
**HOUSING FINANCE AUTHORITY
OF HILLSBOROUGH COUNTY**

Multifamily Mortgage Revenue Bond Program

2026 Application

An original of the entire application to:
Housing Finance Authority of Hillsborough County
c/o County Attorney
Mary Helen Farris
601 East Kennedy Boulevard, 27th Floor
Tampa, Florida 33602

EMAIL a PDF of the entire application and all fees to:
The Hendrickson Company
1404 Alban Avenue
Tallahassee, Florida 32301
Contact: Mark Hendrickson, 850.671.5601 mark@thehendricksoncompany.com

Each application submission shall include a non-refundable Application Fee in the amount of 0.1% (ten basis points) of the requested bond amount, but not less than \$7,500, payable to the Housing Finance Authority of Hillsborough County, Florida, and a non-refundable Review Fee of \$5,500 also payable to the HFA of Hillsborough County. Both fees should be sent to The Hendrickson Company AT THE ADDRESS ABOVE.

PDF MUST BE SIZE THAT ALLOWS IT TO BE EMAILED

Revised August 22, 2025

HFA OF HILLSBOROUGH COUNTY BOND REQUEST:

A. BOND AMOUNT REQUESTED: _____

B. SUMMARY OF PROPOSED DEVELOPMENT

Name of Development	
Location of Development, by street address, or if no address, by mileage from nearest cross streets. The Project may be located anywhere in Hillsborough County	
Developer/Developer Location (name of controlling company, not of LP or LLC).	
Contact person for application, including name, email, and phone numbers	
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)	
Total Number of Units Number of Units by Bedrooms	
Number of Buildings	
Number of Stories by 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)	
Credit Enhancement (identify) or Private Placement	
Equity Provider	
Set Aside Levels (PROJECT THRESHOLD CRITERIA) Number of Units by AMI level	
Current Zoning (PROJECT THRESHOLD CRITERIA)	

C. DEVELOPMENT SUMMARY AND TIMELINE

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.

I. 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. Include a copy of the certificate of good standing from the Florida Secretary of State. If the Applicant is a general partnership or joint venture, provide a copy of the partnership/joint venture agreement, as **Exhibit 3**

Note: If four percent tax credits will be sought and it is contemplated that the tax credits will be syndicated, the Applicant entity must be a limited partnership or a limited liability company at the time of application for the tax credits. The Applicant entity will be the recipient of the tax credits and CANNOT BE CHANGED until after a Final Allocation of tax credits has been issued.

Address: _____

Telephone: _____ Fax: _____

Email: _____

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

If corporation, name and title of executive officer: _____

Address: _____

Telephone: _____

Email: _____

C. Nonprofit Status

1. Is the Applicant a 501(c)(3) non-profit organization pursuant to the Internal Revenue Code?

No _____ Yes _____

If "yes" provide the following items:

a. Attach evidence of non-profit status as **Exhibit 4**.

b. Attach attorney's opinions as required by the Code and evidence that the nonprofit has not exceeded its allocation cap as **Exhibit 5**.

2. Is the Authority's Bond Allocation being requested? Yes _____ No _____

If "No", attach evidence of the federal minimum set aside requirement as **Exhibit 6**.

II. DEVELOPMENT INFORMATION

Breakdown of units by square footage and monthly rent charged. All units in the development must be listed INCLUDING all manager/employee units. Indicate manager/employee units with an asterisk.

# of Bedrooms Per Unit	# of Baths Per Unit	Square Feet Per Unit	# of Units Per Bedroom type	% of Area Median Income
Efficiency				
Efficiency				
One Bedroom				
One Bedroom				
Two Bedroom				
Two Bedroom				
Three Bedroom				
Three Bedroom				
Four Bedroom				
Four Bedroom				

A. Minimum Set-aside required for Tax Exempt Bond Financing. CHOOSE ONLY ONE:

Note: **LURA will reflect all units set-aside for tax credit purposes**

- ☐ 20% of units at 50% of area median income
☐ 40% of units at 60% of area median income

B. Public Policy Issues.

1. The Applicant agrees to abide by the set-asides described in this application for _____ years with a minimum of 50 years.
2. Describe in detail all resident programs and activities that will be provided by the Applicant. Each program mandated by the Authority or selected by the Applicant will be made a part of the Land Use Restriction Agreement, and must be described behind **Exhibit 7**. Developments that include a mix of elderly and non-elderly units must provide all resident programs mandated for both elderly and non-elderly developments. The resident programs to be provided are (MUST CHOOSE AT LEAST ONE OPTIONAL PROGRAM):

a. Resident programs for **All Applicants**:

- ☐ **Health Care – Mandatory** - Regularly scheduled visits by health care professionals such as nurses, doctors, or other licensed care providers. At a minimum, the following services must be provided at no cost to the resident: health screening, flu shots, vision and hearing tests. Regularly scheduled is defined as not less often than once each quarter. On-site space must be provided.
- ☐ **Resident Activities – Mandatory** - Regularly scheduled, specified activities, planned, arranged, managed, and paid for by the Applicant or its management agent as an integral part of the management plan. The Applicant must develop and execute a comprehensive plan of varied activities such as holiday or special occasion parties, community picnics or cookouts, newsletters, children's special functions, etc., to bring the resident together, foster a sense of community, and encourage community pride.
- ☐ **On Site Voter Registration – Mandatory** – The Applicant or its Management Agent shall work with the County Supervisor of Elections to arrange on-site voter registration. The registration shall be at least quarterly, and shall be during weekend and other traditionally non-work times.
- ☐ **Financial Counseling – Mandatory** – This service must be provided by the Applicant or its Management Agent at no cost to the resident. Financial counseling must include the following components; must be regularly scheduled, not less often than once each quarter; must be free of charge to the residents; must include tax preparation assistance by qualified professionals; must include educational workshops on such topics as "Learning to Budget", "Handling Personal Finances", or "Comparison Shopping for the Consumer".
- ☐ **Computer Training – Mandatory** - This training is made in conjunction with the requirement that the Applicant commit one computer for every 50 units, with software and internet access. The applicant must provide quarterly, on-site training classes, OR access to training software on basic computer skills such as word processing and spreadsheets to the residents.

- ☐ **Hurricane Preparedness – Mandatory** - At least one month before each Hurricane Season, conduct training for residents on how to plan for hurricane and evacuation protocols. At start of Hurricane Season, provide all residents written instructions on planning and evacuation.
- ☐ **English as a Second Language – Optional** - Applicant shall make available, at no cost to the resident, a literacy tutor(s) to provide weekly English lessons to residents in private space on-site.
- ☐ **Swimming Lessons – Optional** – The Applicant or its Management Agent shall provide on-site swimming lessons for children or adults, at no cost to the resident, at least three times each year.
- ☐ **Life Safety Training – Optional** – The Applicant or its Management Agent shall provide on-site courses such as fire safety, first aid (including CPR), etc. at least twice each year, at no cost to the resident.
- ☐ **Health and Nutrition Classes – Optional** – The Applicant or its Management Agent shall provide on-site classes, at no cost to the resident, at least 8 hours per year.
- ☐ **Day Care – Optional** – either:
 - ☐ Day care facility for children or adults on-site, or
 - ☐ A discount of at least 20% at a day care facility for children or adults within 3 miles of the development.
- ☐ **Case Management/Residential Stabilization/Services – Optional** – This service must be provided by a qualified social worker at no cost to the resident. This program requires that the following services be made available on-site no less often than once a week: crisis intervention, individual and family needs assessment, problem solving and planning, appropriate information and referral to community resources and services based on need, monitoring of ongoing ability to retain self-sufficiency, and advocacy to assist clients in securing needed resources.
- ☐ **Smoking Cessation Classes – Optional for New Construction, Mandatory for Acquisition/Rehabilitation** – The Applicant or its Management Agent shall provide on-site classes, at no cost to the resident, at least 8 hours per year.

b. Residential Programs for **Elderly Developments**:

- ☐ **Resident Assurance Check-In Program – Mandatory** – Applicant must provide and use an established system for checking in with each resident on a predetermined basis not less than once per day. Residents may opt out of this program with a written certification that they chose not to participate.
- ☐ **Daily Activities – Mandatory** – Applicant or its Management Agent must provide supervised, structured activities at least five days per week. Activities must be on-site and at no charge to the residents.
- ☐ **Meals – Optional** – Applicant must pay for daily, at least one meal per day, delivery and cost of meals to the residents or provide for the daily preparation and serving of meals in a designated

common on-site facility. Programs such as “Meals on Wheels” will not qualify for points because Applicant is not providing the service.

- ☐ Applicant will provide for delivery and cost of daily meals (at least one meal per day) to be served in a designated common facility located on-site; or
- ☐ Applicant will arrange for daily meals, at least one meal per day, to be delivered to the residents at no cost to the residents.
- ☐ **Private Transportation for the Development – Optional** – The Applicant or its Management Agent, at no cost to the resident, must provide a qualified driver and have a safe and serviceable vehicle that can transport residents to off-site locations for such things as medical appointments, public service facilities, and/or educational or social activities. A nearby bus stop or access to programs such as “Dial a Ride” will not be acceptable for purposes of this commitment.
- ☐ **Assistance with Light Housekeeping, Shopping and/or Laundry – Optional** – Applicant must provide weekly assistance with at least two of the following: (1) light housekeeping, and/or (2) grocery shopping, and/or (3) laundry, at a rate which is at least 25% lower than market.
- ☐ **Personnel On-Call 24 Hours Per Day – Optional** – Applicant must provide a manager, maintenance employee and/or security guard who is available and accessible to the residents 24 hours per day, seven days per week.

c. Resident Programs for **Non-Elderly Developments**:

- ☐ **Homeownership Opportunity Program – Mandatory** – Applicant must provide a homeownership opportunity program available to all residents in compliance with their current lease. The program must set aside 5% of the resident’s gross rent toward a down payment for that resident when the resident moves from the development into homeownership. The resident may be suspended from the program during the period of a lease if the resident violates any provision of the lease. Upon renewal of the lease, the resident must be reinstated into the program for the period of that renewal, with suspension permitted under the same terms as discussed above. The homeownership opportunity program must also include financial counseling for all residents, with emphasis on credit counseling and other items necessary for successful purchase of, and maintenance of a home.
- ☐ **First Time Homebuyer Seminars – Mandatory** – Applicant must arrange for and provide at no cost to the resident, in conjunction with local realtors or lending institutions, semiannual on-site seminars for residents interested in becoming homeowners.
- ☐ **After School Program for Children – Optional** – Applicant or its Management Agent must provide daily, supervised, structured, age-appropriate activities for children during the after-school hours. Activities must be on-site and at no charge to the residents.
- ☐ **Literacy Training – Optional** – Applicant must make available, at no cost to the resident, a literacy tutor(s) to provide weekly literacy lessons to residents in private space on-site.

- ☐ **Job Training – Optional** – Applicant must provide, at no cost to the resident, access to online regularly scheduled classes in typing, computer literacy, secretarial skills or other useful job skills. Regularly scheduled means not less often than once each quarter.
- d. **Homeless, Veterans or Special Needs Housing:** The Applicant may propose appropriate Resident Programs. Attach as **Exhibit 8**.
3. Describe in detail all design and other physical amenities that provide enhanced quality of life, energy efficiency, increased security, handicapped accessibility, or other features. Each feature mandated by the Authority or selected by the Applicant will be made a part of the Land Use Restriction Agreement, and must be described behind tab labeled **Exhibit 9**. Developments that include a mix of elderly and non-elderly units must provide design features for both elderly and non-elderly units must provide design features for both elderly and non-elderly developments. The design and amenity features to be provided are:
- a. In addition to meeting all building code, Fair Housing Act, and Americans with Disabilities Act Requirements, the following items are required:
- **Air conditioning** (window units are not allowed), in all units
 - **Dishwasher**, in all new construction units
 - **Garbage Disposal**, in all new construction units
 - **Cable TV Hook-Up**, in all units
 - **At least two full bathrooms** in all **3 bedroom or larger** new construction units
 - **At least 1 and ½ bathrooms** (one full bath and one with at least a toilet and sink) in all new construction **2 bedroom units**
 - **Full sized appliances** in all units
 - **Bathtub** in at least one bathroom in new construction non-elderly units
- b. **For New Construction Units**, the applicant may select items from the following list. The selected items must total 25 points:
- ☐ Window Treatments (mini-blinds ☐, curtains ☐, vertical blinds ☐) inside each unit. Select treatment that will be provided. (3 points)
 - ☐ 30 Year Expected Life Roofing on all Buildings (5 points)
 - ☐ Gated community with “carded” entry or security guard ☐, or if mid-or-high-rise, “carded” secure entry to building ☐ (2 points for gated community, 4 points for secure building entry)
 - ☐ Exterior Finish - ☐ stucco or ☐ cementitious siding or ☐ brick exterior finish (3 points – check choice)
 - ☐ Ceramic tile in bathtub/shower area (3 points)
 - ☐ Microwave Oven (3 points)
 - ☐ Fire Sprinklers in All Units (5 points)

- ☐ Steel entry door frames (2 points)
- ☐ Termite prevention/detection system (2 points)
- ☐ Exterior lighting (3 points)
- ☐ Double compartment kitchen sink (1 point)
- ☐ Laundry Hook-ups and space for washer/dryer inside each unit (3 points)
- ☐ Non-smoking units (may not choose with Non-Smoking Buildings (4 points)
- ☐ Non-smoking buildings (5 points)

c. For **Rehabilitation of Existing Development**, the applicant may select items form the following list.
The selected items must total 25 points:

- ☐ Laundry Hook-ups and space for washer/dryer inside each unit (3 Points)
- ☐ Window Treatments: Identify treatment (3 points)
 - ☐ mini-blinds
 - ☐ curtains
 - ☐ vertical blinds) inside each unit – identify treatment
- ☐ 30-Year Expected Life Roofing on all Buildings (4 points)
- ☐ Gated community with “carded” entry or security guard, or if mid-or-high rise, “carded” secure entry to building (3 points)
- ☐ Ceramic tile in bathtub/shower area (3 points)
- ☐ Microwave Oven (3 points)
- ☐ Marble Window Sills (3 points)
- ☐ Fire Sprinklers in All Units (4 points)
- ☐ Dishwasher inside each unit (3 points)
 - ☐ Garbage disposals inside each unit (3 points)
 - ☐ Steel entry door frames (2 points)
 - ☐ Termite prevention/detection system (2 points)
 - ☐ Exterior lighting (3 points)

- ☐ Non-smoking units (may not choose with Non-Smoking Buildings (4 points)
- ☐ Non-smoking buildings (5 points)

d. For **Elderly Developments** or developments with elderly units, the applicant may select from the following list. The selected items must be on-site and total 16 points (2 points each):

- ☐ Emergency call service in all elderly units
- ☐ Hairdresser Shop or Barber Shop on site
- ☐ Laundry facilities available on every floor
- ☐ All bathrooms in elderly units handicapped accessible with grab-bars per ANSI requirements
- ☐ Public transportation within 150 feet of property (or elderly building if mixed family-elderly)
- ☐ Exercise room with appropriate equipment
- ☐ Community center or clubhouse
- ☐ Swimming pool
- ☐ Picnic area with at least three permanent picnic tables and a permanent outdoor grill
- ☐ Outside recreation facility (such as shuffleboard court, putting green, tennis court).

Identify facility: _____

- ☐ Library consisting of a minimum of 100 books and 5 magazine subscriptions
- ☐ Craft Room
- ☐ Walking Trail
- ☐ Community Garden
- ☐ Dedicated movie room (new construction or rehabilitation)
- ☐ Movie room in common area (rehabilitation)

e. For **Non-Elderly Developments**, or developments with non-elderly units, the applicant may select from the following list. The selected items must be on-site and total 16 points (2 points each):

- ☐ Exercise room with appropriate equipment
- ☐ Community center or clubhouse
- ☐ Swimming pool
- ☐ Playground/tot lot (must be sized in proportion to development's size and expected resident population with age-appropriate equipment)
- ☐ Car care area (for car cleaning/washing)
- ☐ Childcare facility located within three miles of the property
- ☐ Public transportation located within one-half mile of the property
- ☐ Library/study room consisting of a minimum of 100 books and 5 magazine subscriptions
- ☐ Two or more parking spaces per unit
- ☐ Outside recreation area for older children (such as basketball court, tennis court, volleyball court, etc.). Identify facility:

_____.

- ☐ Community Garden
- ☐ Picnic area with at least three permanent picnic tables and a permanent outdoor grill

f. Energy Conservation Features for all units in the Development

Mandatory Features:

- Energy Star qualified refrigerator;
- Energy Star qualified dishwasher;
- Energy Star qualified washing machine, if provided by applicant;
- Minimum SEER of 14 for unit air conditioners (excluding buildings with a central chiller system);
- Low-VOC paint for all interior walls (50 grams per liter or less for flat paint; 150 grams per liter or less for non-flat paint);
- Low-flow water fixtures in bathrooms--WaterSense labeled products or the following specifications:
 - Toilets: 1.6 gallons/flush or less
 - Faucets: 1.5 gallons/minute or less
 - Showerheads: 2.2 gallons/minute or less.

Optional Green Building Features:

Applicant must choose at least five (5) items from the following list:

- ☐ Programmable thermostat in each unit
- ☐ Energy Star ceiling fans in all bedrooms and living areas
- ☐ Energy Star qualified roofing material or coating
- ☐ Energy Star exhaust fans in bathrooms
- ☐ Energy Star rating for all windows
- ☐ Install daylight sensors, timers or motion detectors on all outdoor lighting attached to buildings
- ☐ FL Yards and Neighborhoods certification on all landscaping
- ☐ Eco-friendly flooring -- Carpet and Rug Institute Green Label certified carpet and pad, bamboo, cork, recycled content tile, and/or natural linoleum
- ☐ Eco-friendly cabinets – formaldehyde free, material certified by the Forest Stewardship Council
- ☐ Motion detector on common area lighting

III. Development FINANCING AND PROPOSED STRUCTURE

- A. Proposed Finance Summary: Attach a Sources and Uses in format consistent with FHFC RFA 2025-202 as **Exhibit 10**.

Explanation of SAIL, HOME, CDBG and/or SHIP funding: _____

If SAIL, HOME, CDBG and/or SHIP funding is shown as already committed, **attach a letter from the appropriate governmental entity detailing the commitment**, including the dollar amount, source of

funding, conditions of funding (including income and/or rent restrictions), whether the funding is a loan or a grant, and if a loan, the interest rate, loan term, amortization, and payback schedule. Attach the letter(s) as **Exhibit 11**.

- B. If SAIL, HOME, CDBG and/or SHIP funding is shown and is not firmly committed, attach an explanation of how the development will be completed without those funds. Attach the explanation as **Exhibit 12**.

Does the Applicant firmly commit to complete the bond financing if those funds are not received?

Yes _____ No _____

- C. If SAIL or HOME funding from Florida Housing is not shown, does the Applicant intend to apply for such funding? If so, how much: \$_____.

- D. Tax Credits. If the Development receives Bond financing, will HC be used? No _____ Yes _____

1. If yes, HC Requested Amount \$ _____

2. If yes, name of Equity Investor: _____
A preliminary commitment letter is included as **Exhibit 13**. The letter must include a description of how the equity funding will be paid out during construction and following completion. At least 50% of the amount needed to complete construction must be paid at bond closing. **A firm commitment letter must be provided during the Credit Underwriting.**

- E. Rental Assistance. Is development-based rental assistance **anticipated** for this Development?

No _____ Yes _____ If yes, check all that apply:

☐ Moderate Rehab
☐ Section 8

☐ RD 515
☐ Other _____

Number of units receiving assistance: _____

Number of years remaining on rental assistance contract: _____

- F. Credit Enhancement

☐ Letter of Credit: _____

Term: _____ Rating: _____

☐ Third Party Guarantor: _____

Term: _____ Rating: _____

☐ Private Placement/Name of Placement Agent: _____

Term: _____ Rating: _____

☐ FHA-Insured loan

Name of Lender: _____ Term: _____ Rating: _____

☐ Fannie Mae or ☐ Freddie Mac

Name of DUS Lender: _____ Term: _____

Name of Interim Construction LOC Bank: _____ Rating: _____

☐ Other

Name: _____ Term: _____ Rating: _____

A copy of the Commitment or Letter of Interest for the above checked credit enhancer(s) and/or placement agent, including a contact person's name, address and telephone number; credit underwriting standards; and an outline of proposed terms, must be attached as Exhibit 14.

- 25% Bond Test: For purposes of meeting the 25% bond test to receive automatic HC, tax-exempt bonds represent ____%. Attach a detailed 25% test calculation as Exhibit 15.
- Proposed Structure. The outline of the proposed structure must include, at a minimum, the following: whether a combination of tax-exempt and taxable bond financing expected, whether a fixed or floating interest rate is expected, mortgage term, amortization schedule, interest terms, description of the credit enhancement or placement structure, and additional financing or equity sources. **Material changes in the proposed structure after submittal of the application may result in delay of consideration by the Authority or loss of priority.** A description of the proposed financing structure is attached as Exhibit 16.
- Economic Feasibility of the Development. A description of the Development feasibility structure must be attached as Exhibit 17 and include, at a minimum, the following:
 - ❖ 15-year Pro forma cash flow
 - ❖ Maximum interest rate at which the Development will work
 - ❖ Detailed sources and uses, including a breakout for each line item on a per unit cost basis, in a format consistent with FHFC RFA 2025-205.

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

Site Control must be demonstrated by the APPLICANT. At a minimum, a Contract for Purchase and Sale must be held by the Applicant for the proposed site. The contract may not expire before seven (7) months from the date the Bond Application is submitted to the Authority. and the remedy for

default on the part of the seller must include or be specific performance, and the buyer **MUST** be the Applicant. Site is controlled by:

_____ Contract for Purchase & Sale,

_____ Recorded Deed,

_____ Long-Term Lease: If site control is demonstrated by long-term lease, a copy of the executed lease must be provided. The lease may be contingent only upon the receipt of Bond Financing.

IMPORTANT: If site control is not held by the Applicant, a fully executed, enforceable **contract for purchase and sale or assignment of contract** must be provided which obligates the seller or assignor to transfer the site to the Applicant contingent **ONLY** upon the award of Bond Financing. Evidence of Site Control can be found directly behind tab labeled **Exhibit 18**.

B. Zoning and Land Development Regulations

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 2025-205 will meet this requirement. Provide evidence that the proposed use is permitted and attach as Exhibit 19.

C. Experience of the Development Team- SEE NOTE ON PAGE 15 RELATED TO CHARTS

NOTE: If team member worked on HFA of Hillsborough County bond transaction closed in the last three (3) years, list name of team member, BUT THERE IS NO NEED TO FILL OUT ATTACHED CHART.

The past performance record of the development team (which consists of Developer and , Management Agent) will be carefully reviewed.

1. Experience of Developer: Name: _____
Principal(s): _____

- a. Fill out the attached chart.
- b. Has the Developer, or any of the principals of the Developer been associated with any development that has gone into default or given "troubled development" status?
Yes _____ No _____
If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 20**.

- c. Has the Developer or any principal of the Developer been associated with any development that has been found in non-compliance with program requirements; i.e. an incurred 8823?

Yes _____ No _____

If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 21.**

2. Experience of General Partner. Name: _____
If entity, name of principal(s): _____

- a. Fill out the attached chart.

- b. Has the General Partner, or any of the principals of the General Partner been associated with any development that has gone into default or given "troubled development" status?

Yes _____ No _____

If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 22.**

- c. Has the General Partner or any principal of the General Partner been associated with any development that has been found in non-compliance with program requirements; ?

Yes _____ No _____

If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 23.**

3. Experience of Management Agent. Name: _____
Principal(s): _____

- a. Fill out the attached chart.

- b. Has the Management Agent, or any of the principals of the Management Agent been associated with any development that has gone into default or given "troubled development" status?

Yes _____ No _____

If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 24.**

- c. Has the Management Agent or any principal of the Management Agent been associated with any development that has been found in non-compliance with program requirements; ?

Yes _____ No _____

If "Yes", attach a detailed explanation of the situation(s) and resolution as **Exhibit 25.**

EXPERIENCE OF DEVELOPER

Name: _____

Address: _____

Phone Number: _____ Contact _____ Email: _____

Development Name	Location (City, State)	# of Units	New Construction Or Rehab	Design Type	Sources of Financing/Gov't. Programs (Bonds/9% HC/SAIL/HOME/SHIP/Conventional, etc.

EXPERIENCE OF GENERAL PARTNER

Name: _____

Address: _____

Phone Number: _____ Contact _____ Email: _____

Development Name	Location (City, State)	# of Units	New Construction Or Rehab	Design Type	Sources of Financing/Gov't. Programs (Bonds/9% HC/SAIL/HOME/SHIP/Conventional, etc.

EXPERIENCE OF MANAGEMENT AGENT

Name: _____

Address: _____

Phone Number: _____ Contact _____ Email: _____

Development Name	Location (City, State)	# of Units	Management Status (current or former)	# of Years Managed	Sources of Financing/Gov't. Programs (Bonds/9% HC/SAIL/HOME/SHIP/Conventional, etc.

V. Development SUMMARY AND TIMELINE

- A. Provide a map showing the Development's location, and the location, age, number of units and current occupancy of competing bond and HC developments within a five mile radius (info on age, number of units and occupancy can be shown on chart attached to the map). The map should also include any bond or HC developments within the same radius that are under construction or in credit underwriting either at the HFA of Hillsborough County or FHFC. Additionally, the map should show the Development's proximity to community services, medical facilities, schools, shopping, major business and employment centers, and availability of public transportation. This may be found directly behind tab labeled **Exhibit 26**.

VI. FORM OF EXPENSE AND INDEMNITY AGREEMENT

Attach as Exhibit 27 the "Form of Expense and Indemnity agreement found as Exhibit B within the "Application Procedures and Program Guidelines" handbook. An ORIGINAL SIGNATURE must be included on the form contained within the original application. Photocopies of the executed form may be utilized within the 11 copies of the application.

VII. REHABILITATION APPLICANTS ONLY SECTION

Attach as **Exhibit 28**, a detailed description of the rehabilitation activities and the status and plans for existing residents. At a minimum, the attachment should describe (i) a detail of all rehabilitation, including the rehabilitation cost per unit and the cost for each item, (ii) the current rents at the development compared to the proposed rents, (iii) the plans for the existing residents, both during and after rehabilitation, (iv) the income levels of the current residents, and whether the current residents will qualify as residents after rehabilitation, (v) a copy of any third party physical needs assessment, or explanation for why the document is not available.

VIII. CERTIFICATION AND TOTAL BOND REQUEST (Original Signatures Required)

Tax Exempt Bond Amount Requested: \$ _____

Taxable Bond Amount Requested: \$ _____

TOTAL BOND AMOUNT REQUESTED: \$ _____

The undersigned Applicant certifies that the information in this Application is true, correct and authentic.

THE APPLICANT FURTHER ACKNOWLEDGES HAVING READ ALL APPLICABLE AUTHORITY RULES GOVERNING THE PROGRAM AND ACKNOWLEDGE HAVING READ THE INSTRUCTIONS FOR COMPLETING THIS APPLICATION.

THE APPLICANT UNDERSTANDS AND AGREES TO ABIDE BY THE PROVISIONS OF THE APPLICABLE FLORIDA STATUTES AND AUTHORITY PROGRAM POLICIES, RULES AND GUIDELINES.

THE UNDERSIGNED REPRESENTS AND WARRANTS THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND ACCURATE. THE PERSON EXECUTING THIS DOCUMENT REPRESENTS THAT HE OR SHE HAS THE AUTHORITY TO BIND THE APPLICANT AND ALL INDIVIDUALS AND ENTITIES NAMED HEREIN TO THIS WARRANTY OF TRUTHFULNESS AND COMPLETENESS OF THE APPLICATION.

THE APPLICANT ACKNOWLEDGES THAT THE AUTHORITY'S INVITATION TO SUBMIT AN APPLICATION DOES NOT CONSTITUTE A COMMITMENT TO FINANCE THE PROPOSED DEVELOPMENT. **BEFORE THE AUTHORITY CAN APPROVE THE PROPOSED DEVELOPMENT FOR FINANCING, IT MUST RECEIVE STATE BOND ALLOCATION AND APPLICANTS MUST SUCCESSFULLY COMPLETE CREDIT UNDERWRITING AND OBTAIN ALL NECESSARY APPROVALS FROM THE BOARD OF DIRECTORS, AUTHORITY COUNSEL, BOND COUNSEL, THE CREDIT UNDERWRITER AND COUNTY COMMISSION AND STAFF.**

Applicant

Date

Signature of Witness

Name and Title ((typed or printed)

Name (typed or printed)

NOTE: ORIGINAL APPLICATION MUST CONTAIN AN ORIGINAL SIGNATURE OR THE APPLICATION WILL BE REJECTED AUTOMATICALLY