

Previous Participation of General Partner(s) and Developer

List all previous multifamily development experience of the general partner(s) and developer using the schedule provided in Exhibit B. Include market and affordable developments.

Previous Participation of Management

Complete the Management Agent Questionnaire and list all previous multifamily management experience using the forms provided in Exhibit C.

Development Team Information

Each member of the development team indicated by "*" must submit a résumé which lists qualifications, address, telephone number, and contact person.

- * Name of Developer
 - * Name of General Partner
 - * Name of Contractor
 - * Name of Management Company
 - * Name of Sponsoring Organization**
- **Sponsor is defined to include the owner and the managing general partner and all co-general partners of the owner or the parent corporation of the managing general partner and all co-general partners of the owner.
- * Name of Consultant
 - Name of Architect
 - Name of Tax Attorney
 - Name of Tax Accountant

Please list any direct or indirect, financial or other interest a member of the development team may have with another member of the development team. List "none" if there are no identities of interest.

Tax Credit Only

Syndication Information

A copy of the Placement Memorandum or other syndication agreements reflecting tax credit proceeds available to the development must be submitted with placed-in-service application

Provide information below concerning syndication and estimated proceeds from syndication.

Low-Income Housing Tax Credit (Annual) \$ _____ (Ten Year Credit) \$ _____

Historic Rehabilitation Credit \$ _____

Net Tax Credit Proceeds Available to the Developm (Must equal amount on line 8, page 15.) \$ _____

Net Credit Proceeds divided by Ten Year Credit** \$ _____

Equity Factor _____ %

Syndication Costs and Fees \$ _____

- Will you syndicate the development? Yes No
- If you do syndicate, what type of offering will be used? Public Private
- Type of Investor: Individuals Corporation

Attach a schedule of equity contributions including amount and time of payment. Owners utilizing the credit themselves are expected to contribute capital to the development and evidence the same.

Name of Fund _____

Name of Syndicator _____ Telephone _____

Address _____

City _____ State _____ Zip Code _____

**Final Credit Allocation Certification will be determined utilizing the greater of the equity factor indicated or the actual net proceeds received through syndication.