITY WHO ARE ALSO SEEKING SAIL FUNDING VIA FHFC RFA 2019-116 OR OTHER GAP FINANCING VIA AN FHFC RFA

THIS APPLICATION IS ALSO FOR ANY REQUIRED LOCAL GOVERNMENT CONTRIBUTION WITHIN ANY OTHER FHFC RFA OTHER THAN FHFC RFA 2019-114

SUBMIT:

SUBMIT ORIGINAL (WITH \$500 BOND APPLICATION FEE & \$1,500 LOCAL CONTRIBUTION FEE), 1 COPY & PDF of ENTIRE APPLICATION TO:

Pasco County Housing Finance Authority
c/o Director, Community Development
Marcy Esbjerg, MPA
5640 Main St., Suite 200
New Port Richey, FL 34654

One (1) hard copy and a PDF of the entire application and a \$2,500 review fee (check made out to The Hendrickson Company) to:

Mark Hendrickson
1404 Alban Avenue
Tallahassee, Florida 32301

Contact: Mark Hendrickson, 850.671.5601 mark@thehendricksoncompany.com

GENERAL INFORMATION

NOTE: BY COMPLETING THIS APPLICATION, THE APPLICANT CERTIFIES AND AGREES THAT IT WILL COMPLY WITH ALL REQUIREMENTS OF THE PASCO COUNTY HFA MULTI-FAMILY HANDBOOK AND WILL SUBMIT ANY ADDITIONAL REQUIRED DOCUMENTATION AND FEES RELATED TO THAT COMPLIANCE

Please indicate if Applicant will use these funds in conjunction with (check one)

- FHFC SAIL RFA 2019-116
- OTHER FHFC RFA—IDENTIFY _____

PASCO COUNTY HOUSING FINANCE AUTHORITY BOND REQUEST:

BOND AMOUNT REQUESTED: _____

I. DEVELOPMENT SUMMARY AND TIMELINE

A. Provide a short narrative description of the Development, including all resident programs, amenities, unit features and scope of work to be performed. If more space is needed, provide the information as **Exhibit 1**. MAJOR DEVELOPMENT AMENITIES WILL BE INCLUDED IN THE LAND USE RESTRICTION AGREEMENT. Also attach as **Exhibit 2** a timeline for the completion of the development which includes all key dates, including anticipated timing of permits and credit underwriting, Housing Credit closing date, completion of construction, rent up, and stabilization.

B. SUMMARY OF PROPOSED DEVELOPMENT

Name of Development	
Location of Development, by street address, or if no address, by mileage from nearest cross streets. Also, attach a map showing the development's location. The Project <u>must</u> be located in Duval County (PROJECT THRESHOLD CRITERIA)	
County Commission Member Name and District Number	
Developer/Location (name of controlling company, not of LP or LLC).	
Contact person for application, including name, email, and phone numbers	
PCHFPA Bond Amount Requested	
PCHFPA Local Contribution Amount Requested	
Development Construction Type Garden, Mid-Rise, High-Rise, Other (explain)	
New Construction or Rehabilitation	
Concrete, Wood or other (explain)	
Development Demographic Family, Elderly or Other (identify)	
Number of Units, by Bedrooms	
Number of Stories in Each Building	
Total Development Cost	
Cost per unit	
Land Cost	
Acquisition of Building Cost if applicable	
Hard Rehab Cost or Construction Cost	
General Contractor	
Set Aside Period (50 year minimum)	
Set Aside Levels (PROJECT THRESHOLD CRITERIA)	
Current Zoning (PROJECT THRESHOLD CRITERIA)	
Evidence of Site Control (PROJECT THRESHOLD CRITERIA)	

II. APPLICANT INFORMATION

A. Applicant Name: _____

Must be a legally formed entity (i.e., limited partnership, corporation, etc.) qualified to do business in the State of Florida at the time of submission of Application.

B. If partnership, name of general partner(s): _____

If corporation, name and title of executive officer: _____

Address: _____

Telephone: _____ Facsimile: _____

III. PROPOSED PROJECT FINANCING

A. Proposed Finance Summary: Please provide a permanent loan period detailed sources and uses that is in a format acceptable to FHFC as part of the upcoming SAIL RFA process. Attach as **Exhibit 3**.

IV. ABILITY TO PROCEED

Each Application shall be reviewed for feasibility and ability of the Applicant to proceed with construction of the Development.

A. Site Control (PROJECT THRESHOLD CRITERIA)

Site Control must be demonstrated by the APPLICANT, in a manner consistent with the requirements of FHFC RFA 2018-116:

Eligible Contract

Deed or Certificate of Title

Lease

Provide evidence of Site Control and attach as **Exhibit 4**. Use of the FHFC form **will NOT** meet this requirement.

B. Zoning and Land Development Regulations (PROJECT THRESHOLD CRITERIA)

1. a. Is the site appropriately zoned for the proposed Development: No ___ Yes ___
- b. Indicate zoning designation (s) _____
- c. Current zoning permits ___ units per acre, or ___ for the site (PUD).
- d. Total Number of Units in Development:

Note: Provision of the zoning form from FHFC RFA 2019-116 (or if not available, RFA 2018-116) will meet this requirement. Provide evidence that the proposed use is permitted and attach as **Exhibit 5**.

V. SELF-SCORING OF FHFC SAIL APPLICATION INCLUDING PROXIMITY TO PUBLIC TRANSPORTATION

Provide the score expected to be received on the application for SAIL, including point score and all tiebreakers, assuming the Applicant receives the points for the Local Government Area of Opportunity Funding Attach your response as **Exhibit 6**. BE SURE TO ADDRESS YOUR ANTICIPATED SCORE RELATED TO MEETING THE THRESHOLD CRITERIA IN THE FHFC RFA RELATED TO PROXIMITY TO PUBLIC TRANSPORTATION, AND PROVIDE A WRITTEN NARRATIVE THAT EXPLAIN THE ANTICIPATED SCORE IN DETAIL. PLEASE PROVIDE THE LOCATION OF THE PUBLIC TRANSPORTATION/BUS STOP, AND THE TYPE OF STOP IT IS, AND THE DISTANCE THAT YOU CALCULATE FROM THE DEVELOPMENT TO THE PUBLIC TRANSPORTATION.

VI. LOCAL GOVERNMENT LOAN REQUEST: Please provide the details of your request for a local government contribution, including the requested loan amount and loan terms, including interest rate, maturity date, amortization, and balloon (if any). The maximum amount of the Local Government Support loan for projects funded by FHFC is the minimum amount that will allow local projects meet FHFC's threshold guidelines. This exact amount will be noticed in each FHFC RFA. A standard structure that would be acceptable would be a 20 year/0%/balloon mortgage, also due on sale or refinancing.

LOAN AMOUNT REQUESTED: _____

MATURITY OF LOAN IN YEARS: _____

INTEREST RATE: _____

AMORTIZATION: _____

BALLOON, IF ANY: _____

VALUE OF CONTRIBUTION FOR FHFC APPLICATION PURPOSES: _____

EXPLANATION AND CALCULATION:
