HTF Homeownership Application

Project Overview, Stage 2

Applicant

Applicant Organization:
Organization Address:
City:
County:
Zip Code:

First Time Applicant?
Yes ☐ No ☐

Unified Business Identifier:

Federal Tax ID Number:

Executive Director: Email:
Phone: Fax:

Agency Project Contact: Email:
Phone: Fax:

Development Consultant Email:
Phone: Fax:

Project

Project Name
Project Address/Location
City
County
Zip Code

Leg District
Congressional District

Narrative

Please provide a brief project description (Limit response to the space below)

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Project Overview, Stage 2

Organization	Project

Project Summary

Check all that apply:

Project Activity
- ☐ Down Payment Assistance
- ☐ Acquisition - Land
- ☐ Acquisition - Rehab
- ☐ New Construction

Project Model
- ☐ Self Help
- ☐ Self Help - Habitat
- ☐ Community Land Trust
- ☐ Owner-occupied Rehab

Non-Residential Space
- ☐ Commercial
- ☐ Office
- ☐ Community Use
- ☐ Services
- ☐ Other:

Demographics

Check all that apply:

Client Types
- ☐ Adults
- ☐ Elderly
- ☐ Families w/children
- ☐ Farmworker
- ☐ Domestic Violence

Disabled
- ☐ Mental Illness
- ☐ Physical
- ☐ Developmental
- ☐ Other:

Units by Income Level

	0-30% AMI
	31-50% AMI
	51-60% AMI
	61-80% AMI
	over 80% AMI
	Total Units

Total Individuals Served

	Adults
	Children

DPA Projects:

Estimate totals from historical averages

Unit Price Range

	High
	Low
	Average

Unit Sq. Ft. Range

	High
	Low
	Average

Design

Check all that apply:

Ownership Model
- ☐ Community Land Trust
- ☐ Condominium
- ☐ Cooperative
- ☐ Detached Single-Family
- ☐ Fee Simple Title
- ☐ Tribal

Multi-unit Structures
- ☐ Zero-Lot Line Attached
- ☐ Row Houses
- ☐ Flats
- ☐ Other:

Construction Type
- ☐ Stick Built
- ☐ Manufactured Homes
- ☐ Panelized Construction
- ☐ Straw Bale
- ☐ Modular
- ☐ Other:

Evergreen Sustainable Building Standard *(mandatory by December 2008)*

Project will have Green Building features

Project will meet Evergreen Sustainable Building Standard

Financial

Check all that apply:

Revolving Loan Fund
- ☐ Service In-house
- ☐ Outsource Servicing
- ☐ Repayment from onset
- ☐ Payment Deferred for
- ☐ Due on Sale or Change of Use

Buyer Takes Title At:
- ☐ Acquisition
- ☐ Construction Start
- ☐ Occupancy
- ☐ Other:

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Project: Funding Sources & Total Development Cost

Residential			
Funding Source & Type	**Proposed**	**Committed/ Conditional**	**Total Funding**
WA State HTF			
WA State HTF Set Aside			
WA State CDBG Housing Enhancement			
Total Residential Development			

Non-Residential			
Funding Source & Type	**Proposed**	**Committed/ Conditional**	**Total Funding**
WA State HTF			
WA State HTF Set Aside			
WA State CDBG Housing Enhancement			
Total Non-Residential Development			

Total Development Cost			
Funding Source & Type	**Proposed**	**Committed/ Conditional**	**Total Funding**

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Project Overview, Stage 2

Organization Name	Program Name

Intstructions:
This is a summary of your projected HTF homeownership activity. Please enter **HTF dollar amounts** for project activity for each month.
Indicate the number of units completed below each month and total for year end.

Project Name	Project Year

Project Activity	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Total HTF Funds
Down Payment Assistance											
Acquisition - Land											
Acquisition - Rehab											
Construction											
Construction to Perm Financing											
UNITS COMPLETED											

Pipeline Notes:

Project Name	Project Year

Project Activity	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Total HTF Funds
Down Payment Assistance											
Acquisition - Land											
Acquisition - Rehab											
Construction											
Construction to Perm Financing											
UNITS COMPLETED											

Pipeline Notes: