SEMINOLE COUNTY COMMUNITY DEVELOPMENT
APPLICATION for HOME FUNDS
FY 2016-2017

SUBMITTAL PROCEDURES

TO WHOM AND WHERE:

Carmen Hall, HUD Administrator
Seminole County Community Development Office
534 W. Lake Mary Boulevard
Sanford Fl 32773
(407) 665-2394

WHEN:

- **NO LATER THAN 4:00 P.M., Friday, February 26, 2016.**
- Submissions received after 4:00 P.M. on that date (as per County time-stamp) will not be accepted – No exceptions.

IMPORTANT INFORMATION:

- Completed Proposals must be mailed or hand-delivered. Faxed or e-mailed submissions will not be accepted.
- The Community Development Office will time and date stamp all proposals.
- Any application will be denied if it does not provide all requested information.
- There will be no opportunity for amending any funding proposal after submittal.
- The County reserves the right to request additional information or clarification after the submittal due date, when necessary.
- Please submit one (1) original hard copy, six (6) duplicated paper copies, and one (1) PDF copy (on CD or USB flash drive) of each completed application with all required back-up documents.

APPLICANT: _____

PROPOSED PROJECT: _____

REQUESTED AMOUNT: _____

- Does the Applicant or anyone on the development team have any current agreements or obligations with Seminole County? ☐ YES ☐ NO
- If so, list agreements/obligations:
- Is the Applicant or anyone on the development team in default of any past or present obligations with Seminole County? ☐ YES ☐ NO
- If so, list agreements/obligations:
- Is the developer/contractor a member of a minority group? ☐ YES ☐ NO

DEVELOPMENT TEAM INFORMATION

Applicant

Name: _____ Telephone: _____

Address: _____

Contact Person: _____ Telephone: _____

Facsimile: _____ E-Mail Address: _____

DUNS Number: _____ Federal Identification Number: _____

Type of Organization:

☐ Proprietorship

☐ Limited Partnership or limited liability company (If a limited partnership, provide name and legal entity of general partner)

☐ Non-profit Corporation (Attach name, address of officers, directors, and principal place of business, copy of By-Laws and Articles of Incorporation, and the 501(c) 3 certificate from IRS)
☐ Corporation (Attach name, address of officers, directors, and principal place of business and copy of By-Laws and Articles of Incorporation)

☐ Public Housing Authority created by Section 421.04, Florida Statutes

☐ Community Housing Development Organization (CHDO) ☐ developer, ☐ sponsor, or ☐ owner

- Licensed to do business in the State of Florida ☐ YES ☐ NO

- List housing projects that the applicant has been involved in the last three (3) years. Provide the name, a brief description, and the date completed for each project. The representative must have at least three (3) years of prior development experience and/or experience using government funds.

- Total number of units: Produced _____ Rehabilitated _____ Owned _____ Managed _____

Builder (If Different From Applicant)

Name: _____ Telephone: _____

Address: _____

Contact Person: _____ Telephone: _____

Facsimile: _____ E-Mail Address: _____

- Licensed to do business in the State of Florida ☐ YES ☐ NO

- List housing projects that the builder has been involved in the last three (3) years. Provide the name, a brief description, and the date completed for each project. The representative must have at least three (3) years of prior development experience.

- Total number of units: Produced _____ Rehabilitated _____

Consultant

Name: _____ Telephone: _____

Address: _____

Contact Person: _____ Telephone: _____

Facsimile: _____ E-Mail Address: _____

- Licensed to do business in the State of Florida ☐ YES ☐ NO
- The consultant must have at least three (3) years of prior development experience. Describe the consultants' role in this project:

Architect

Name: _____ Telephone: _____

Address: _____

Contact Person: _____ Telephone: _____

Facsimile: _____ E-Mail Address: _____

- Licensed to do business in the State of Florida ☐ YES ☐ NO
- List housing projects that the architect has been involved in the last three (3) years. Provide the name, a brief description, and the date completed for each project. The representative must have at least three (3) years of prior development experience.

- Provide a detailed explanation of qualifications for the design/construction team. The representative must have prior development experience:

HUD Approved Housing Counseling Agency (if Housing for Sale)

Name: _____ Telephone: _____

Address: _____
Contact Person: _____ Telephone: _____

Facsimile: _____ E-Mail Address: _____

Licensed to do business in the State of Florida ☐ YES ☐ NO

- The HUD approved housing counseling agency must have at least three (3) years of prior development experience. Describe the housing counseling agency role in this project:

Financial Tracking System

- Describe the type of accounting system and financial management controls that the organization has in place:

- Applicant and its Contractor shall submit their last three (3) fiscal years' annual financial statements, including company financial statement summaries, certified by a Certified Public Accountant. If the organization has been in business for a period of less than three (3) years, Applicants are required to submit a detailed business plan in addition to any pertinent information that would allow the County to evaluate the sufficiency of financial resources and the ability of the business to complete the project in a timely manner.

- Provide evidence of the following:

  a. Experience and success in securing private financing.

  b. Experience in leveraging public funds to secure private financing.

- Identify the banks and private lending institutions, which the Applicant has utilized in previous projects. Provide names, addresses, phone numbers, fax numbers, and e-mail addresses of contact persons for such banks and private lending institutions.

PROJECT INFORMATION

Homebuyer Activities

_____ Acquisition
_____ Rehabilitation
_____ Construction

Rental Housing Activities

_____ Acquisition
_____ Rehabilitation
_____ Construction

- Type of units: ☐SF Detached Units ☐Apartments
- Is the Proposed Project a Mixed Income Development? ☐ YES ☐ NO
- Total number of units in the Development: _____
- Provide breakdown of units for the <u>entire</u> project:

_____ higher than 120% of MSA Median Income

_____ at 81% - 120% of MSA Median Income

_____ at 51% - 80% of MSA Median Income

_____ under 50% of MSA Median Income

_____ under 30% of MSA Median Income

- Total number of units in the Development to be assisted with HOME funds: _____
- If Rental Activities: _____ Fix Units How many? _____
  _____ Floating Units How many? _____

- Provide a brief description of the project

- Attach a detailed project timeline for project development (from conception to project closeout)

- Provide two letters of support for the proposed project. Letters must be from a local government, lender, housing organization, or anyone who has partnered with the applicant within the last five years.

Site Plan Information

- Attach copies of the site plan (master copy should be no larger than 24" x 36" in size, at a scale of no smaller than 1" = 20 feet; additional copies of the site plan should be no larger than 11" x 17" in size).

Quality of Design & Construction

- Provide building elevations and proposed house elevation and floor plans for each model and/or unit type that will be included in the development.

- Describe the construction/rehabilitation of the Project by answering the following:

Exterior Description

Exterior Walls ☐ Siding ☐ Stucco ☐ Brick ☐ Block ☐ Frame

Roof Surface ☐ Shingles ☐ Flat ☐ Stone ☐ Tile

Foundation Type

☐ Slab ☐ Stem Wall ☐ Concrete piers for elevated construction

Interior Description

Floors:

Living Room: ☐ Wood ☐ Carpet ☐ Vinyl ☐ Ceramic Tile ☐ Other

Kitchen ☐ Wood ☐ Carpet ☐ Vinyl ☐ Ceramic Tile ☐ Other

Bathrooms ☐ Wood ☐ Carpet ☐ Vinyl ☐ Ceramic Tile ☐ Other

Bedrooms ☐ Wood ☐ Carpet ☐ Vinyl ☐ Ceramic Tile ☐ Other

Foyer ☐ Wood ☐ Carpet ☐ Vinyl ☐ Ceramic Tile ☐ Other

Walls: ☐ Drywall ☐ Plaster ☐ Other Specify: _____

Exterior Door Type: _____

Kitchen Equipment

☐ Refrigerator ☐ Range/Oven ☐ Disposal ☐ Dishwasher

☐ Microwave ☐ Washer ☐ Dryer ☐ Fan/Hood

Attic

Access: ☐ Stairs ☐ Drop Stairs ☐ Scuttle ☐ None

Storage: ☐ Yes ☐ No

Attic Flooring: ☐ Yes ☐ Finished ☐ Unfinished ☐ No

Car Storage

☐ None ☐ Attached Garage (__1 or __2) ☐ Detached Garage (__1 or __2) ☐ Carport

Features

☐ Patio ☐ Deck ☐ Porch ☐ Fence ☐ Window Coverings* ☐ Other _____

***Window Coverings are a requirement for ALL projects.**

Energy Conservation Features

Cooling

☐ Air conditioning with SEER rating of 11 or better. Describe: _____

Water Heating

☐ Gas water heater with energy factor of .58 or better or electric water heater with energy factor of .91. Describe: _____

Insulation – Wall insulation is determined by the insulation material only, not the wall assembly materials:

☐ Wall insulation of R-13 or better for frame built construction or wall insulation of R-7 or better for masonry/concrete block construction. Describe: _____

Applicant may select only one of the following two items:

☐ Attic insulation of R-30 or better. Describe: _____

☐ Insulation of R-19 with radiant barrier on top floor only. Describe: _____

Windows – Applicant may select only one of the following five items:

☐ Solar screens on all west and east facing windows

☐ Double-pane glass on all windows

☐ Double-pane windows with minimum solar heat gain coefficient of less or equal to .60 and minimum of .70 U Value. Describe: _____

☐ Single-pane windows with minimum solar heat gain coefficient of .58 or better. Describe: _____

☐ Single-pane windows with shading coefficient of .67 or better. Describe: _____

Other:

☐ Ceiling fans in all bedrooms and/or living area

Project Financing

Sources/Uses of Funds

- The Sources/Uses of Funds Statement must include: (1) all proposed sources (both private and public) of funds and the dollar amount (s) for each respective source, and (2) all uses of funds (including construction costs, site development costs, permits, impact fees, financing costs, and professional fees – include contingency, overhead and profit) associated with the development.

- Provide supporting documentation for all costs specified in the Sources/Uses of Funds Statement. (i.e. Sources of Funds: If the applicant is a partnership, a copy of the partnership agreement, which will indicate the cash contributions by the general partner(s) and/or limited partner(s). Uses of Funds: Provide the following: (1) earnest money agreement, option or closing statement for land and/or building(s); (2) construction cost estimate; (3) construction contract or preliminary bid(s); (4) agreements governing the various reserves which are capitalized at closing (to verify that the reserves cannot be withdrawn later as fees or distributions); (5) appraisal (to substantiate the value of the land and the value of the property after rehabilitation or the structure being built); and (6) if low-income housing tax credits are utilized, documentation on the syndication costs (legal, accounting, tax opinion, etc.) from the organization/individual who will syndicate and sell the offering to ensure that the project can support the fees necessary to syndicate/fund the project. All assumptions in the offering should be verified in the supporting documentation).

Development Budget

- The budget should include all costs associated with the development of the project regardless of the funding sources. The budget line items may include, but should not be limited to: construction "hard" costs, soft costs (architectural, engineering, legal and appraisal fees), marketing costs, construction loan interest, developer fees, real estate taxes, insurance, all loan fees, building permits, relocation and consultant fees. The project development budget should reflect the total costs as in the "uses" section of the Sources and Uses of Funds statement.

- Identify the costs being funded by the requested assistance.

Pro Forma (for Rental Activities)

- The pro forma should be for the length of the affordability period (or longer if other funding sources require longer affordability terms).

Financial Commitments

- Do you have any financial commitments? ☐ YES ☐ NO

- Submit evidence of private financing; attach copies of all commitment letters. Commitment letters must be project specific and must state all terms and conditions for all mortgages, grants, subordination agreements, bridge (interim) loans and investment tax credits (historical, low-income, if applicable). All conditions which must be met prior to funding must be included in the commitment letter.

- Provide a formal certification from the applicant as to whether of not additional governmental assistance will be provided to the project, and if so, provide details such as name of program, funding conditions, assumptions, etc.

Sales Information for ALL Units (For Homebuyer Activities)

# of Units	Sq. Ft	# of Bedrooms & Bathrooms	Income Range of Purchaser	Sales Price (Before Subsidies)	Sales Price (After Subsidies)

Rental Information for ALL Units (for Rental Activities)

# of Units	Sq. Ft	# of Bedrooms & Bathrooms	Income Range of Renter	Monthly Rent (Before Utility Allowance)	Utility Allowance	Monthly Rent (After Utility Allowance)

Environmental Review

- Submit a Phase I Environmental Review

Outreach and Marketing Plan

- Do you have a pool of qualified applicants? ☐ YES ☐ NO
- Describe your outreach and marketing plan for the project
- Submit the written tenant selection policy that would be use for this project (for Rental Activities)

DISCLOSURE FORM

Answer the following questions by placing an “X” after “YES” or “NO”.

Has your agency, any officer or employee, or anyone involved in the operation, management, direction or decision making of your agency, received a reprimand or a sanction or warning of any nature, or been suspended by the Florida Department of Professional and Business Regulation or any other Florida agency, the U.S. Government, or any professional association within the last five (5) years?

YES ☐ NO ☐

Has your agency, any officer, employee, or anyone involved in the operation, management, direction or decision making of your agency, been declared in default, terminated, or removed from a contract or job related to the services your firm provides in the regular course of business within the last five (5) years?

YES ☐ NO ☐

Has your agency, any officer, employee, or anyone involved in the operation, management, direction or decision making of your agency, had filed against it, him, or her, or filed any requests for equitable adjustment, contract claims or litigation in the past five (5) years that is related to the services your firm provides in the regular course of business?

YES ☐ NO ☐

I hereby certify that all statements made are true and accurate. I understand that any misstatement, misrepresentation or falsification of facts shall be cause for forfeiture of rights for further consideration of this application. Should my agency receive funding and it is determined at a later date that this statement was misstated, misrepresented or contains falsification of facts, my agency understands and agrees that our Agreement with Seminole County is to be declared null, void, and terminated immediately, and that any and all funds spent shall be returned to the County.

_____ _____

FIRM DATE

_____ _____

AUTHORIZED SIGNATURE OFFICER TITLE

_____

PRINTED OR TYPED NAME